Please have a couple sheets of paper and writing instrument ready for this presentation



#### PREPARED FOR

# Working with Transgender Clients 101



Brazos Valley Child Advocacy Center

Where the healing begins



Presenter:

**Katrina Stewart** 

Pride Community Center, Inc

**Executive Director** 



#### Pretest:

 Before we begin today there is a pre-test poll I would ask that you participate in to measure presentation effectiveness



#### Resources:

- State Organization: Transgender Education Network of Texas
- Texas A&M: Transcend, Texas A&M University Student Group
- Brazos Valley: Pride Community Center
  - Peer-led Support and Stigma Reduction Initiative
    - Gender Affirming Support Group: 2<sup>nd</sup> Monday every month, 6-7pm, Friends Congregational Church, UCC
    - ► Sexuality Affirming Support Group: 3<sup>rd</sup> Sunday every month, 7pm, Square One Downtown Bryan Event Center & Loft

### Perspective:

#### GOALS/ OPERATIONAL INFLUENCE:

Our goal in this workshop is to develop an appreciation of clients whose sexual orientation and/or gender identity is not normally discussed in traditional health care modalities. By the end of this workshop you should be able:

- Develop a culturally competent approach to clients
- Understand some of the challenges faced by such clients
- Work towards become wholly client centered.
- If you remember one thing from today it should be that transgender clients are resilient. The effects we discuss today are items that may keep clients from coming to you because of our society's stigma about such clients. It is not a statement about self-worth or a comment that transgender people are victims



FireRose tattoo popularized by Lady Gaga in solidarity with Survivors of sexual assault

#### Operational Paradigm

 Empowering health must be informed by the diverse

lives of clients



**Artwork: Daniel Arzola** 

#### Operational Paradigm

- Empowering health must be informed by the diverse lives of clients
- Supporting people where they are at means shifting one's paradigm to be inclusive of a variety of social justice topics



#### Empowering health must be informed by the diverse lives of clients

- Supporting people where they are at means shifting one's paradigm to be inclusive of a variety of social justice topics
- Service to our clients means looking critically at our legal, law enforcement and healthcare systems and the biases inherent in them

#### Operational Paradigm



# Transgender Children and Youth

cultivating pride and joy with families in transition

Elijah C. Nealy



# THE STATS: Realities **Privilege** SOCIAL **Provider Expectations EXPECTATIONS FACILITY POLICIES** Gender Institutional Bias/ Ignorance Image by <u>hamiltonich</u> from <u>Pixabay</u>

#### Client-Centered Care

- We exist in context
- Context is infrastructural, cultural, and the language we use to talk about clients
- Such context influence who seeks help from us
- Context influences how we perceive and interact with clients.

# SOCIAL **Privilege EXPECTATIONS** Gender Image by <u>hamiltonjch</u> from <u>Pixabay</u>

#### Client-Centered Care

- General Social Concepts that influence our perception
  - Identity
  - Gender
  - Privilege
  - Social Expectations

- Transgender Statements and Microagressions
  - What are some things you hear about transgender people in particular and LGBTQ+ people in general?



Image by <u>Gordon Johnson</u> from <u>Pixabay</u>

- Transgender Statements and Microagressions
  - Being Gay is a choice



- Transgender Statements and Microagressions
  - Being Gay is a choice
  - There is no such thing as "transgender"





#### Transgender Statements and Microagressions

- Being Gay is a choice
- There is no such thing as "transgender"
- Expectation that LGBTQ+
  "ease up" on their identities
  around people that may
  fee awkward about them



#### Who are LGBT clients?

- LGBT is not one word
- All ages, races, religions, & cultures
- Single, divorced, partnered/married, parents, families
- Uninsured, Under-insured, and insured
  - (LGBT Persons up to 2X more likely to be uninsured due to lower income levels, lack of partner/marriage benefits)





Person of Faith WHITE

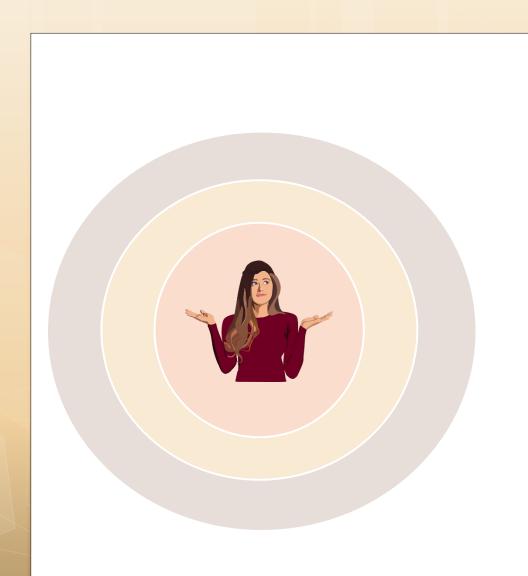
PROFESSIONAL

COLUMN FATHER

LIBERAL CONSERVATIVE **STRAIGHT** Brother SISTER EDUCATOR MOTHER

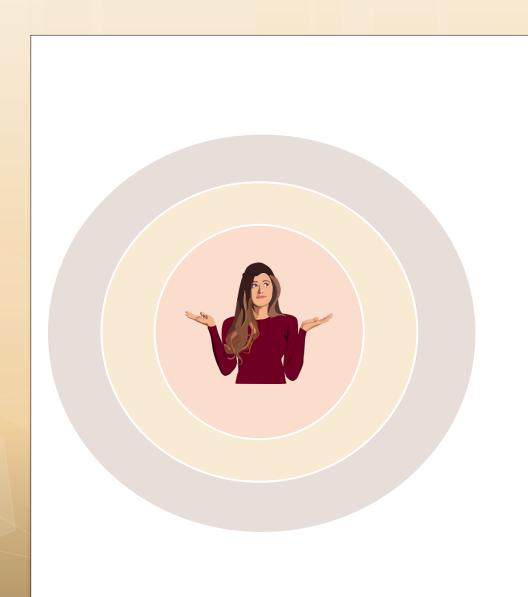
### Identity Activity

- Voluntary
- Stand Up When Identity Called



# Identity Activity

- How would it feel for someone to constantly invalidate your core self?
- Why is it easier to dismiss another's identity or some identities, but not others?
  - Privilege
  - Social Sanction on certain identities in both negative and positive ways



## Identity Activity

- Some identities are core to us, some are more peripheral
- Who we are at our core is unprovable to anyone outside of us. Depending on our privilege we may "explain" that identity with "science" but it is still not observable phenomenon
- How would it feel for someone to constantly invalidate your core self?

