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OPTIMIZING TRANSGENDER CARE RESOURCE TOOLKIT

OVERVIEW

This toolkit is organized by the following resource types:

1. Webinar Recordings
2. Communications and Engagement Guidelines
3. Infographics
4. Activities for Employee Training

TABLE OF CONTENTS

WEBINAR RECORDINGS

View the recorded presentations from the SHSMD Education Webinar Series, *Creating Communications and Engagement Guidelines for Transgender Care*

COMMUNICATIONS & ENGAGEMENT GUIDELINES

Use this checklist when creating communications and/or event invitations

INFOGRAPHICS

Print and display these resources in the workplace to generate awareness and demonstrate your organization's commitment to Inclusion.

GENDERBREAD

Use this diagram to explain the differences between sex, gender identity, attraction and gender expression.

PRONOUNS

Use this infographic to inform yourself and others of the staggering statistics of the LGBTQ population and encourage the use of inclusive language.



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ACTIVITIES FOR EMPLOYEE TRAINING

ACTIVITY 1: COMING OUT STARS

Adapted from: Jeff Pierce, University of Southern California

ACTIVITY 2: CHECKING YOUR BIAS



COMMUNICATIONS & ENGAGEMENT GUIDELINES

Things to consider for internal and external communications:

- ✓ Post a nondiscrimination policy on your website and in other public places that includes sexual orientation and gender identity.
- ✓ Ensure that public areas and spaces, including walls and social media, have LGBTQ images and contain LGBTQ-safe signals.
- ✓ Include LGBTQ images and language in all printed materials/brochures.
- ✓ For interviews/quotes, ask people how they'd like to be referred to in the third person.

Take a Look at Your Event Invitations:

One of the most common areas of exclusion are invitations to events and fundraisers.

Consider:

- ✓ Do your invitations use gender-neutral terms and phrasing?
- ✓ Adding a note to your event [*This event is gender inclusive]
- ✓ Provide gender neutral restrooms and signage

Avoiding gender bias terms:

Instead of:	Use:
Invite your boyfriend, girlfriend, husband or wife	Invite your spouse or partner
Invite your mother or father	Invite your parent, loved one, family member
Chairman	Chair or Chairperson
Each participant should read his/her packet	Each participant should read their packet
Ladies and Gentlemen	Everyone

Adapted from: Kerr, A., (2017, February 10). Where's the Love: Is Your Communications Strategy LGBTQ Inclusive? Retrieved January 2, 2020, from <https://www.nonprofitmarketingguide.com/blog/2017/02/14/wheres-the-love-is-your-communications-strategy-lgbtq-inclusive/>.



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Transgender Care: Creating Communications and Engagement Guidelines

Part 1: LGBTQ Terminology and the Transgender Patient Experience

January 22, 2020
12-1pm CST / 1-2 EST



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AGENDA

Part 1: LGBTQ Terminology and the Transgender Patient Experience

- Learning Objectives
- Why Marketing?
- Individual Learning Journey
- Patient Experience
- Setting the Example

LEARNING OBJECTIVES

Learning Objective 1

Share some of the unique health care challenges faced by the transgender population.

Learning Objective 2

Articulate distinct strategies for communicating with and engaging transgender individuals.

BACKGROUND – UVA HEALTH



HISTORY of TRANSGENDER CARE at UVA

- **2013:** Teen Clinic began offering transgender services for ages 14-27, only one in the region
- **2017:** UVA hosted its first-ever LGBTQ Health Symposium
- **2017:** Transgender Advisory Committee formed, led by the Patient Experience Office
- **2017:** Code of Conduct for Providers Who Hold Clinical Privileges revised to explicitly address sexual orientation, gender, gender identity and gender expression
- **2018:** Adult Transgender Clinic opened

Request for Brochure

Brochure language informed creation of new content

Our Locations

UVA Teen and Young Adult Health Center
For patients ages 12-26
Call 434.982.0090 and select option 1.

UVA Adult Transgender Health Clinic
For patients age 18 and older
Call 434.924.5000.

UVA Student Health Center
For UVA students
Call 434.924.5362 and select general medicine, counseling or gynecology.
If you ever need additional services outside of these locations, we can refer you to trusted trans-affirming providers.

Helpful Information

MyChart®
MyChart is an online resource patients can use to view health information, communicate with providers and pay bills. Sign up at mychartuva.com. Parents of minor children and caregivers designated by adult patients can use MyChart Proxy® to view health information. Ask your care provider for more information.

MyVue®
MyVue allows you to view your radiology images online. Sign up at uvahealth.com/myvue.

Insurance
We accept most major insurance plans, including Medicare and Medicaid. Please pay all copays and fees at the time of your visit.

Billing Questions
If you have questions about your bill, visit uvahealth.com/billing or call 644.377.0846.

Financial Assistance
Learn about assistance available through UVA and government programs at uvahealth.com/financialassistance.

UVA Transgender Services



UNIVERSITY OF VIRGINIA HEALTH SYSTEM

UVA HEALTH SYSTEM
PO Box 800224
Charlottesville, VA 22908-0224

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Welcome

At UVA, our goal is to provide affirming, comprehensive healthcare for transgender patients of all ages. We are committed to making your healthcare experience as positive as possible, listening to and responding to your needs and removing barriers to your care.

Our Team

Our multidisciplinary team includes healthcare professionals who specialize in family medicine, endocrinology, psychiatry and behavioral health. Your well-being is our top priority and we are committed to treating you with dignity and respect.



UVA HEALTH SYSTEM

Services

Mental and Physical Wellness
Access healthcare that addresses your whole being in a safe, caring environment. Visit select family medicine and psychiatry specialists for:

- Chronic health conditions, screenings, vaccinations, physicals, minor illness and injury
- Depression, anxiety, stress and other mental health issues

We can help connect you to services outside of the health system, like long-term, trans-affirming therapists.

Hormone Therapy
Our endocrinologists provide hormone prescriptions and management for:

- Pubertal suppression therapy (for adolescents)
- Gender-affirming therapy
- Menstrual suppression therapy

Comprehensive Care
You can also directly access transgender-specific services in dermatology, gynecology, plastic surgery, urology and speech therapy.

