The Impact of Societal Stigma on Oral Health-Seeking Behaviour among the Transgender Community and Strategies to Address

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Abstract

Oral health is a vital aspect of overall well-being, yet transgender individuals often face significant challenges in accessing dental care. This review examines the impact of social stigma on the dental care-seeking behaviours of transgender populations, highlighting common oral health challenges and proposing inclusive dental practices. Many transgender individuals experience discrimination in healthcare settings, leading them to postpone or avoid dental appointments. This contributes to a higher prevalence of cavities, periodontal disease, and mucosal lesions. These oral health issues are further linked to systemic conditions, including heart disease, type 2 diabetes, and respiratory illnesses. Moreover, economic instability, lack of oral health literacy, and negative experiences with healthcare providers exacerbate mental health challenges such as anxiety, depression, and substance abuse, ultimately impairing self-care routines. This review advocates for a multifaceted approach, including cultural competency training for dental professionals, integration of LGBTQ+ health topics into dental education, and the development of gender-affirming clinical settings. Policy reforms are also necessary to expand dental insurance coverage and enforce anti-discrimination measures in healthcare. Additionally, community-based programs and tele-dentistry are highlighted as key strategies for early diagnosis and intervention. By implementing these strategies, healthcare systems can help mitigate stigma, improve access to quality dental care, and enhance the overall well-being of transgender individuals.

Keywords: Discrimination, Oral Health, Oral Diseases, Social Stigma, Transgenders.

Background and Relevance

The Importance of Oral Health as a Part of Overall Well-being

Oral health plays a fundamental role in the overall well-being of an individual, impacting the physical, mental and psychological health. According to the World Health Organisation (WHO), oral health is considered the key indicator of general health and the quality of life an individual leads [1]. Poor oral health gives rise to several oral disorders like dental caries

and periodontal diseases. The periodontal being a chronic inflammatory condition, has been bidirectionally linked to several systemic diseases and conditions, including cardiovascular diseases, type 2 diabetes mellitus, respiratory illness, rheumatoid arthritis, adverse pregnancy outcomes and so on [2–6]. Thus, prevention of these oral chronic inflammatory conditions and maintenance of good oral hygiene are of utmost importance. It not only improves the oral health-related quality of life (OHRQoL), but it

 also improves self-confidence and enhances self-esteem and the individual's social interactions.

Despite efforts on creating awareness among the public and strategising protocols to combat health silent global burden, marginalised communities, in particular, the transgender individuals, often face considerable barriers in accessing oral health care, which eventually leads to poorer outcomes [7]. The most common oral disorders, namely, dental caries and periodontal diseases and other mucosal lesions, are shown to be more prevalent among the socially disadvantaged cohorts [8]. This may be due to their economic disparity, lack of awareness and more importantly, the societal stigma they often face. It is also reported that the transgender community has been excluded while making the healthcare policies, which makes it even more challenging in the maintenance of their oral health.

By and large, there persist health disparities among the marginalised groups, who often struggle to access even fundamental medical services. Transgender individuals experience the highest rate of inequality when it comes to healthcare. Numerous studies have highlighted a high level of disproportion in oral health outcomes between the transgenders and their cisgender counterparts. Mehta et al., in 2024 [9] demonstrated that transgender individuals have shown more prevalence in dental caries, periodontal diseases and other mucosal lesions. Lack of literacy, combined with irregular or no dental visits, further exacerbates these disparities.

The intertwining of mental health, oral health and the societal stigma plays a crucial role in transgender health care. They are often forced into situations that instigate their anxiety and depression, ultimately leading them to neglect and hygiene. In addition, tobacco and alcohol abuse, being more common among transgender individuals, further add to the risk of acquiring oral diseases [10]. Thus,

addressing these disparities and assisting them in the maintenance of their oral hygiene warrants a multifaceted approach, comprising health policy reforms, education, awareness and the inclusive healthcare practice.

The purpose of this review is to explore the impact of societal stigma on the oral health-seeking behaviour of transgender individuals, the common barriers to their oral health care access, and to explore strategies to promote inclusive oral health care to this marginalised cohort.