#### TRANSGENDER STUDENTS IN SCHOOL

# ALMOST 2% OF HIGH SCHOOL STUDENTS IDENTIFY AS TRANSGENDER

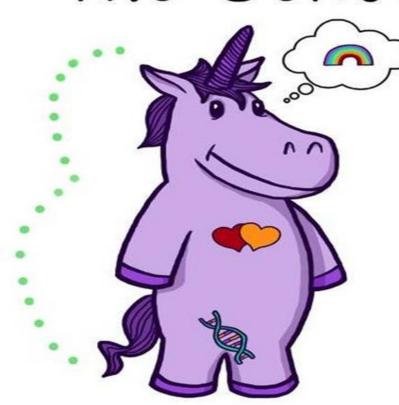


large urban school districts (N+131,901 students) as published in Johns, et al. M

- Identity and how we see ourselves is crucial in each of our lives
  - VP Pence even states
    - "I am Christian, Conservative, then Republican"
    - This is identity
- Gender..Sexual
   Orientation...Gender
   Expression...are all different aspects of identity

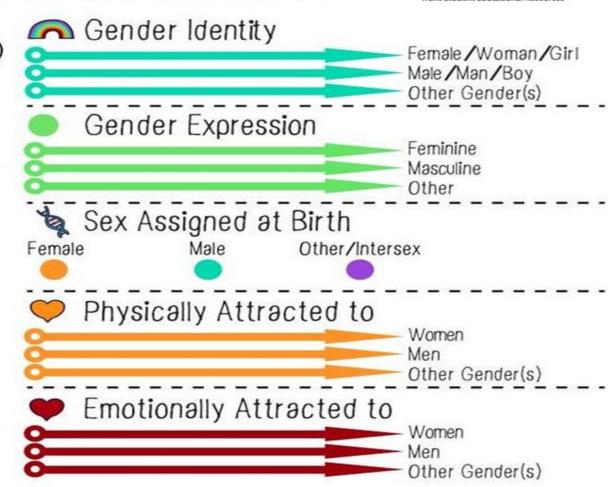
# The Gender Unicorn





To learn more, go to: www.transstudent.org/gender

Design by Landyn Pan and Anna Moore



#### Gender Identity Female / Woman / Girl Male/Man/Boy Other Gender(s) Gender Expression Feminine Masculine Other Sex Assigned at Birth Female Male Other/Intersex Physically Attracted to Women Men Other Gender(s) Emotionally Attracted to Other Gender(s)

- We each have a gender identity, a sexual orientation, a way in which we express our gender
- Infinite variety and distinct from one another

#### Gender Identity Female/Woman/Girl Male/Man/Boy Other Gender(s) Gender Expression Feminine Masculine Other Sex Assigned at Birth Male Other/Intersex Female Physically Attracted to Women Men Other Gender(s) Emotionally Attracted to Other Gender(s)

#### NOTE: Sexual Orientation

- Sexual Orientation is about attraction
  - We often get wrapped up in the sex part and stuck
  - It is about attraction, physical and emotional
- Circle at beginning of line represents the zero or "not" status
- This discussion leaves out people for whom sexual expression is not part of their personhood

#### #XP EE6#P#, 2∞15% ACE DAY -If you identify anywhere along the asexual spectrum, please participate Ace Day on May 8th, posting your card and tagging it with #ace day. Demi-a/Grey-a: Experiences romantic and or sexual attraction only if a strong emotional bond is established OR Alloromantic Asexual: experiences romantic and or experiences romantic sexual attraction rarely/only attraction regularly under certain circumstances/ toward one or more fluctuates between periods genders. of experiencing attraction and not experiencing it. Aromantic Asexual: Queopn\_voice\_crocks does not experience romantic OR sexual attraction to any gender.

# Asexuality

- According to the Asexual Visibility Network (AVEN), an asexual persons romantic orientation determines "Which gender(s), if any, they are inclined to form romantic relationships with."
- There are also individuals in the asexual community who identify in the gray area between asexuality and sexuality

# **EVERYONE SHOULD** BE ABLE TO WEAR THE UNIFORM THAT MAKES THEM COMFORTABLE. NO ONE SHOULD BE MADE TO FEEL UNEASY, **ESPECIALLY WHEN** THEY'RE AT SCHOOL.

- Privilege influences whether we "see" the identity of others
- Privilege impacts which identities are socially sanctioned.

#### Something to consider





ASSAULT IS ABOUT POWER

**ASSAULT IS ABOUT CONTROL** 

ASSAULT IS USED TO "CORRECT" OR "CONTROL" SOMEONE TO BE HOW ANOTHER PERSON WANTS THEM TO BE

#### THIS COULD BE TO:

- "CHANGE SOMEONE'S ORIENTATION",
- "TO SHOW THEM THAT SEX IS ENJOYABLE (BECAUSE THEY ARE ASEXUAL)"
- "TO TEACH THEM THE RIGHT GENDER THEY ARE"

IT IS ALL STILL ASSAULT AND ABOUT CONTROL OVER ANOTHER

What are some characteristics or attributes traditionally associated with boys, men, Masculinity?



What are some characteristics or attributes traditionally associated with girls, women, femininity?