Gender-Affirming Surgery
We have plastic surgeons and urologists experienced in providing these procedures:

- Transgender mastectomy
- Chest reconstruction
- Breast implants, breast construction and augmentation
- Facial implants (chin and cheek)
- Facial injectables (facial fillers)
- Testicle removal (orchiectomy)

Teen and Young Adult Medicine

- Evaluation and treatment for teen mental health issues
- Low-cost physicals and sports physicals
- LGBTQ support groups for ages 10-14 and 14-20
- Reproductive healthcare: birth control (including free emergency birth control), period management, counseling and testing for sexually transmitted diseases and pregnancy testing
- Treatment for acne and skin problems

Transgender Support

- Discussion of possible medical and surgical treatments for gender dysphoria
- Family education and support
- Assistance with name and gender marker changes on legal documents
- Financial advice about uncovered medical treatment
- Letters of recommendation for hormone therapy (UVA Teen and Young Adult Transgender Clinic and UVA Student Health Center)
- Information about gender expression gear
- Surgical referrals

Request for Web Content

Web content needed for Health Equality Index rating



FIND A DOCTOR

SERVICES

LOCATIONS

PATIENTS & VISITORS

Transgender Health Services

We provide affirming, comprehensive healthcare for adult transgender patients.

To help make your healthcare experience as positive as possible, we've committed to:

- Listening and responding to your needs
- Removing barriers to your care
- Treating you with dignity and respect
- Making your well-being our top priority

UVA providers follow the standards of care produced by the [American College of Endocrinology](#). We've earned recognition from the Human Rights Campaign Foundation for our [support of LGBTQ patients](#).

LGBTQ Healthcare Services

Transgender Services

[Endocrinology](#)

[Family Medicine](#)

[Plastic Surgery](#)



Transgender Health Clinic

Find trans-friendly doctors providing hormone therapy, urological care, primary healthcare. Legal and wellness support also offered.

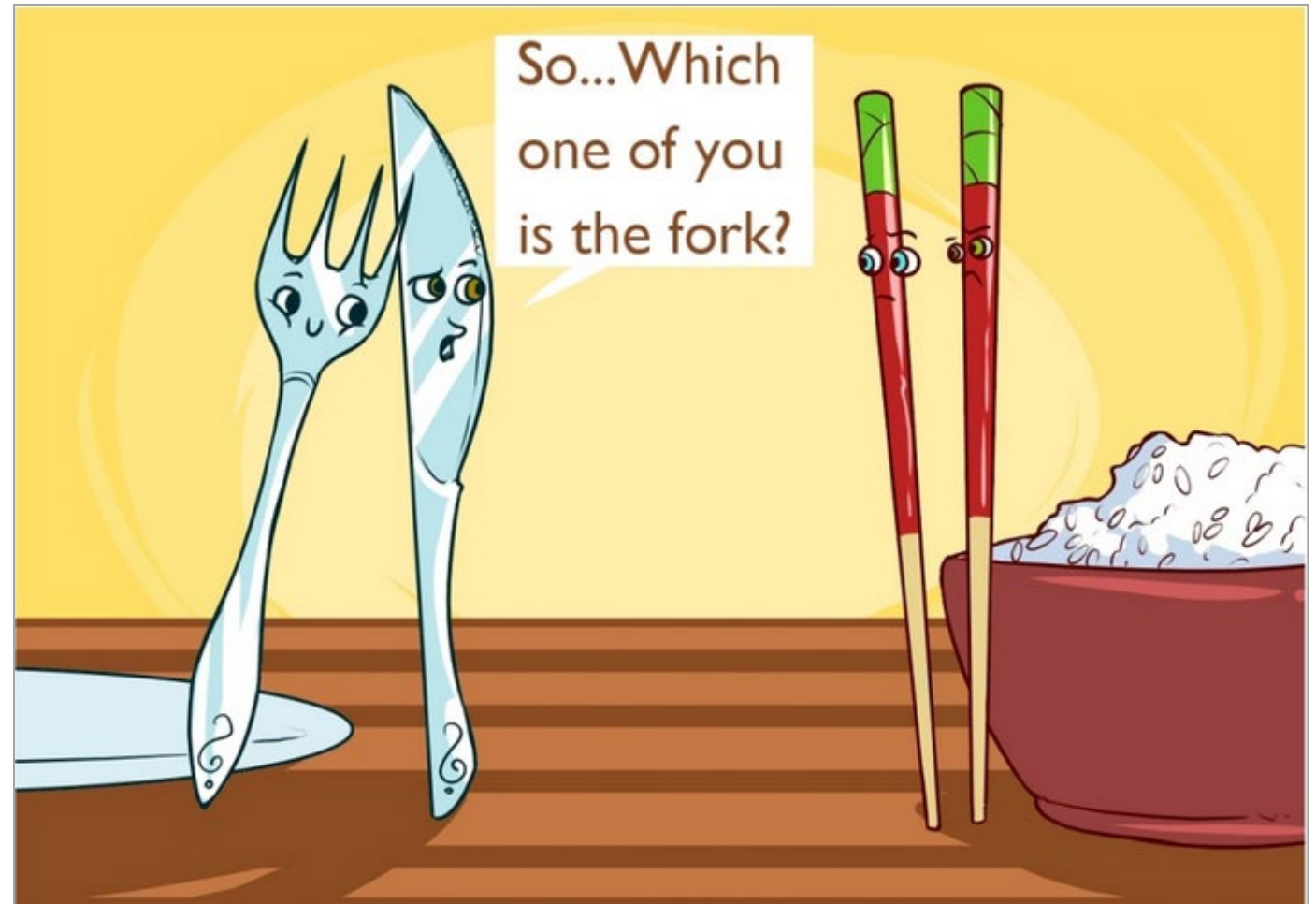
[Visit The Adult Transgender Clinic Crozet](#)

UNCOVERED CHALLENGES

Creating a basic brochure became problematic:

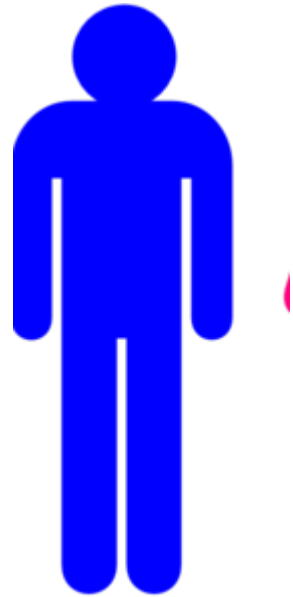
- No clear phone number to use
- Unclear ideas about safety – list the clinic location or not?
- No internal stock photography
- No idea about the patient journey – which services to list on brochure?
- Doctors eager to provide services without safe space training
- Non-inclusive Transgender Advisory Group meant no place to get questions answered authentically
- No clear mechanism for identifying qualified providers or training for qualification

