

# Creating Welcoming Health Care Centers for Transgender People



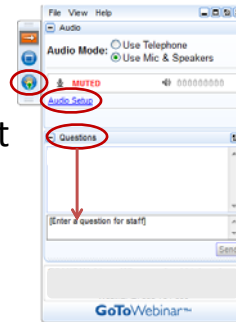
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## Logistics

- Panel
- Live questions
- Typed questions/chat
- Raise hand
- Tech Difficulties  
– 1-888-259-8414



## IMPORTANT NOTICE:

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## Our discussion today

- Shared language, some stats and facts
- A snapshot of the experience of transgender New Yorkers
- Tips, suggestions, and best practices on what we can do to create more welcoming, affirming and inclusive health care environments for transgender people



## Webinar Objectives

- Participants will be able to identify specific ways to make your health center more welcoming to transgender patients.
- Participants will be able to describe the impact of stigma and discrimination on the health of transgender people.



## Background

- LGBTQ work began in the 1980's
- 2006 published "Providing Transgender Inclusive Health Care" 2009 new program! New grant! Commissioned research!
- 2013 added transgender hormone therapy
- 2014 Gay and Lesbian Medical Association Achievement Award for promoting equality in Healthcare for LGBTQ People
- 2015 published The Teaching Transgender Toolkit: A Facilitator's Guide to Increasing Knowledge, Decreasing Prejudice, and Building Skills

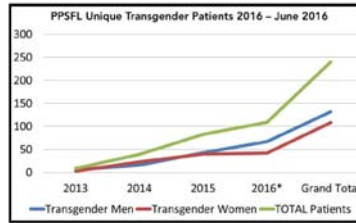


In 2013 Planned PPSFL began providing transgender hormone therapy and preventive health services.

Service was launched based on documented community need, alignment with our mission, and deep commitment to providing excellent, accessible, and compassionate health care for underserved and often marginalized people in our community.

We saw a 152% increase in patients between January 2013 and June 2016.

Unique Patients by Year	Transgender Men	Transgender Women	Total
2013	6	3	9
2014	16	23	39
2015	43	40	83
2016 (January—June)	67	42	109
Grand Total	132	108	240



Unique Patients by Age	Total
18-19	37
20-24	98
25-29	45
30-34	23
35-39	10
40-49	11
50-59	10
60+	6
Grand Total	240

Visit Funding Source	2015
Commercial Insurance	64%
Medicaid	5%
Medicaid Managed Care	10%
Medicare	2%
Self Pay	19%
Grand Total	100%



## What do you think?

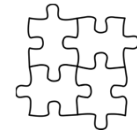


Think about adding policies, best practices, resources, and supports into your health center for transgender and gender nonconforming patients.

- Why do you think this is important?
- What are some concerns or worries you have?
- What are some hopes you have?



## One piece of the puzzle

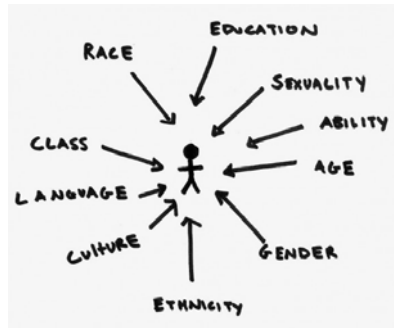


Welcoming and affirming gender diversity into our health centers is  
**one part of a much larger effort**  
 to create culturally competent spaces.

We must pay attention to race, ethnicity, gender, sexual orientation, gender identity/expression, age, physical ability, family status, religion from  
**a framework of intersectionality.**



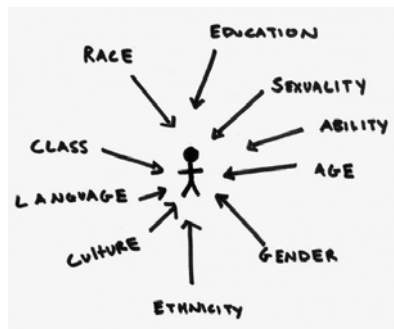
## Intersectionality



- Identities are interconnected and create overlapping and interdependent systems of discrimination or disadvantage.
- Transgender people from non-dominant groups are faced with negotiating the norms, values, and beliefs about gender identity and gender expression of both dominant and non-dominant cultures.



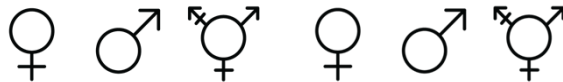
## Intersectionality



- Cultural variation in these norms, values, and beliefs can be a major source of psychological stress.
- There may be no one group or community to whom a transgender person can anchor their identity and receive full acceptance.



# So. What is gender?



- Gender is commonly defined by a system of rules and customs about what males and females are supposed to be and do.
- Breaking the rules of gender is often noticed and corrected from a young age,
- and is often used as a tool for bullying.

*(\*the root of most bullying and harassment is about breaking rules and expectations of gender and gender roles)*



## Shared language, words matter!

Sexual behavior	→	What you do
Sexual orientation Heterosexual, gay, lesbian, bisexual	→	Who you are attracted to
Gender Identity	→	Your internal sense of your gender
Gender Role	→	The way you are expected to behave based on social expectations
Gender Expression	→	The way you express your gender through dress, mannerisms, etc.



### Cisgender

- A person whose gender identity is congruent – matches - with the sex they were assigned at birth.

### Genderfluid

- A person whose gender identity or expression either shifts between masculine and feminine, or falls somewhere along this spectrum.

### Non-Binary

- A continuum or spectrum of gender identities and expression, often based on the rejection that gender is a strictly either/or female/male construct.





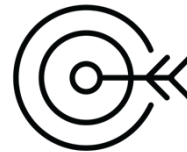
## Transition



- Transition is a process through which **some** transgender people go when they decide to live as the gender with which they identify, not the sex they were assigned at birth.
- Transition **may or may not** include hormone therapy, gender confirmation surgery, and other medical components.
- Transition is a very individual process.



## Two key things to remember



- Identity vs. behavior
- Sexual orientation and gender identity are not the same



## What is gender identity?



- Gender identity is often a quiet internal sense; something that is simply known.
- For **most**, that internal sense aligns with what is expected of them regarding expression and role.
- For **many** people gender identity goes unquestioned and unexamined.
- For **some** people there is a louder internal voice that protests, rejects, and does not connect with the sex they were assigned at birth.



## Avoiding Outdated and Offensive Terms

### Instead of this:

- “real” sex, “real” gender, genital sex
- A transgender, transgenders
- Transgendered
- FTM, used to be a woman, born female
- MTF, used to be man, born male
- Sex Change, The Surgery, pre-operative, post-operative

### Say this:

- ▶ Sex assigned at birth
- ▶ Transgender person, transgender people
- ▶ Transgender
- ▶ Transgender man, man
- ▶ Transgender woman, woman
- ▶ Medical transition, gender affirming surgery