• Take a piece of paper

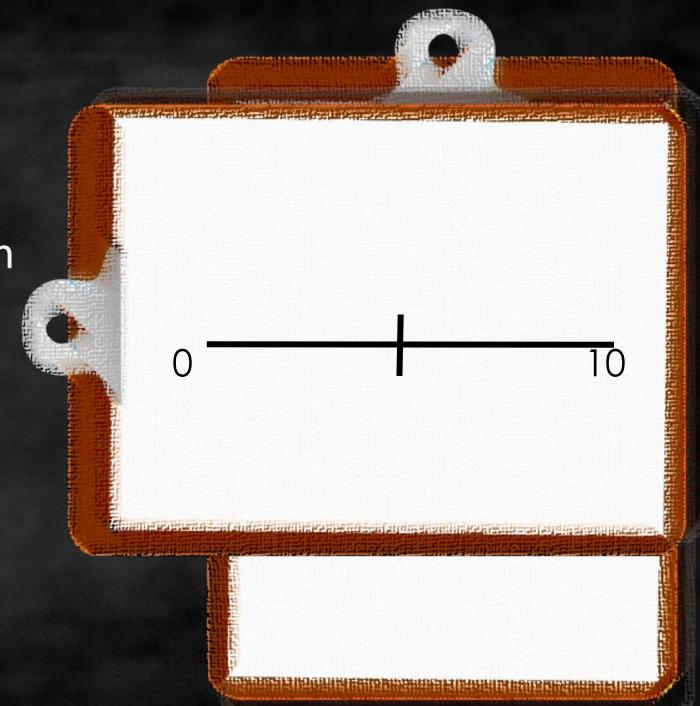
Turn to landscape orientation

Draw a horizontal line in the center

•Place a tick mark at the midpoint

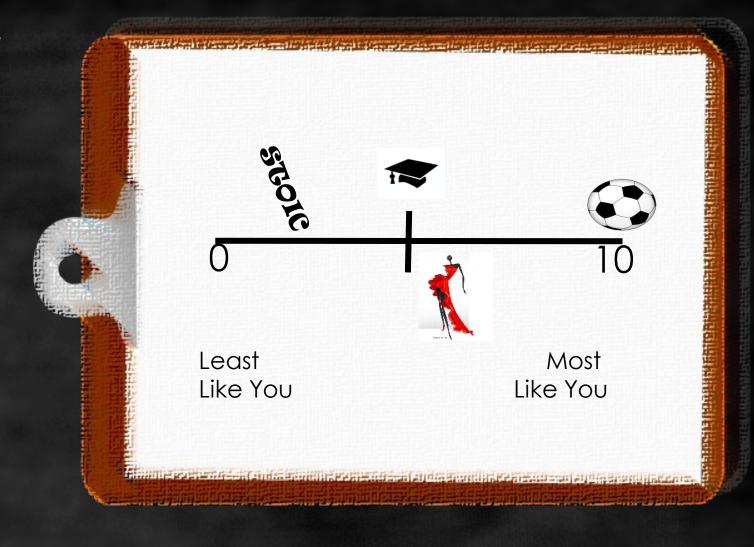
Label the left side zero

• Label the right side 10



ol will call out a series of attributes we just listed

With zero indicating least like you and 10 most like you, mark where that attribute describes you on the line (you can use words, illustrations, whatever



#### Were you surprised by what you discovered about yourself in this

activity?

- Did you place any attributes not normally associated with the gender you identify with near 10 or past the midpoint.
- Did any of the attributes that describe your gender identity get placed on the "0" side of the midpoint?

#### Discussion

- O Do you feel that any of these attributes might be based on context?
  - Ex. Home vs Work
  - Interacting with clients vs Playing a sport

- Think of the equalizer on your stero system
- o Instead of Bass/ Treble, or Low, Mid, and High Gain think of "Agentic" vs "Communal"
  - Agentic involves agency, self agency or agency imposed or given
  - Communal involves cooperative, community based, sharing expression

# Another way to view gender/expression







#### What is Gender?



Image by <u>Amanda Elizabeth</u> from <u>Pixabay</u>

- What is gender?
  - Is it what is in your heart or what secondary sexual characteristics you have
  - Many people conflate gender and sex

#### What is Gender?



- Let's Dig Deeper
  - What do we use to signify what someone's gender is?
    - Expression?
    - Morphology?
  - Can that protocol that we use change over time?
  - Does it vary across cultures?
  - Is gender a socially learned concept?
  - What about our expectations of others because of their gender? Is that dynamic or static?

#### Gender is a Social Construct

- Gender is something we culturally define
  - It is a construct of society and culture
  - Even as a definition, definitions are socially defined
  - Understandings of words, their connotation and denotation can change over time

## SOCIAL CONSTRUCTIONISM

is a theory that believes that the meanings we attach to objects are the result of collective social agreement and conventions.

Buzzle.com

#### Sex is a Social Construct

- Sex is also a social construct
  - How we have defined it has sharpened over time and now includes gonadal, hormonal, and genetic components verse "outtie parts" verses "innie parts"
  - We cannot see into the person's psyche or understand who they will be in and of themselves by physical characteristics
  - We cannot even totally identify physical constructs
    - Intersex Individuals
    - 1 in 1000 live births



"UP TO 1.7% OF THE POPULATION IS BORN WITH INTERSEX TRAITS, ACCORDING TO THE UNITED NATIONS — A FIGURE ROUGHLY EQUIVALENT TO THE NUMBER OF REDHEADS."

-- MODEL HANNE GABY ODIELE REVEALS SHE IS INTERSEX

#### Sex is a Social Construct

- Preferred terminology "Sex Assigned at Birth"
  - Honors who one sees themselves as later in life
  - Honors that the facts of determining sex are really not so clear cut.





#### **Role Play**

- Pair off
- Pretend you have been in an accident and are talking with police dispatch to get help
- To start that off, introduce yourself and your pronouns.
   Ask the same of the person on the phone
- Look at each other
- Provider role, purposely misgender the client
  - Use the wrong pronouns
  - Be creative, but keep misgendering

## Group Activity



## Socialization Impacts

## Social Expectations and Gender Policing

- Subtle and overt ways in which those around us reward or criticize in ways that maintain culturally defined gender roles and expectations base on perceived sex
  - Not "GOOD" or "BAD", just a mechanism by which culture acts.











## Socialization Impacts

- Normative behavior correction not only prescribes how to act if one is a "man" or a "woman", but it marginalizes and stigmatizes those who do not follow the expected script.
- This Therefore marginalizes those whose core identity does not fit the social construct of gender stigmatization playing a large role in the daily reality of transgender and GNC clients

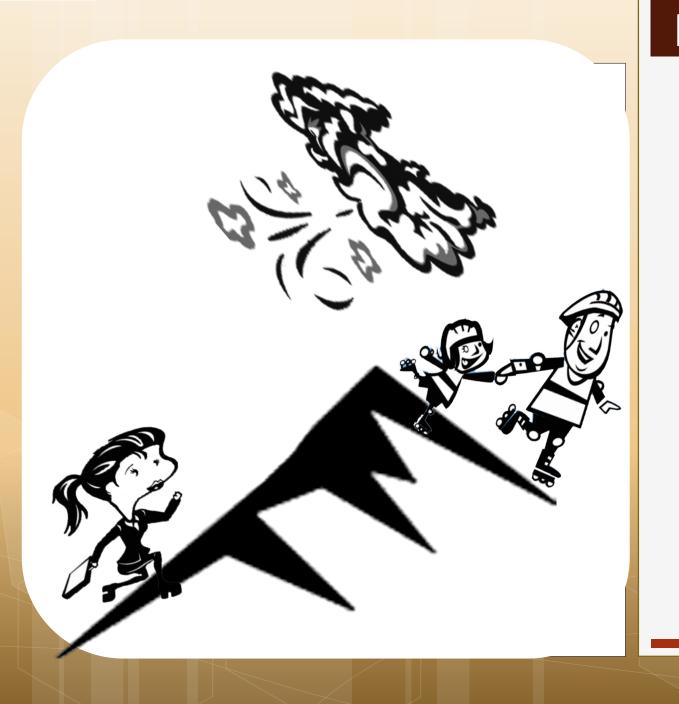




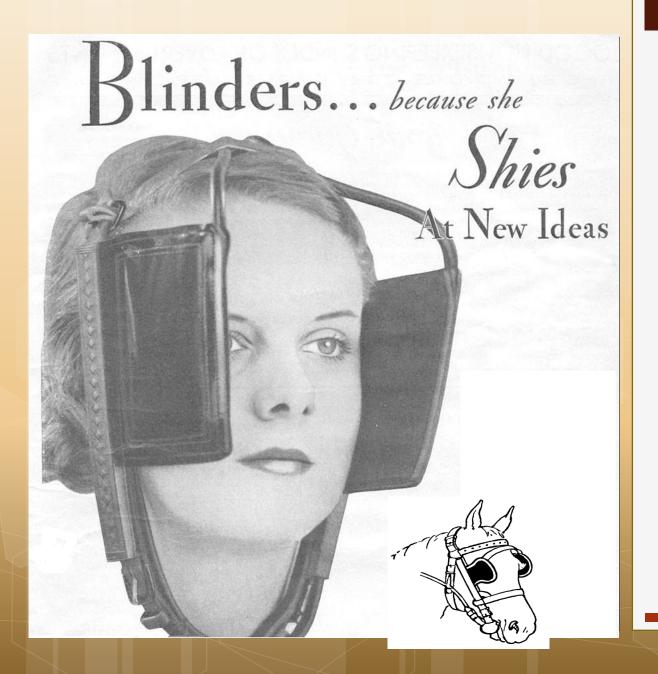
• What is Privilege?