INDIVIDUAL
LEARNING
JOURNEY:
Personally *and*
Professionally



GENDER

MALE/MASCULINE



FEMALE/FEMININE



GENDER EXPRESSION

MASCULINE



FEMININE



BIOLOGICAL SEX



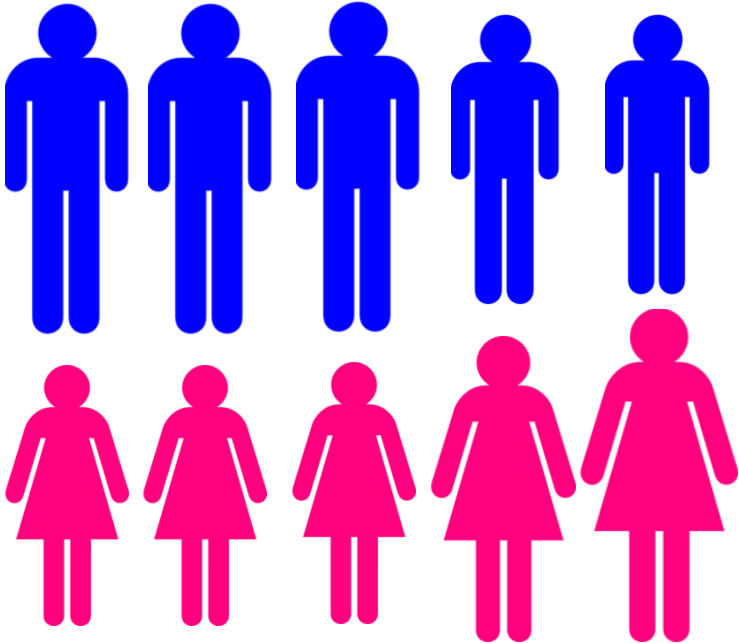
Male

Female

Intersex

Male to female (MTF)

Female to male (FTM)



SEXUAL ORIENTATION



Lesbian

Gay

Bisexual

Asexual (ace)

Men who have sex w/men (MSM)

Pansexual

Demisexual

Demiromantic

Same-gender loving

GENDER IDENTITY

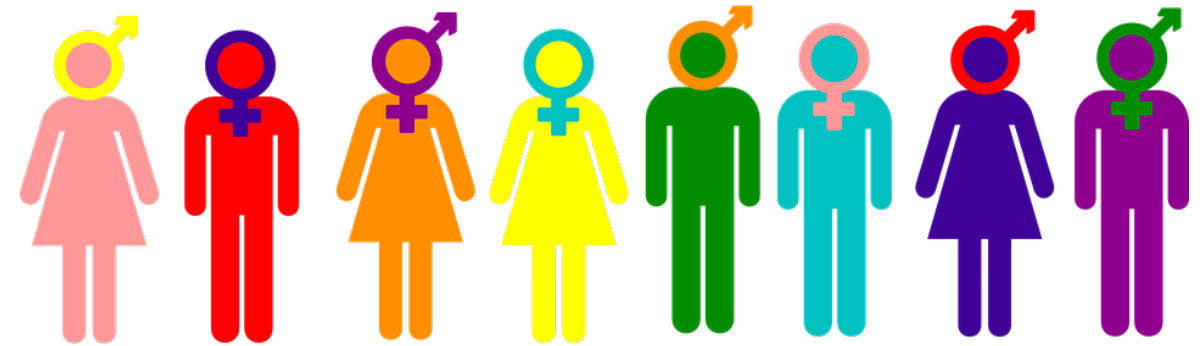
Transgender

Cisgender

Gender Nonbinary

Genderqueer

Gender fluid



- One's innate sense of self
- Develops between the ages of 18 months and 3 years
- Gender variance is not a disorder, but a normal part of human expression found throughout time and cultures
- **Gender dysphoria**, a medical condition, not a mental illness, refers to the discomfort a person may experience when their body doesn't match their gender

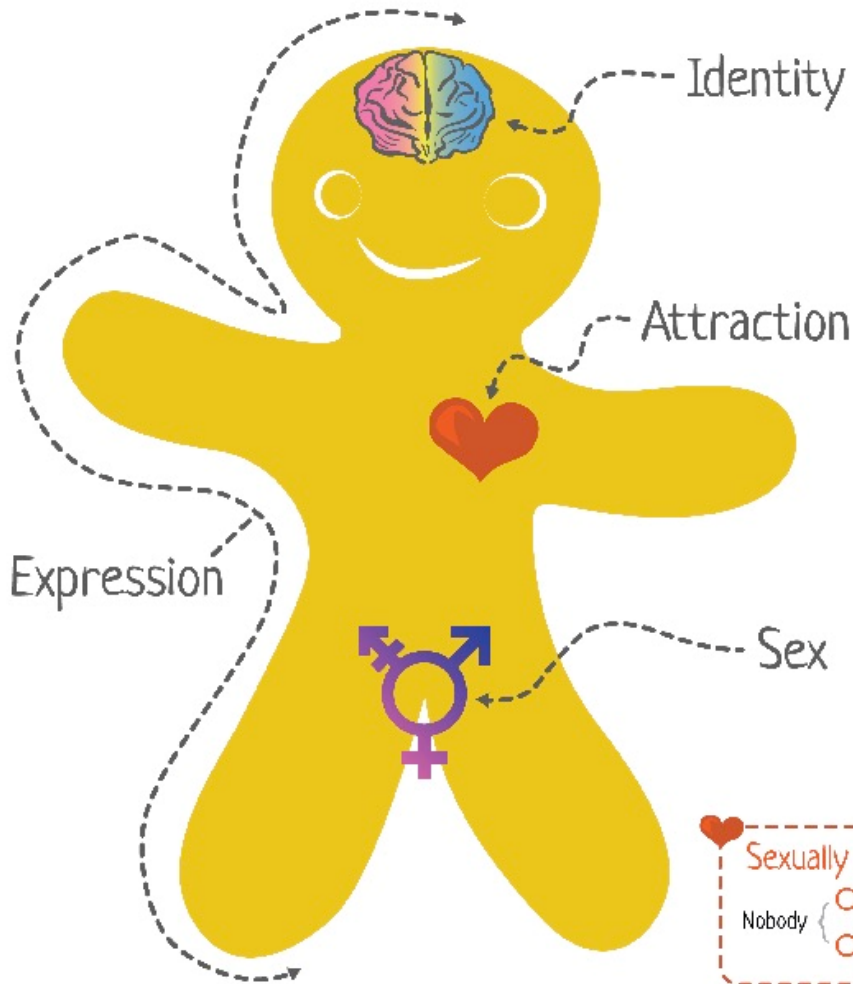
The Genderbread Person v3.3

by its pronounced **METROsexual**.com

Gender is one of those things everyone thinks they understand, but most people don't. Like *Inception*. Gender isn't binary. It's not either/or. In many cases it's both/and. A bit of this, a dash of that. This tasty little guide is meant to be an appetizer for gender understanding. It's okay if you're hungry for more. In fact, that's the idea.