Societal Stigma and Its Role in Oral Health-seeking Behaviour

Understanding Societal Stigma and Its Effect in Healthcare Settings

Stigma is considered a strong social force individuals marginalises based particular characteristics such as gender identity. The transgender individuals encounter a plurality of stigmas, which negatively affect their mental well-being and lead to chronic stressful conditions impacting their mental health. Studies have demonstrated that these individuals are at a higher risk of acquiring anxiety, depression and even suicidal ideation attributed to their social discrimination. The behavioural impact of stigma often culminates Healthcare avoidance, in which transgender individuals refrain from seeking care, just to avoid misjudgment; 2. Poor selfcare, in which the distress these individuals face leads them to neglect their basic oral hygiene, enhancing the risk of several dental diseases; 3. Substance abuse: to combat distress, these individuals indulge in substance abuse as a coping mechanism, which further exacerbates the oral health conditions [11, 12].

Discrimination Faced by Transgender Individuals in Medical and Dental Clinics

The majority of individuals have reported facing cruel discrimination in most of the healthcare settings, in which certain healthcare providers impulsively refuse to treat transgender individuals, let alone their basic physical/oral examination. This emanates from the historical personal biases and lack of fundamental understanding of transgender health needs. In addition, the verbal and nonverbal harassment in the form of inappropriate questioning and attitudes contributes to mental distress in healthcare settings. Moreover, some health care providers intentionally delay the treatment procedures or render careless and substandard care, imparting a strong distrust among transgender individuals in the complete health care system [13, 14]. A previous study has reported that over 50% of the transgender individuals have never visited a dental clinic due to the fear of denial in a populous city in India [15].

Lack of Gender-Affirming and Inclusive Healthcare Services

Despite social advancements in LGBTQ+ rights, most healthcare providers remain unaware and underprepared to render care for transgender individuals efficiently. This may be attributed to the lack of training among the healthcare system, in which the professionals in medicine and dentistry lack proper education on this cohort's health needs, often leading to insensitive therapeutic approaches. Most of the hospitals or the dental setups do not facilitate gender neutral restrooms, which goes to show that gender diversity is still unrecognisable in a country like India. Moreover, in many countries. including India, transgender individuals are excluded from policies of insurance coverage for their healthcare needs. [16].

Fear and Distrust in the Healthcare System

Owing to the repetitive negative experiences, most of the transgender individuals develop a propensity towards distrust. The fundamental fear of mistreatment leaves them devoid of basic fundamental rights in the healthcare settings, which ultimately deters them from seeking dental care in the

future. There are reports that transgender is lack basic respect from most professionals who fail to even acknowledge their gender identity, which leaves them in a scenario of unwelcoming and undervaluing. Thus, there is immense evidence to show that stigma plays the pivotal role in discouraging transgender individuals from accessing oral health care. Whatever the form may be, including self-stigma or societal discrimination, the negative impact is evident that transgender individuals exhibit poor oral health due to the neglect and fear of misjudgment or mistreatment [17].

Barriers to Oral Health Care Access

Transgender individuals face innumerable barriers in seeking oral health care, eventually leading to disparities in oral health outcomes. These barriers comprise and emanate from social discrimination, their financial constraints, the lack of gender affirming services, and, more importantly, the limited provider knowledge. The fear of denial is a never-ending issue that worsens their oral health conditions.

Systemic Barriers to Seeking Oral Healthcare

The systemic barriers are divided into four key categories, including, 1. financial barriers, where many transgender individuals, due to their employment discrimination, face economic instability, leading to inability to access dental care due to financial constraints; 2. the lack of cultural competence originating from the lack of training among the professionals, leading to excessive discomfort and poor interactions among the health care providers and the transgender patients; 3. the psychosocial barriers have occupied the majority of weightage in this category in which the fear of being discriminated, the inbuilt and habituated stigma and the negative experiences in the past often discourage these cohorts from accessing prompt dental care; 4. the structural barriers have also known to alienate these

patients due to a lack of gender confirming policies in most of the clinics, and non-inclusive, medical proformas and the lack of fundamentals about the transgender's oral health [18, 19].

Other Critical Barriers

Another category of critical barriers is the lack of oral health awareness and literacy among the transgender community. These individuals possess knowledge that is barely sufficient to maintain hygiene and indulge in preventive care. Studies have attributed this barrier to the negligible access to several education programmes that are targeted at the transgender community, conducting awareness campaigns, which focus on oral hygiene maintenance, substance abuse, association programmes and the acquired risk of poor oral health among transgender individuals [16].

Breaking Barriers: Strategies To Address Inclusive Oral Health Care

Breaking the societal stigma encroaching the health care system of transgender individuals, specific to oral health, warrants multifaceted interventional methodologies that pave an uninterrupted path to making reformations in policies, attaining sufficient education and society-driven solutions. These strategic movements may create an ambience conducive for gender- affirming, equity in healthcare systems and promote awareness to enhance the oral health seeking behaviour of these marginalised communities. A detailed literature review summarising key studies on the oral health aspects of transgender individuals is given in Table 1.