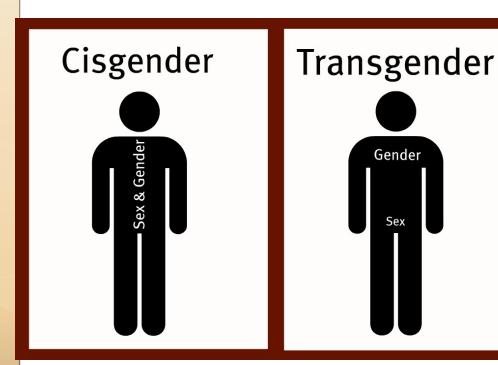
- What is Privilege?
- A social force the propels those that match preset characteristics forward or makes social movement "easy", or "frictionless"



- Stigmatization marginalizes or acts in opposition to privilege
- The same force that makes social movement easier for cisgender persons makes other things harder for transgender and GNC clients



- Privilege blinds against the realities of others
- We all maintain positions of privilege and lack of privilege based on certain identities we hold
- Understanding that privilege is not "bad", but that it colors our perception helps us to more attentively listen and be present



## Cisgender Privilege

- Trans = across from / opposite from
- Cis = same planar sideas, same as
- Transgender people identify as a gender that does not match their sex assigned at birth
- Cisgender persons identify with the gender that matches their sex assigned at birth

## Cisgender Privilege

#### **Examples of Cisgender Privilege**

- 1. I can use public restrooms without fear of verbal abuse, physical intimidation, or arrest
- I can use public facilities such as gym locker rooms and store changing rooms without stares, fear, or anxiety.
- Strangers don't assume they can ask me what your genitals look like and how I have sex.
- My validity as a man/woman/human is not based on how much surgery I've had or how well I "pass" as non-transgender.
- I have the ability to walk through the world and generally blend-in, not being constantly stared or gawked at, whispered about, pointed at, or laughed at because of my gender expression.
- I can access gender exclusive spaces such as the Michigan Womyn's Music Festival, Greek Life, or Take Back the Night and not be excluded due to my trans status.
- 7. Strangers call me by the name you provide, and don't ask what my "real name" [birth name] is and then assume that they have a right to call me by that name.
- I can reasonably assume that my ability to acquire a job, rent an apartment, or secure a loan will not be denied on the basis of my gender identity/expression.
- I have the ability to flirt, engage in courtship, or form a relationship and not fear that my biological status may be cause for rejection or attack, nor will it cause my partner to question their sexual orientation.
- 10. If I end up in the emergency room, I do not have to worry that one gender will keep me from receiving appropriate treatment, or that all of my medical issues will be seen as a result of my gender.



## Myths

## Myths

**Privilege** 

SOCIAL EXPECTATIONS



Image by <u>hamiltonjch</u> from <u>Pixabay</u>

- 3 years olds cannot possibly know their own sexual orientation or gender identity
- Sexual Violence turns someone "Gay, Lesbian, or Transgender"
- Letting transgender people use the restroom that matches their gender identity will open the door for sexual assault
- Transgender Youth should not be allowed to participate in sports of the gender they identify as

## Age of Knowing

#### • How does gender identity develop in children?

- Gender identity typically develops in stages:
  - Around age two: Children become conscious of the physical differences between boys and girls.
  - Before their third birthday: Most children can easily label themselves as either a boy or a girl.
  - By age four: Most children have a stable sense of their gender identity.
- During this same time of life, children learn gender role behavior—that is, doing "things that boys do" or "things that girls do." However, cross-gender preferences and play are a normal part of gender development and exploration regardless of their future gender identity. See <u>The Power of Play How Fun and Games Help Children Thrive</u>.
- The point is that all children tend to develop a clearer view of themselves and their gender over time. At any point, research suggests that children who assert a gender-diverse identity know their gender as clearly and consistently as their developmentally matched peers and benefit from the same level of support, love, and social acceptance.

#### • References:

- http://bit.ly/GenderDevelop ment\_Children
- https://www.thebody.co m/article/fact-sheetlesbian-gay-bisexualtransgender-youth-issues



## Age of Knowing

- When did most people know they were not straight
  - It differs for different people
  - Try not to conflate the act of sex with physical and/or emotional attraction
  - Usually by adolescence prior to knowledge of sex, but not for everyone
    - July 18, 2011 <u>American Psychological</u> Association

#### o References:

o <a href="https://borngay.procon.org/q">https://borngay.procon.org/q</a>
<a href="https://borngay.procon.org/q">uestions/is-there-an-age-by-which-people-realize-their-sexual-orientation/</a>

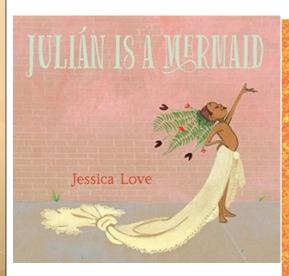
reference warning: citation from the Traditional Values Coalition

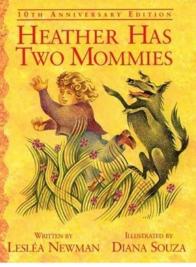
## Age of Knowing

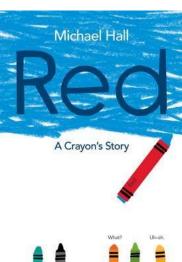
- O How can you be supportive
  - Inclusive books and activities in your environment
  - More later in the presentation, but address youth how they want to be addressed

#### o References:

https://www.goodreads.com/list/s how/136871.LGBTQ\_Books\_for\_ Children

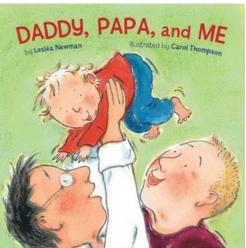














#### Turning Gay, Lesbian, or Trans



- Sexual Violence can cause all sorts of effects in the body and mind we do not currently know about
- o If sexual assault turned people gay or trans the numbers of gay or trans people might be much more different considering the amount of sexual violence in our country
- Is this idea transphobic or at least trans\* ignorant
  - le: people are "that way" because something bad happened to them
  - le. People could only be "that way" if something bad had happened to them



- Corrective Rape is a serious concern domestically and abroad.
   We have a duty to address it in our own communities
- Corrective Rape often used to do the reverse, turn someone from trans to "normal" ie. Brandon Teena
- One child abuse survivor said that gender identity was a factor in not reporting the abuser: "By me putting up with it, I thought it would help me to be 'normal,' not transgendered or lesbian."