Plot a point on both continua in each category to represent your identity, combine all ingredients to form your Genderbread

4 (of infinite) possible plot and label combos



Gender Identity

Indicates a lack of "what's on the right."

Woman-ness

Man-ness

How you, in your head, define your gender, based on how much you align (or don't align) with what you understand to be the options for gender.

Labels: "women", "man", "two-spirit", "gender-queer"

Gender Expression

Feminine

Masculine

The ways you present gender, through your actions, dress, and demeanor, and how those presentations are interpreted based on gender norms.

Labels: "butch", "femme", "androgynous", "gender-neutral"

Biological Sex

Female-ness

Male-ness

The physical sex characteristics you're born with and develop, including genitalia, body shape, voice pitch, body hair, hormones, chromosomes, etc.

Labels: "cis", "trans", "intersex", "MTF Female"

Sexually Attracted to

Nobody

Women/Females/Femininity

Men/Males/Masculinity

Romantically Attracted to

Nobody

Women/Females/Femininity

Men/Males/Masculinity

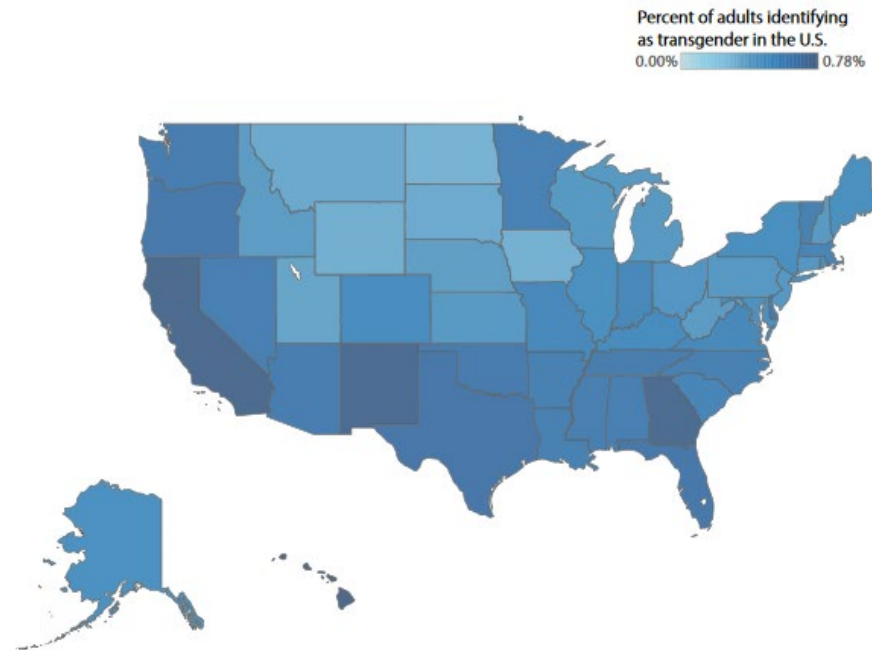
In each grouping, circle all that apply to you and plot a point, depicting the aspects of gender toward which you experience attraction.

For a bigger bite, read more at <http://bit.ly/genderbread>

<https://www.genderbread.org/>

DEMOGRAPHICS

Percentage of adults who identify as transgender



0.6%

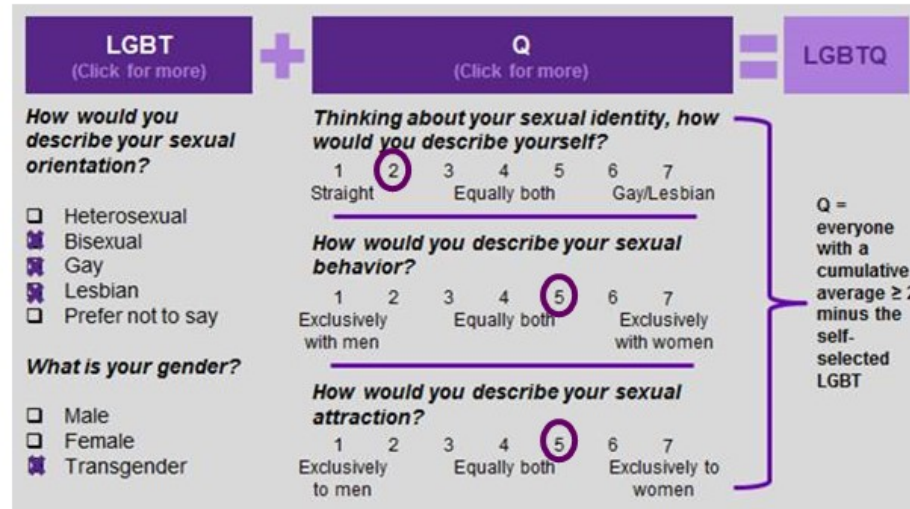
1.4 million
transgender adults
in the U.S.

Total adults in the
U.S. as of 327.2
million

Flores, A., Herman, J., Gates, GJ, and Taylor, N.T. June, 2016. How many adults identify as transgender in the United States? Williams Institute, UCLA School of Law.

DEMOGRAPHICS

26% of Millennials surveyed by Kantar Futures identify as LGBTQ



	LGBT	Queer	Total
Millennials	10%	16%	26%
Total Pop.	7%	8%	15%

 Altria
Survey Response

LGBT
3%

Source: Kantar Futures (2017)
Source: Altria LGBTQ Climate Survey (2017)



PATIENT EXPERIENCE EXERCISE

If your **birthday** is in...

January, February or March: **Blue** group

April, May or June: **Yellow** group

July, August or September: **Purple** group

October, November or December: **Green**
group

*For exercise purposes only, each color represents various
segments of this patient population*



PATIENT EXPERIENCE: Expectation of Rejection

25%+
trans people
were refused
medical care outright

2010 statistic cited in the 2017 nationally representative survey of LGBT people commissioned by Center for American Progress at <https://www.americanprogress.org/issues/lgbt/news/2017/05/02/429529/widespread-discrimination-continues-shape-lgbt-peoples-lives-subtle-significant-ways/>

PATIENT EXPERIENCE: Suicide Rate

40%

**have attempted suicide in their
lifetime, nearly 9x the rate
of the US population**

However, astonishingly this statistic is decreased to 7% when transgender persons receive social support (Bauer, Scheim, Pyne, Travers, & Hammond, 2015).