Table1. Literature Review: Summarising Key Studies

Author & Year	Type/Design of Study	Purpose of Study	Inference	Conclusion
Fakhrjahani <i>et al.</i> , 2023 [25]	Scoping Review	Investigate oral health outcomes and service utilization among 2SLGBTQ+ individuals.	Transgender individuals face poorer oral health outcomes due to stigma and a lack of access.	More comprehensive studies are needed to understand barriers and improve access.
Sathyanarayanan & John, 2022 [15]	Closed-ended questionnaire survey	Evaluate oral health attitudes and practices among transgender individuals in Puducherry.	47% of respondents never visited a dentist due to fear of discrimination.	Awareness programs and inclusive healthcare policies are needed.
Kumar G et al., 2023 [26]	Questionnaire- based Study	The barriers and facilitators of dental care utilisation wear explored	The LGBTQ community have varied health care needs	The dental professionals should learn to address the oral health problems in such vulnerable groups.
Manpreet et al., 2021 [27]	Cross-Sectional	Assess oral health parameters, including Candida growth,	Transgender individuals presented with	Regular oral health check-ups and

Mehta <i>et al.</i> , 2024 [9]	Systematic Review & Meta-Analysis	among transgender adults. Analyse oral health status and disparities among transgender populations in India.	poor periodontal health and higher Candida levels than cisgender controls. Transgender individuals have higher rates of untreated dental caries and periodontal	education are required. Targeted interventions and policy changes are needed.
Marlecha et al	Cross-sectional	To evaluate the oral	disease. Overall oral	Dental institutions
Marlecha et al., 2020 [28]	Study Study	health status, knowledge and dental utilisation barriers among the transgenders in Chennai city	health was very poor, with more than 50% of affected subjects presenting with untreated carious teeth, and more than 60% of the subjects had never visited the dental clinic.	Dental institutions and government agencies must intervene promptly to improve the oral health quality of the transgender community.
Raisin JA et al., 2023 [29]	Questionnaire- based study	The experiences in the dental setting due to gender-identity related factors, subjective oral health and avoidance of care were examined.	Misgendering was reported by one-third of the subjects, and more than half felt that the healthcare system was not sufficiently equipped to provide appropriate care.	Their needs are often unmet in the dental set-up, which probably contributes to dental care avoidance and exacerbates oral health disparities.

Creating Inclusive and Gender-Affirming Dental Environments

The most important reason that a transgender individual hesitates to access oral care is the lack of gender affirming ambience in regular clinical setups. The professionals must be

imparted with fundamental knowledge of competency training to make sure that transgender individuals perceive respect and comfort while seeking care at the dental office. Thus, intensive training should be propagated throughout the healthcare system in the form of

workshops for the professionals and the clinical staff members which will educate them on important issues the transgenders face, like gender dysphoria [20]. These programs must also address biases against these individuals and the ensuing misconceptions, and eventually, inculcate inclusive care.

The dental education system should incorporate LGBTQ+ health care topics in the dental curriculum, which will teach students at the very basic level how to build a positive interaction with such patients. In addition, compulsory clinical-based learning should be insisted on, so that the future professionals adapt easily to render inclusive care [21].

Policy Interventions for Transgender Healthcare Equity

Government policies need to make an inclusion of dental care in the transgender healthcare plans. Employment discrimination and coverage about existing health care policies prevent these individuals from accessing dental insurance. Thus, expansion of the private and public health sector insurance to cover essential dental procedures for the transgenders is pivotal [22]. In addition, the government can introduce the provision of free or reasonably priced dental care. To support such initiatives, the policymakers should include free dental camps and government-aided dental settings in their respective communities.

Anti-Discrimination Laws in Healthcare

Stringent laws must be mandated to ensure non-discriminatory practices in the health care system, so that the professionals cannot deny offering dental care based on personal biases. In addition, any such discrimination in the healthcare system should be deemed a penalty. Moreover, the transgender advocacy organising groups must cordially integrate with the policymakers for inclusive dental care. Community-based activism should be taken into force to provide awareness and obtain appropriate protection under law. In such ways,

these groups may support, bridge the gap in accessing oral health services.