#### Turning Gay, Lesbian, or Trans



o "My family seems to think that because I was abused as a child this is the reason for me being transgender. They also think that with enough therapy my brain will "switch back" to thinking I am a girl. I whole heartedly do NOT believe this to be true. Is this even a possibility? Can sexual abuse cause people to become gay or transgender? (I seriously doubt it but some external input and experience with the issue would be nice) Thanks in advance, Oak



o ""I don't know if this was a negative impact or not, but several of the mental health providers whom I saw suggested that my sexual and/or gender ambiguity was caused by the sexual abuse. I bought that at first. I don't believe that to be true anymore. I've healed from the sexual abuse—truly—and I remain sexually/gendered ambiguous. This is just who I am. Maybe more sensitivity in the fact that gender identify does not have to be a direct result of sexual abuse. It can just 'be' and should not just automatically be thrown in as being the same issue."

- TAASA > Texas Association
   Against Sexual Assault has refuted this as well as major peer groups of psychologists and therapists
- Sexual violence in not solety the domain of men
- Women commit sexual crimes

#### Read more:

Female Sex Offenders Are Often Overlooked - NYTimes.com. (n.d.). Retrieved from http://tinyurl.com/NYTimes-WomenSexOffenders

#### Trans Restroom Use

- Myth: "All sex offenders are male."
- Fact: The vast majority of sex offenders are male. However, females also commit sexual crimes.

In 1994, less than 1% of all incarcerated rape and sexual assault offenders were female (fewer than 800 women) (Greenfeld, 1997). By 1997, however, 6,292 females had been arrested for forcible rape or other sex offenses, constituting approximately 8% of all rape and sexual assault arrests for that year (FBI, 1997). Additionally, studies indicate that females commit approximately 20% of sex offenses against children (ATSA, 1996). Males commit the majority of sex offenses but females commit some, particularly against children.

A witch hunt for female sex offenders is unlikely to benefit society. However, it is important to recognize that they can and do commit serious crimes.

## Most Sexual Assault Occurs with Someone

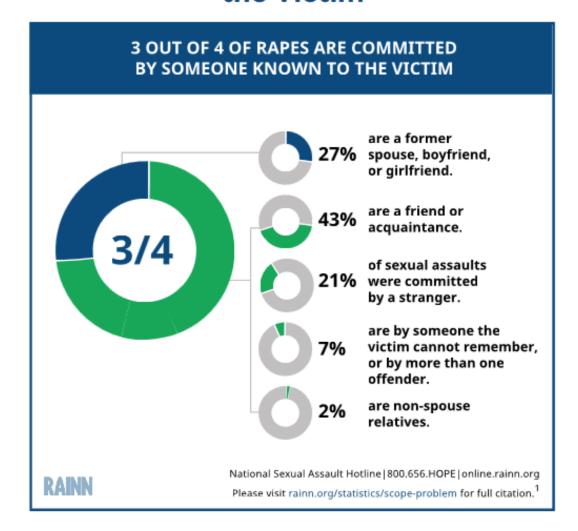
you know

 Transgender women are actually more likely to experience violence that the rest of the population.



#### Trans Restroom Use

## Perpetrators of Sexual Violence Often Know the Victim



- Debate centers around the physiology of male and female bodies
- Before puberty these differences are minimal
- Around puberty, transgender youth are often seeking postponement of puberty (hormone blockers) to allow time to make legal decisions regarding their body and how they identify
- The real issue is one of inclusion and fairness

#### Trans Athletes

#### Transgender Children Should Be Allowed to Play Sports in Their Affirmed Gender

All young people should have the opportunity to play recreational sports and have their personal dignity respected. Transgender young people are no different. In fact, because transgender young people often must overcome significant stigma and challenges, it would be particularly harmful to exclude them from the significant physical, mental and social benefits that young people gain by playing recreational sports. The impact of such discrimination can be severe and can cause lifelong harm. In contrast, permitting transgender children and youth to participate in recreational sports in their affirmed gender can provide an enormous boost to their self-confidence and self-esteem and provide them with positive experiences that will help them in all other areas of their lives.

#### Is It Fair to Allow Transgender Children to Compete in Their Affirmed Gender?

Gender segregation in sports is based, in part, on a concern about unfair physical advantages. Most existing policies for <u>adult</u> transgender athletes focus on the competitive advantage that male hormones may provide due to their effect on the musculoskeletal system. Those policies require that adult transgender athletes compete in the gender role consistent with their hormonal make-up. In preadolescent children, however, hormonal levels do not differ significantly between the sexes. Therefore, no hormonally-based advantage or disadvantage between girls and boys exists. Prior to puberty, boys do not have any physical advantages over girls because of their physiology. Gender segregation in children's sports is purely social. It is not based on any significant physiological differences.



TLPI: Guidelines for Creating Policies for Transgender Children in Recreational Sports

#### A Pause for Notes

- This Presentation so far has been geared to introduce some context about our clients as well as have you explore your own gender identity and expression in regard to ways in which it is inconsistent and that this is ok
- If we can accept gender flexibility in our own selves, how hard is it then to accept gender difference in others?
- Remember, just like many things about identity...it is not a provable concept, it is something we know inside.
- What follows are some statistics and reality checks involving older clients. However, keep in mind that the roots of these challenges exist even at the time of being a youth and it is these inconsistencies over time and stigma over time that cause problems.

## Data Warning

- Data is often used to paint a certain group of people as not as fit as others.
- Keep in mind that the data you are about to see has more to do with the impact of STIGMA on clients more than anything innate to the client because of their identity
- Do not extrapolate causality or assume everything about a client is because they are GLBTQ+



#### Men and Boys Are Also Affected by Sexual Violence

#### **MALE COLLEGE STUDENTS AT RISK**

Males ages 18-24 who are college students are approximately 5 times more likely than non-students of the same age to be a victim of rape or sexual assault.