PATIENT EXPERIENCE: Consequences of Discrimination

In the health care setting,
trans people:

- Avoid seeking health care
- Stay closeted with providers
- Don't advocate for themselves/feel vulnerable
- Distrust providers' knowledge about their health care issues



January 2017 nationally representative survey of LGBT people commissioned by Center for American Progress at <https://www.americanprogress.org/issues/lgbt/news/2017/05/02/429529/widespread-discrimination-continues-shape-lgbt-peoples-lives-subtle-significant-ways/>

PATIENT EXPERIENCE: UVA Health

A security guard called me **SIR** as I was walking towards the lobby.

Someone from the clinic called and left a voicemail about my wrist surgery, but then forgot to hang up, so I heard her making **jokes about me being trans** to someone else.

In the clinic waiting room, a child wandered over to me. When the mom grabbed her child and chided her for coming near to me, **I wondered if it was because I was trans or not.** I tried to smile at the mom, but she wouldn't meet my eye. Was I being too sensitive?

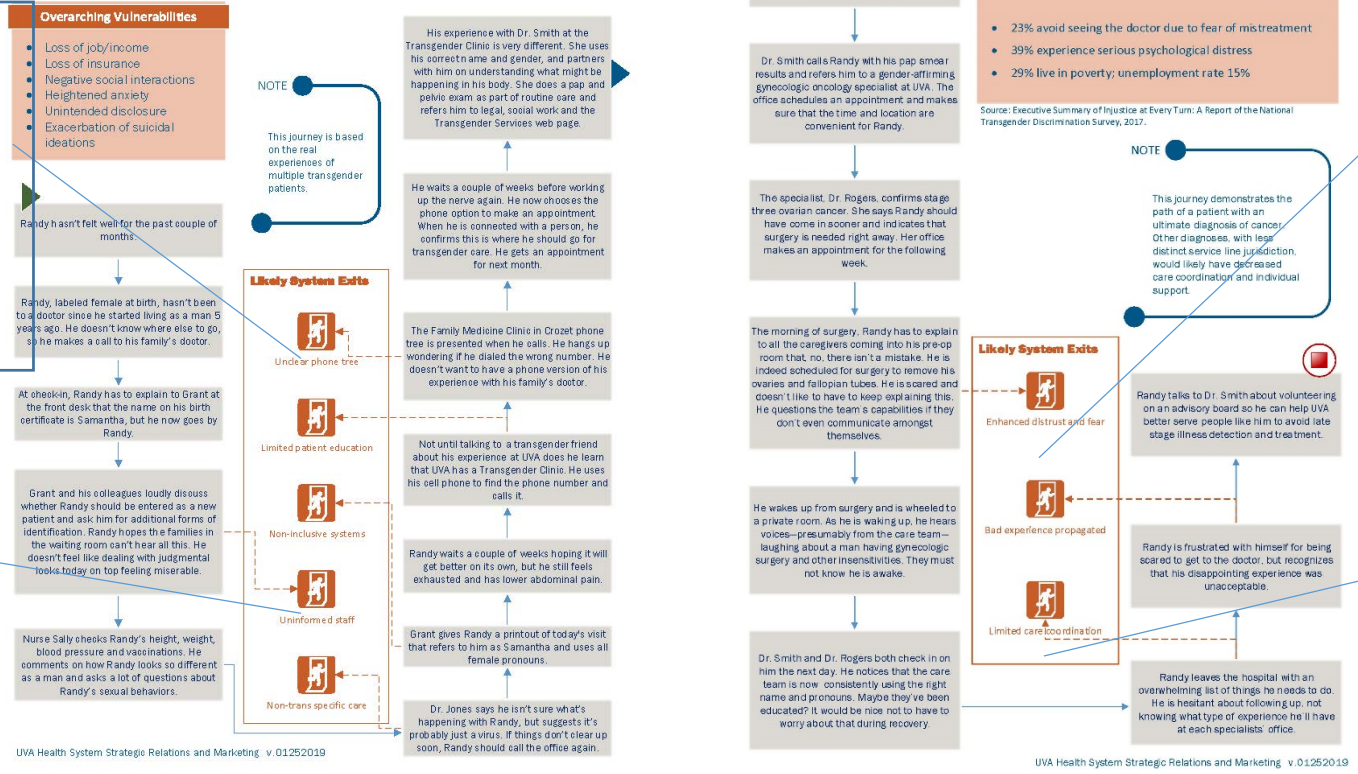
I was in the ER and they didn't have enough beds, so they put me on this gurney in the hallway, and this nurse came over and started grabbing my shirt and trying to lift it up, and I screamed **STOP STOP** and she wouldn't.

PATIENT EXPERIENCE: Journey Map

Health Care Journey of a Transgender Patient at UVA

The Family Medicine and Specialty Care Crozet clinic phone tree is presented when Randy calls. He hangs up wondering if he dialed the wrong number.

The nurse gives Randy a printout of today's visit that refers to him as Samantha and uses all female pronouns.



Before surgery, Randy has to explain to all the caregivers coming into his pre-op room that, no, there isn't a mistake. He is scheduled for surgery to remove his ovaries and fallopian tubes.

Randy leaves the hospital with an overwhelming list of things he needs to do. He is hesitant about following up.

PATIENT EXPERIENCE: Consulting SHSMD Colleagues

- Sept 2018 posted/inquiry on the SHSMD discussion board
- Connected with colleagues at Thomas Jefferson University Hospitals, Southwest Health and Mass General
- Posted our internal “Guidance to Support Communications and Engagement Related to Transgender Care” document in the SHSMD library

The screenshot shows a discussion board interface for a group named "Public Relations & Communications". At the top right, there is a "Settings" button. Below the group name, there are navigation tabs: "Group Home", "Discussion 1.9K", "Library 92", and "Members 3.3K". A "Back to discussions" button is located below the tabs. The main heading of the discussion is "Optimizing Transgender Services". The discussion thread includes four posts:

- Lisa Schrader** (09-27-2018 09:53): [Have any of you figured out how to provide good clinical care and thoughtful interactions with trans...](#)
- Anne Thomure** (09-27-2018 10:25): [Yes, please share resources. We just discussed this issue at a recent meeting. Thank you! ...](#)
- Jaime Collins** (09-28-2018 12:53): [Lisa, Thank you! ... for not only working to improve transgender health care but also engaging...](#)
- Lisa Schrader** (10-01-2018 09:35): [Anne and others. I want to take a few days to pull together what we've been looking at in a more t...](#)

SETTING THE EXAMPLE: Best Practices



SETTING THE EXAMPLE: Use Inclusive Language

Don't say:

- “She is *a transgender*” or “She’s *transgendered*”
- Cross-dresser, drag queen, transsexual or tranny
- Deadname: The previous name reflecting prior gender
- “Sex change”

Do say:

- “Phyllis is a transgender woman.”
- “He’s a trans man.”
- Surgery - “Gender confirmation” or “gender affirmation” or “sex reassignment”

SETTING THE EXAMPLE:

Ask...Don't Guess/Anticipate Gender

Ask open-ended questions

- “Are you in a relationship?” vs. “Do you have a husband?” or
- “What is their name?” vs. “What’s her name?”