Community-based Oral Health Programs

The community involvement in such issues plays a vital role in lessening the stigma and enhancing awareness among transgender individuals. Several outreach programmes and free dental camps should be deployed to render basic screening, oral examination, additional diagnostic procedures and essential treatment procedures. In addition, the outreach programs enthusiastically collaborate with me, LGBTQ+ organisations, to conduct oral health awareness campaigns for inculcating the knowledge of preventive care and basic oral hygiene among transgender individuals [23]. Moreover, the peer support and community care workers may aid in implementing insurance claims.

Digital Health and Tele-Dentistry Solutions

The concept of telemedicine can be effectively incorporated into oral health consultations for such patients. Tele dentistry organises the individuals to consult remotely with the care providers, which helps to overcome fear and anxiety, due to in-person visits [24]. Such consultations can ensure early diagnosis and basic guidance in attaining oral health. In addition, social media can be utilised to propagate awareness campaigns on oral health information. Engagement of LGBTQ+ influencers to share their experiences and methods to maintain oral health care can enhance proficient outreach. Video and audio tutorials on the maintenance of oral hygiene and the prevention of oral diseases can be customised for the transgender community.

Conclusion

Societal stigma persistently impacts the oral health-seeking behaviour of these marginalised communities, leading to avoidance of basic dental care, which worsen their oral health outcomes. Effective strategies should be implemented to enhance access to healthcare, introducing gender- affirming dental ambience,

reformations in policy-making, communitybased outreach programmes and telly dentistry approaches. A call to action is utmost warranted to incorporate changes in policies, create awareness, to promote inclusivity in dental healthcare systems. Moreover, the care community workers providers, and policymakers must collaborate efficiently to eliminate discrimination, provide cultural competency training to providers and thus provide equitable healthcare for individuals on a global scale.

Acknowledgements

The authors wish to express their gratitude to Saveetha University Management for their invaluable support in providing the necessary

References

- [1]. Baiju, R. M., Peter, E., Varghese, N. O., & et al., 2017, Oral Health and Quality of Life: Current Concepts. *J Clin Diagn Res.* 11: ZE21–ZE26.
- [2]. Shetty, B., Fazal, I., Khan, S. F., & et al., 2023, Association between cardiovascular diseases and periodontal diseases: More than what meets the eye. *Drug Target Insights.* 17: 31–38.
- [3]. Sowmya, S., Haripriya, A., 2024, The Influence of Epilepsy on Oral Health Outcomes: A Retrospective Study in South Indian Adults. *Cureus*. 16: e66101.
- [4]. Sowmya, S., Sangavi, R., 2024, Effectiveness of Oral Health Education and Interventions in Improving Oral Health Outcomes in Type II Diabetes Mellitus Patients: A Prospective Study. *Cureus.* 16: e58227.
- [5]. Araújo, V. M. A., Melo, I. M., & Lima, V., 2015, Relationship between Periodontitis and Rheumatoid Arthritis: Review of the Literature. *Mediators Inflamm.* 2015: 259074.
- [6]. Daalderop, L. A., Wieland, B. V., Tomsin, K., & et al., 2018, Periodontal Disease and Pregnancy Outcomes: Overview of Systematic Reviews. *JDR Clin Trans Res.* 3: 10–27.
- [7]. Indiran, M. A., Pandiyan, I., Doraikanan, S., & et al., 2024, Oral Health Status and Oral Health-

infrastructure and financial resources to carry out this research.

Conflict of Interest

The authors certify that they have NO affiliations with or involvement in any organization or entity with any financial interest (such as honoraria; educational participation in speakers' bureaus; membership, employment, consultancies, stock ownership, or other equity interest; and expert testimony or patent-licensing arrangements), financial interest (such as personal affiliations, relationships, professional knowledge or beliefs) in the subject matter or materials discussed in this manuscript.

- related Quality of Life among Construction Workers in Chennai City: A Cross-sectional Study. *World Journal of Dentistry*. 15: 248–252.
- [8]. Saravanan, N., Thiruneervannan, R., & Christopher, P., 2014, A Study to Assess the Periodontal Status of Transgender in Chennai City. *Biosci Biotechnol Res Asia.* 11: 1673–1678.
- [9]. Mehta, V., Negi, S., Mathur, A., & et al., 2024, Oral health status among the transgender population of India: A systematic review and meta-analysis. *Spec Care Dentist.* 44: 1535–1546.
- [10]. Gilbert, P. A., Pass, L. E., Keuroghlian, A. S., & et al., 2018, Alcohol research with transgender populations: A systematic review and recommendations to strengthen future studies. *Drug Alcohol Depend.* 186: 138–146.
- [11]. Falck, F., & Bränström, R., 2023, The significance of structural stigma towards transgender people in health care encounters across Europe: Health care access, gender identity disclosure, and discrimination in health care as a function of national legislation and public attitudes. *BMC Public Health.* 23: 1031.
- [12]. White Hughto, J. M., Reisner, S. L., & Pachankis, J. E., 2015, Transgender stigma and health: A critical review of stigma determinants, mechanisms, and interventions. *Soc Sci Med.* 147: 222–231.