Nonstudents age 18-24

College students age 18-24



**RAINN** 

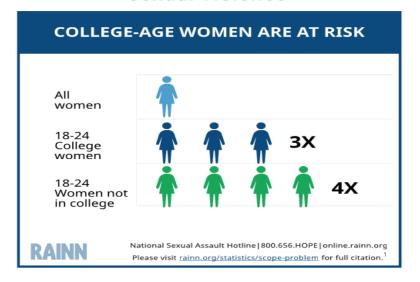
National Sexual Assault Hotline | 800.656.HOPE | online.rainn.org Please visit rainn.org/statistics/scope-problem for full citation.<sup>7</sup>

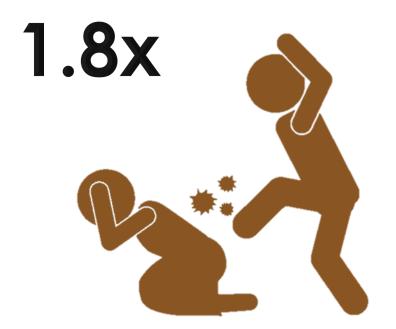
## Stats / Reality Check

## Women and Girls Experience Sexual Violence at High Rates



#### Women Ages 18-24 Are at an Elevated Risk of Sexual Violence





## Stats / Reality Check

#### > MORE LIKELY VIOLENCE

- TRANSGENDER WOMEN SURVIVORS WERE 1.6 TIMES MORE LIKELY TO EXPERIENCE SEXUAL VIOLENCE
- TPOC 1.8 TIMES MORE LIKELY
- TRANSGENDER MEN SURVIVORS WERE 3.5X MORE LIKELY TO EXPERIENCE HATE VIOLENCE IN SHELTERS
- LGBT AND HIV-AFFECTED LOW INCOME SURVIVORS WERE 2.1 TIMES MORE LIKELY TO EXPERIENCE HATE VIOLENCE AT THE WORKPLACE
- 2014 Report on Lesbian, Gay, Bisexual, Transgender, Queer, and HIV-Affected Hate Violence
- http://www.avp.org/storage/documents/Reports/2014\_HV\_ Report-Final.pdf

#### **NEGATIVE PROVIDER EXPERIENCES**

- > 1/3 (33%) NEGATIVE EXPERIENCE WITH HEALTHCARE PROVIDER
  - FOR PEOPLE OF COLOR AND PEOPLE WITH DISABILITIES.
  - INCLUDED BEING REFUSED
     TREATMENT, VERBALLY HARASSED,
     OR PHYSICALLY OR SEXUALLY
     ASSAULTED, OR HAVING TO TEACH
     THE PROVIDER ABOUT TRANSGENDER
     PEOPLE IN ORDER TO GET
     APPROPRIATE CARE.
- IN THE PAST YEAR, 23% OF RESPONDENTS DID NOT SEE A DOCTOR WHEN THEY NEEDED TO BECAUSE OF FEAR OF BEING MISTREATED AS A TRANSGENDER PERSON

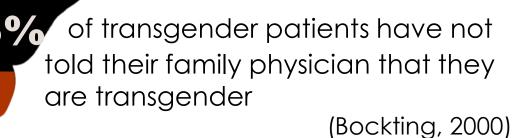
James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). The Report of the 2015 U.S. Transgender Survey

. Washington, DC: National Center for Transgender Equality 2015 USTS - TransEquality.org

### Healthcare Bias



#### Patient Disclosure



40% of gay men (NYC, 2008) <u>have</u> <u>not told</u> their doctor they are gay



70% lesbians <u>do disclose</u> their sexual orientation to their provider, although only 29% were asked by their provider (Stein, 2001)

## HealthCare



"Multiple medical professionals have misgendered me, denied to me that I was transgender or tried to persuade me that my trans identity was just a misdiagnosis of something else, have made jokes at my expense in front of me and behind my back, and have made me feel physically unsafe. I often do not seek medical attention when it is needed, because I'm afraid of what harassment or discrimination I may experience in a hospital or clinic."

#### Table 7.3: Negative experiences when seeing a health care provider in the past year

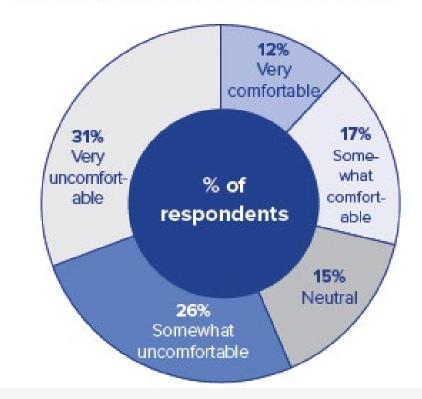
Negative experience	% of those who had seen a provider in the past year
They had to teach their health care provider about transgender people to get appropriate care	24%
A health care provider asked them unnecessary or invasive questions about their transgender status that were not related to the reason for their visit	15%
A health care provider refused to give them transition-related care	8%
They were verbally harassed in a health care setting (such as a hospital, office, or clinic)	6%
A health care provider used harsh or abusive language when treating them	5%

"When I began to live in my correct gender, I was stopped by police and forced to strip in public in front of them as well as being verbally harassed, threatened with arrest, and accused of being a sex worker."

"While I was in solitary, a cop asked me about my gender. I told him I was male, and he told me I sounded female. Next thing I knew, I was being taken to the jail doctor to spread my legs and have him confirm my gender. It was humiliating."

#### Systemic Law-Enforcement Bias

Figure 14.8: Comfort asking the police for help



NOTE: 69% of respondents felt a level of discomfort In asking police for help

- (2015) 58% Transgender and GNC respondents experienced mistreatment by law enforcement
- Frequent assumption of sex work
- Of those arrested (2015) nearly ¼ (22%) believed they were arrested because of their transgender identity

#### Systemic Law-Enforcement Bias

Table 14.1: Mistreatment by police or other law enforcement officers in the past year

Experiences of mistreatment in the past year	% of those who interacted with officers who thought or knew they were transgender in the past year
Officers kept using the wrong gender pronouns (such as he/ him or she/her) or wrong title (such as Mr. or Ms.)	49%
Verbally harassed by officers	20%
Officers asked questions about gender transition (such as about hormones or surgical status)	19%
Officers assumed they were sex workers	11%
Physically attacked by officers	4%
Sexually assaulted by officers	3%
Forced by officers to engage In sexual activity to avoid arrest	1%
One or more experiences listed	58%

#### NUMBER OF HOMELESS YOUNG PEOPLE

550,000

Homelessness lasting longer than one week





## HOMELESS YOUTH & SEXUAL VIOLENCE

 $^{\prime}$  oung people who are homeless also are often sexually assaulted. You can help by listening to youth who have been harmed by homelessness and sexual violence. Your support can make a positive difference in their lives over time.