Avoid gendered language

- “Your patient is here” vs. “He is here”
- Don’t use “sir” and “ma’am”

Continue to ask people for the pronouns they use

- “What pronouns do you **use**?”
- “How would you like to be referred to in this record/system?”

SETTING THE EXAMPLE: Get Comfortable With Pronouns

- Set the example in email/introductions: “My name is Amy, and I use **she/her** pronouns.”
- Respect the person’s wishes
- Don’t default to “it”

She
Her
Hers

They
Their
Theirs

He
Him
His

SETTING THE EXAMPLE: Calm Your Grammatical Anxiety

Stop talking about the grammar being wrong:

- There's **historical precedent** for the
- plural-singular confusion
- The **Associated Press** style guide provides grammatical justification and advice on usage

“The use of plural pronouns to refer back to a singular subject isn’t new: it represents a revival of a practice dating from the 16th century. It’s increasingly common in current English and is now widely accepted both in speech and in writing.”

Oxford English Dictionaries

When they is used in the singular, it takes a plural verb: Taylor said they need a new car. (Again, be sure it's clear from the context that only one person is involved.)

Associated Press, 2019

SETTING THE EXAMPLE: Share That You Care

“I don’t know what to say. So I just didn’t say anything.”

Ignoring or avoiding someone can make them feel **unsafe**.

Remember:

- Start with compassion
- What you say and don’t say both have an impact
- No one gets it right all the time
- Your efforts to share that you care mean so much



SETTING THE EXAMPLE: Apologize For Impact vs. Intent

Apologize briefly and correct yourself.

- “And I was saying to someone that **he’s** a really good, **sorry, she**, that she was a really good painter.”

Don’t over-apologize, complain, or whine.

- “Oh gosh I am SO, SO sorry, I really am. I know it’s wrong and this must happen all the time.”
- “Gosh, pronouns are so difficult!”
- “I didn’t mean it!”



SETTING THE EXAMPLE: Don't Minimize or Discount

You may respond to a person sharing their gender identity in a way intended to express tolerance:

- **It's no big deal**
- **I don't care**
- **It doesn't matter to me**
- **It doesn't bother me**
- **Who cares? Whatever**
- **Agree to disagree**

But what if...

It is a big deal?

The person needs you to care?

It matters to them?

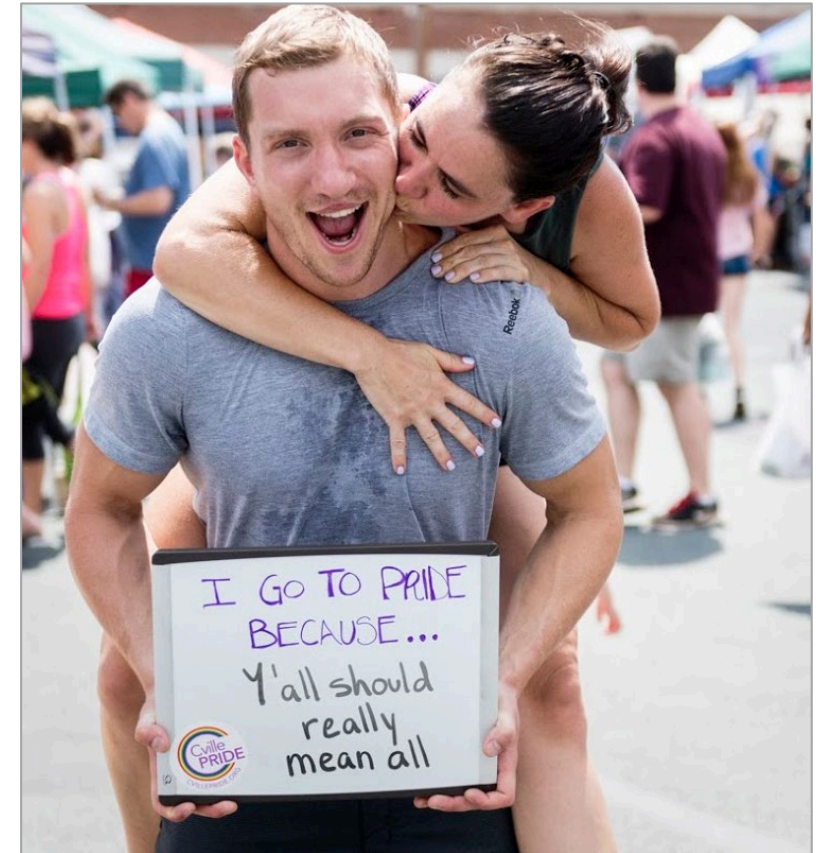
They didn't ask for your approval?

Others **don't** care, or have rejected or abused the person for this very reason?

People experience discrimination everywhere?

SETTING THE EXAMPLE: 6 Aspects of An Awesome Ally

1. Stay humble – no one will ever know everything
2. Listen & let others tell you the terms to use for them
3. Avoid assumptions – practice not boxing people in, let them define themselves
4. Be visible, vocal, and active as an ally
5. Embrace your own truth, giving permission to others to follow your lead
6. Check in





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QUESTIONS?

Mark your calendars for
Part 2: Changing Your Organization's Culture
on January 28 12pm CT, (1pm ET)

THANK YOU!

UPCOMING SHSMD EDUCATION

To register or to learn more visit www.shsmd.org

January 28	Creating Communications and Engagement Guidelines for Transgender Care Part 2: Changing Your Organization's Culture <i>Webinar Series</i>
February 3-28	Orientation to Health Care <i>Online Course - SOLD OUT</i>
February 5	Futurescan 2020-2025 Insights: Transformation and Disruption <i>Webinar</i>
February 11	Instilling Value with Low-Tech Solutions <i>Virtual Workshop (AHA Value Initiative)</i>
March 10	Taking Care to the Next Level <i>Virtual Workshop (AHA Value Initiative)</i>
April 27 – June 26	SHSMD CREDENTIALS Marketing in Health Care: Marketing Plans, Communications, and Market Research <i>Online Course</i>



SHSMD's Podcast "*Rapid Insights*" delivers the latest trends, innovations and best practices for health care strategists
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SHSMD Webinar Series: Creating Communications and Engagement Guidelines for Transgender Care

Part 2: Changing Your Organization's Culture

January 28, 2020
12-1pm CT

Agenda

- Review of Part 1
- Shifting Your Organization's Culture
- Challenges Organization's Face
- Engagement Best Practices
- Inclusion Best Practices
- Guest Contributor Panel Discussion
- Q&A and Final Thoughts



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Online Strategist,
UVA Health

Review of Part 1

- Why Marketing?
- Individual Learning Journey
- Patient Experience
- Setting the Example

Part 2: Changing Your Organization's Culture

Shifting Your Organization's Culture

Challenges Organizations Face

- Bias
- Lack of cohesion
- Lack of leadership buy in
- Absence of standards (care and behavior) and policies
- Deficiency in funding or other resources
- No formal patient input
- Invisibility of the problem because of lack of data
- Shifting political and legal landscape

Engage the Community

Collaborating with the community you seek to include is absolutely critical to creating responsive, authentic programs.