- [13]. Seelman, K. L., Colón-Diaz, M. J. P., LeCroix, R. H., & et al., 2017, Transgender Noninclusive Healthcare and Delaying Care Because of Fear: Connections to General Health and Mental Health Among Transgender Adults. *Transgend Health*. 2: 17–28.
- [14]. Knaak, S., Mantler, E., & Szeto, A., 2017, Mental illness-related stigma in healthcare: Barriers to access and care and evidence-based solutions. *Healthc Manage Forum.* 30: 111–116.
- [15]. Sathyanarayanan, U., & John, B., 2022, Oral health-related attitude and practices of transgender population in Puducherry UT, India—A cross-sectional questionnaire survey. *J Family Med Prim Care*. 11: 1815.
- [16]. Safer, J. D., Coleman, E., Feldman, J., & et al., 2016, Barriers to healthcare for transgender individuals. *Curr Opin Endocrinol Diabetes Obes*. 23: 168–171.
- [17]. Tamrat, J., 2022, 'Trans-forming' dental practice norms: Exploring transgender identity and oral health implications. *Can J Dent Hyg.* 56: 131–139.
- [18]. Malik, Z., Holden, A. C. L., Sohn, W., & et al., 2021, A disability-based exploration of psychosocial barriers and enablers to accessing dental services for people with clinically severe obesity: A qualitative study. *Clin Obes.* 11: e12429.
- [19]. Bjørkvik, J., Henriquez Quintero, D. P., Vika, M. E., & et al., 2022, Barriers and facilitators for dental care among patients with severe or long-term mental illness. *Scand J Caring Sci.* 36: 27–35.
- [20]. Puckett, J., Giffel, R., Brown, F., & et al., 2024, Suggestions for improving healthcare for transgender and gender-diverse people in the United States. *Int J Transgend Health.* 25: 233–250.
- [21]. Haley, C. M., Macri, D., Perez, H. L., & et al., 2022, LGBTQ+ and dental education: Analyzing the

- present and recommendations for the future. *J Dent Educ.* 86: 1191–1197.
- [22]. Stroumsa, D., 2014, The state of transgender health care: Policy, law, and medical frameworks. *Am J Public Health*. 104: e31-8.
- [23]. Hilgeman, M. M., Lange, T. M., Bishop, T., & et al., 2023, Spreading pride in all who served: A health education program to improve access and mental health outcomes for sexual and gender minority veterans. *Psychol Serv.* 20: 596–608.
- [24]. Islam, M. R. R., Islam, R., Ferdous, S., & et al., 2022, Teledentistry as an effective tool for the communication improvement between dentists and patients: An overview. *Healthcare (Basel)*. 10. DOI: 10.3390/healthcare10081586.
- [25]. Fakhrjahani, I., Tiwari, T., Jessani, A., & et al., 2024, A Scoping Review of Oral Health Outcomes and Oral Health Service Utilization of 2SLGBTQ+People. *JDR Clin Trans Res.* 9: 199–211.
- [26]. Kumar, G., Brahma, P., Jena, S., & et al., 2023, Barriers in Dental Care Utilization—An Explorative Study among Transgender Community of Bhubaneswar, Odisha. *J Pharm Bioallied Sci.* 15: S888–S891.
- [27]. Manpreet, K., Ajmal, M. B., Raheel, S. A., & et al., 2021, Oral health status among transgender young adults: A cross-sectional study. *BMC Oral Health*. 21: 575.
- [28]. Marlecha, R., Mary, V., Ramakrishnan, K., & et al., 2020, Oral health status, dental awareness, and dental services utilization barriers among transgender population in Chennai. *Drug Invention Today*. 14: 1143–1148.
- [29]. Raisin, J. A., Keels, M. A., Roberts, M. W., & et al., 2023, Barriers to oral health care for transgender and gender nonbinary populations. *J Am Dent Assoc.* 154: 384-392.e4.