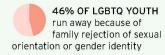
#### RUNAWAY YOUTH

1 IN 3 RUNAWAYS have been forced to perform a sexual act against their will

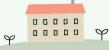


12.4 TO 13.9 YEARS OLD

was the average age range of first leaving home



Rates of major depression, conduct disorder, and post-traumatic stress disorder are 3 TIMES HIGHER among runaway youth



#### HOMELESS YOUTH



PERCENTAGE REPORTING SEXUAL ABUSE

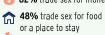
#### 1 IN 3 TEENS ON THE STREET

WILL BE **LURED** INTO **PROSTITUTION** 



#### MORE THAN 1 IN 3 HOMELESS YOUTH ENGAGE IN SURVIVAL SEX. OF THEM:

6 82% trade sex for money



22% trade sex for drugs

#### **LGBTQ YOUTH ARE** 3X MORE LIKELY

TO HAVE ENGAGED IN SURIVAL SEX

32%

of homeless youth have attempted suicide





🕒 🔁 🙎 See next page for citations. Infographic by Mallory Gricoskie. © National Sexual Violence Resource Center 2014. All rights reserved.

#### Social Justice Influences

**Bisexual men\*** 





**Gay men\*** 

Lesbian\*





**Straight men\*** 













**Partner** 

**Violence** 

**Prevalence** 

of Intimate

Transgender people.



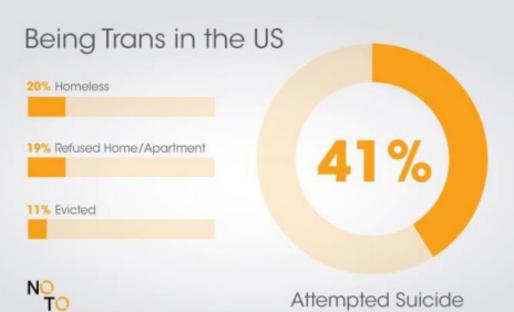
**Bisexual women\*** 





# Discrimination outside of health care

> 57% were rejected by their families



Sease: Every fun: A Report of the Notland Rangember Dockminston Survey (2011)

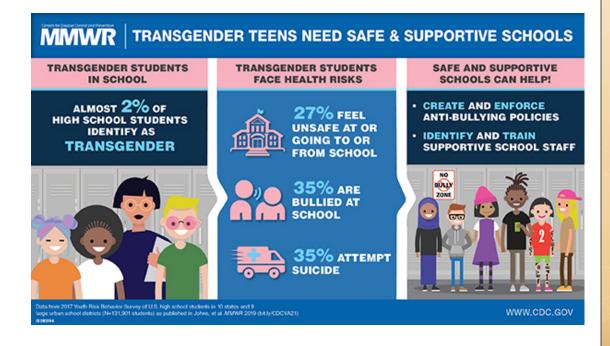


## Demographics

#### **NATION**

- **8 million** Americans identify as gay, lesbian, or bisexual (2.8 million in south)
  - 19 million people (8.2%) have engaged in same-sex sexual behavior
  - 25.6 million people (11%) acknowledge same-sex attraction





## Population Dynamics

#### MMWR TRANSGENDER TEENS NEED SAFE & SUPPORTIVE SCHOOLS

TRANSGENDER STUDENTS IN SCHOOL

ALMOST 2% OF **HIGH SCHOOL STUDENTS IDENTIFY AS** TRANSGENDER



TRANSGENDER STUDENTS **FACE HEALTH RISKS** 



27% FEEL **UNSAFE AT OR GOING TO OR** FROM SCHOOL



35% ARE **BULLIED AT** SCHOOL



**35%** ATTEMPT SUICIDE

SAFE AND SUPPORTIVE SCHOOLS CAN HELP!

- CREATE AND ENFORCE **ANTI-BULLYING POLICIES**
- IDENTIFY AND TRAIN SUPPORTIVE SCHOOL STAFF



Data from 2017 Youth Flisk Behavior Survey of U.S. high school students in 10 states and 9 targe urban school districts (N+131,501 students) as published in Johns, et al. MMNR 2019 (bit ly/CDCVA21)

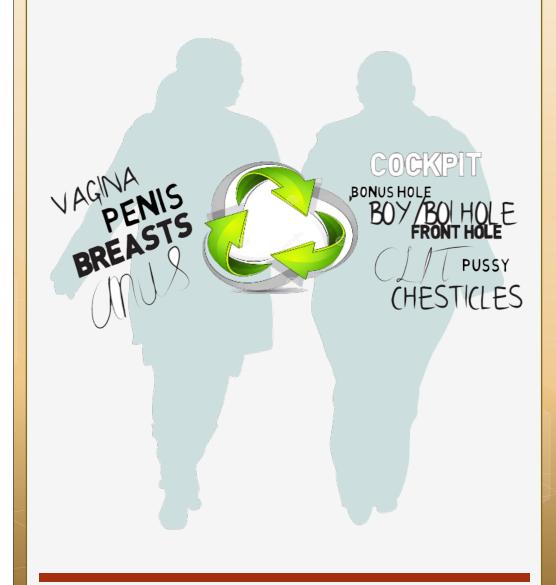
WWW.CDC.GOV

- Many healthcare facilities are open to everyone, some are not
- Rural vs Urban differences
- Based on perceived sex
- Such policies single out transgender or GNC persons, exposing them to harm
- Is your agency truly open to all clients



- Disrobing outs transgender clients = avoidance
- Involves parts one may not want to think about if dealing with body dysphoria
- May use terminology non-standard to refer to bodies.

#### The Provider Relationship





#### The Provider Relationship

- Standards of Care consistently historically required medical "sign off" on individual identity
- Approvement of treatments for someone to bring their own body into alignment with who they are.
  - Bodily Agency
- Mental Health Professionals as Gatekeepers
  - Diagnostic and Statistics Manual
    - Tension between pathologization and care

## Race **Ability** Survivor Socio-Life Roles **Economics** Geography Gender

#### The Provider Relationship

- Master StatusPhenomenon
  - The tendency of observers to believe that one label or demographic category is "more significant that any other aspect of [the observed person's] background, behavior, or performance"
    - Everett Hughes 1940s
- The sublimation of all that impacts a client to one aspect of their identity

# Why does this data matter?



- Broken relationship with healthcare professionals = lower screening rates.
  - Lesbian and Bisexual Women at Higher Risk for cervical and breast cancer
- Medical offices = sites of abuse > less likely to come in for preventative and routine care
- Victimization = Possible re-traumatization in the healthcare setting.
- Lack of resources in employment and insurance
- Social Stigma and Discrimination > Higher rates of unhealthy coping (smoking, alcohol, drugs, etc)

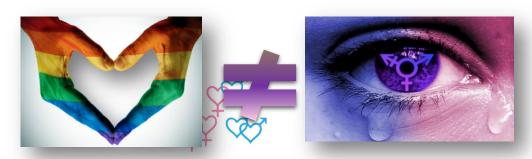
# APPROACH BEST CLIENT PRACTICES CLIENT CUENT YOU CREATE

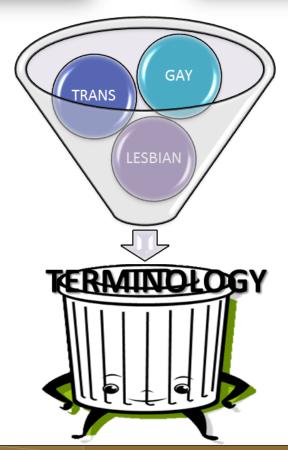
# Better Client Interaction

- Approach
  - o Terms Paradox
  - Becoming More Flexible
- Best Practices
  - Ways to rethink communications
- The environment you create
  - Internal policy
  - External materials in the client context