- LGBTQ social groups in medical school/employee groups
- Pride festivals/events, local health department educators (often LGBTQ/trans-specific programs)
- PFLAG – support groups for trans individuals/families
- High school nurses/counselors



Engagement Best Practices

For focus groups, surveys,
and patient advisory councils:

- Meet people where they're comfortable
- Provide opportunities for anonymous input
- Recognize, affirm, and honor participation
- Don't force one person to speak for a whole community
- Don't take negative feedback personally or defensively
- Get clear consent
- Give people a chance to review materials
- Think accessibility (when/where you hold meetings, for example)
- Expect the process to take time

Resolve Bathroom Issues

- Make restrooms gender-neutral
- Provide private restroom options



- **Fact:** Studies show that making transgender people use a men's-only or women's-only bathroom puts **them** at high risk of being harassed, beaten, or raped.

Get Trained

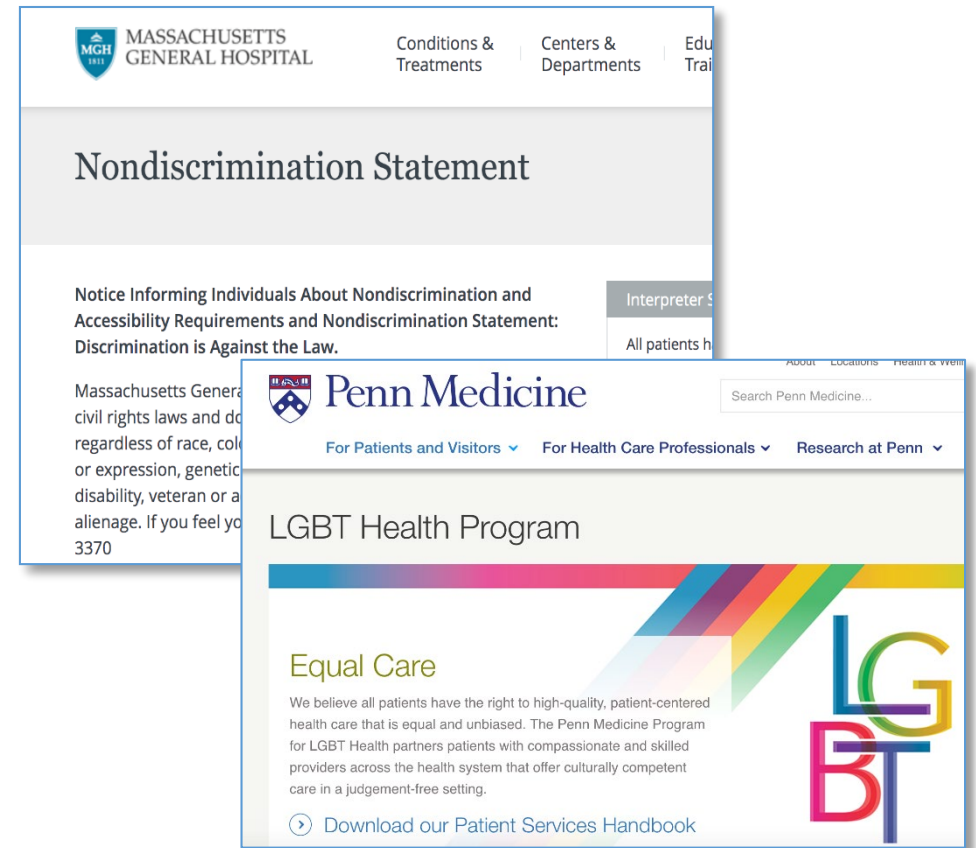
- Make training required
- Train anyone who comes in contact with patients – everyone has unconscious bias
- Have training around LGBTQ healthcare/experience in general, as well as a focus on transgender issues
- Create a program lead for LGBTQ care; train patient navigators, advocates, community liaisons devoted to LGBTQ patients



Make Inclusion Explicit

- Policies for visitors: Say same-sex partners are welcome as visitors
- Antidiscrimination policies that say **sexual orientation** and **gender identity**
- Post these policies in visible places – waiting rooms, clinics, online

“Everyone” doesn’t cover it.



Make Inclusion the Experience

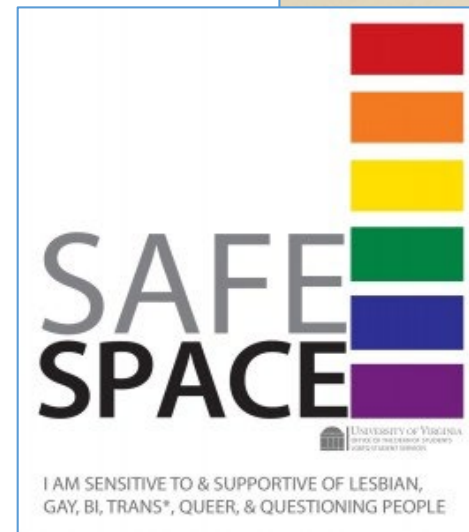
- Complete your own Patient Journey map
- Institute a policy that all employees must provide care to transgender patients
- Employ an electronic medical record that records name/gender accurately
- Remove sex from wristbands
- Flex rooming policies:
 - Consider rooming transgender patients with same gender
 - Let non-binary patients choose



Make Inclusion Visible

A rainbow or other explicit welcome shows that you:

- Aren't ashamed or afraid of negative social reaction
- Understand why the rainbow is important
- Care about serving LGBTQ people



Treat others the way
they want to be treated.



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WELCOME GUEST CONTRIBUTORS!