# Discard Terminology

- Sexuality is not the same as gender identity or gender expression
- Individual identity terms vary widely, you do not need to correct
  - Some individuals may call themselves gay but are really talking about transgender identity.
  - Do not correct, go with what the client says





# Review: Body Part Names

- Terms clients use for body parts may not match expectations
  - Do not "correct", clarification is fine do not try to "educate" the client about what to call parts of their own body
- Proof yourself and colleagues.
   Review with colleagues and get your feelings out about terms.
- In so doing, never judge or degrade clients even in privacy about the terms they use
- Put yourself in their shoes



# Tips for Communication

- Upcoming slides demo best practices for communications for treating all clients with dignity and respect
  - o Be Wary of Gender Biased Terms
  - o Handle questions with sensitivity
  - The name question, on forms, in interactions, etc
  - o Stick to what you need to know
  - o Respect.
    - Honor a client's preferred terms for themselves including their gender
  - o Let the client guide you
  - o Goofing Up



Affirmative Care for Transgender and Gender Non-Conforming People: Best Practices for Front-line Health Care Staff





# Introductions

HIMY NAME IS FRED. I USE MALE PRONOUNS LIKE ...HE, HIS, HIM S SOUTH SOUT

INTRODUCE YOURSELF AND THE PRONOUNS YOU USE FOR YOURSELF

# Be Wary: Gender Biased Terms





# Talking about clients



Make this standard practice both in client facing settings like the waiting room. But also in private, in group meetings, etc. **Live the practice** 

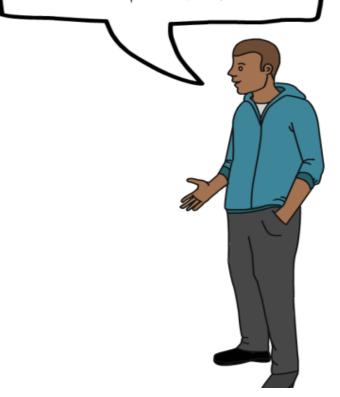


## Avoid heteronormative assumption



HAVE YOU CONFIDED THIS TO SOMEONE IMPORTANT TO YOU?

IS THERE SOMEONE SPECIAL TO YOU THAT YOU WOULD LIKE TO BE HERE RIGHT NOW?



# When addressing clients face to face



Handling the insurance name question





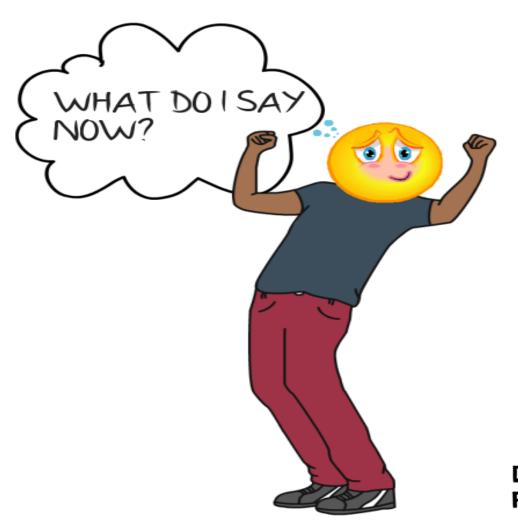
## Stick to what you need to know



Clarifying questions are important and may be needed. However, keep in mind role and what you need to do the job in front of you.



# Goofing Up





DID YOU GOOF?
POLITELY APOLOGIZE..

# Environment you create





 When name tags are warranted, include options for the pronouns a person uses



o Have a system to track and record preferred gender, name, and pronoun of all patients. Organizations that have electronic health records (EHRS) can standardize the use of the notes field to document preferred name and pronoun for ALL clients.

## Organizational Policy







# Policy

- Include "Sexual Orientation, Gender Identity, and Gender Expression" in your nondiscrimination statement
- Post those policies
- o Facilities
  - Single- Occupancy Bathrooms non-sex designated
  - Full-length ddoors on stalls
  - Policy that allows transgender clients to use the bathroom that matches their identity

# Training

- Annual training in cultural competency for trans clients
- Train all staff within 30 days of hire on best practices

## Organizational Process









- Complaints and Questions
  - Clear lines of referral
  - Appoint a staff person responsible for guidance, assisting with procedures, offering referrals, fielding complaints
- Accountability
  - Have procedures that hold staff accountable in an effort to coach them towards better client interaction instead of a punishment approach
- No finger pointing or blaming for problems
- Team SUCCESS or team failure, no individual faulting

#### Interpersonal Strategies/ Professionalism





No, no... This isn't gossip. It's the truth.



- Stay relaxed and make eye contact
  - Just as you would with any other client
  - o Sometimes people get hung up because of perceptions about gender and the look of the person sitting in front of them. Let the client tell you who they are and just relax into who they are
- Professionalism
  - Do not gossip or joke about clients, even when not around.
  - Continue to use client's preferred name and pronoun when not around

- o "Hi, I am Katy and I am a representative for the Sexual Assault Resource Center of the Brazos Valley
- What is your name?
- So that I may better advocate on your behalf what pronouns do you use when referring to yourself?
- o I use "she/her/hers"

- o "Hi, I am Katy and I am a representativ e for the Sexual Assault Resource Center of the Brazos Valley
- So that I may better advocate on your behalf, how may I address you.

# Greeting all clients



My name is ......



I use (insert pronouns here)

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### Infographics

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- http://www.nsvrc.org/publications/n svrc-publicationsinfographic/homeless-youth-sexualviolence-infographic
- This infographic is a companion piece to the guide, Linking the Roads: Working with Youth Who Experience Homelessness and Sexual Violence.

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#### Added Resources for Scotty's House:

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https://www.thebody.com/article/fact-sheet-lesbian-gay-bisexual-transgender-youth-issues

https://borngay.procon.org/questions/is-therean-age-by-which-people-realize-their-sexualorientation/

http://bit.ly/TLPI\_TransParticipationSports

https://www.goodreads.com/list/show/136871.LGBT Q Books for Children

TAMU LGBTQ+ Pride Center: <a href="https://www.facebook.com/TAMULGBTQ/">https://www.facebook.com/TAMULGBTQ/</a>

# THANK YOU:

Each one of you is here because you are passionate about your clients. Each one of you approaches this work from your own perspective, your own identity. In my mind, that makes you heroes. Thank you for all you do.



# Katrina Stewart

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