Kari Kuka, MS
Administrative Director LGBTQ Center of
Excellence
Denver Health and Hospital Authority



Gaby Newman,
Co-lead of LGBTQ Employee
Resource Group
Salesforce



Amy Penkin, LCSW
Program Supervisor, Transgender Health Program
Oregon Health & Science University



Dr. Kristie Overstreet,
PhD, LPCC, LMHC, LPC, CST
Founder of the Therapy Department



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Creating a Center of Excellence for LGBTQ+ Patients

Kari Kuka M.S.

Administrative Director LGBTQ COE

About the Center of Excellence

- Started in January 2017
- Decentralized Model of Care
- We have over 40 primary care providers providing care to our gender diverse patients
- We don't believe our patients need to be seen by Endocrinology to start hormones
- We use a consent model for care, meaning no letter from BH to start hormones
- We follow WPATH guidelines
- We have 3 plastic surgeons, 1 ENT, 2 urologist and several Gynecologist providing surgical care to patients
- We had 525 new patients come through the program in 2019 and performed over 300 gender affirming surgeries

Using Patient Navigators and Advocates

- The Center of Excellence has a staff that includes:
 - 1 Patient Navigator – navigating patients into primary care and behavioral health services with affirming providers
 - 2 Patient Advocates – these position focus exclusively on getting patients ready for gender affirming surgeries
 - Insurance criteria
 - WPATH guidelines
 - Surgical preparedness

Institutional Policies

- Some of our policies include:
 - Choice in room assignments or private room option if available
 - We have removed sex from wristbands and moving to remove from all labels
 - Our policy is that we ask all patients SOGI questions, affirming name and pronouns. Pronouns are highlighted in EMR for all staff members to see

Adamite, Naomi

Nick Adamite
Legal: Naomi Adamite
Male ⓘ, 19 y.o., 1/17/2000
Pronouns: they/them/theirs
MRN: 20008788

Nick Adamite
Legal: Naomi Adamite
Male ⓘ, 19 y.o., 1/17/2000
Pronouns: they/them/theirs
MRN: 20008788
Code: Not on file

Search

on: None
Team: No PCP
Age: None
ies: No Known Allergies
acies: 0
Patient: Yes

Nick Adamite
19 y.o., 1/17/2000
Legal Name: Naomi Adamite
Pronouns: they/them/theirs
Gender Identity: Transgender Male / Female-to-Male (Sensitive)
Legal Sex: Female (Sensitive)
Sex Assigned at Birth: Female (Sensitive)
MRN: 20008788
CSN: 90832
Home Phone: 608-329-0772



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Enter your questions for
Kari into the Q&A pod
now!



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The Oregon Story: Building a Community Informed Transgender Healthcare Program

Amy Penkin, LCSW

Program Supervisor, Transgender Health
Program

Oregon Health & Science University

The Institutional Story

Infrastructure

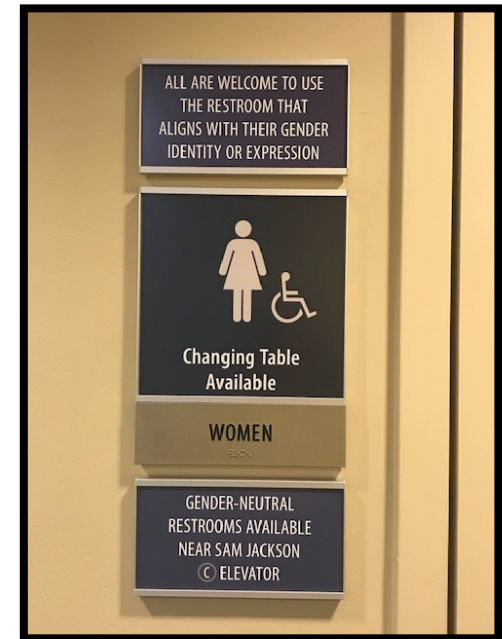
- Dedicated FTE to lead programmatic and institutional initiatives.

Environment of Inclusion

- HEI – provides a roadmap for inclusion
- Policy
- Training
- Facilities
- ID Badges

Advocacy

- partner with local, regional, state initiatives towards inclusion



The Community Story

Collaborative approaches to program development:

- Focus groups, listening sessions, town halls to center voices of transgender communities and those with experiencing providing care to them
- Get community perspectives at the table when decision making is taking place

Creating structures for community involvement:

- Monthly Community meetings
- Community Advisory Board
- THP Volunteer Program
- Campus/community engagement



The Clinical Story

Engage with professional organizations and societies:

- WPATH/USPATH, Standards of Care
- UCSF Center of Excellence – Primary Care Protocols
- Fenway/LGBTQ Health Education Center
- Professional Societies: position statements and best practices

Dedicated vs Integrated care: BOTH/AND approach

- Don't isolate all transgender care to a separate building or clinic
- Allow for optional stand alone trans clinics

Build Clinical Capacity beyond your system

- Integration into academic programs (schools of Medicine, Nursing, Dentistry, etc)
- Continuing Medical Education
- Regional training, e-consultation, telehealth, Project ECHO





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Amy into the Q&A pod now!



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Personal Experience and Benefits of Employee Resource Groups

Gaby Newman (she/her/hers)
Co-lead of LGBTQ Employee
Resource Group at Salesforce

Personal Experience in Health Care Settings

Doctor: Are you sexually active?

Me: Yes

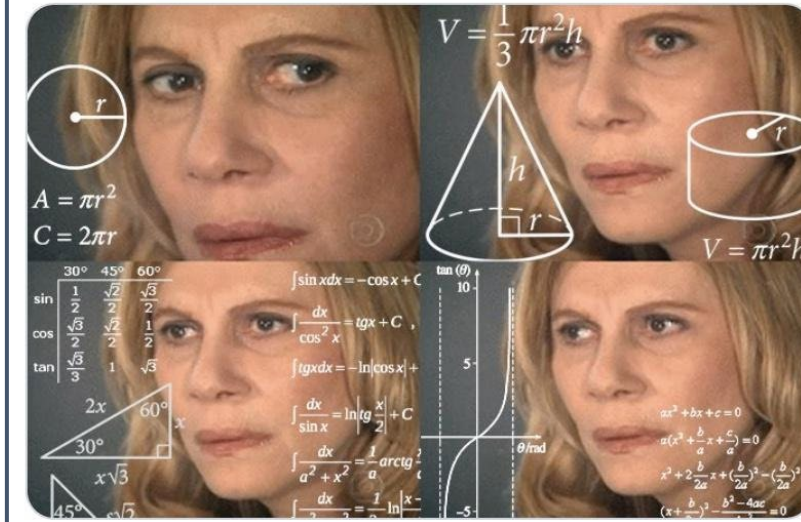
Doctor: is there any way you could be pregnant?

Me [laughs]: No

Doctor: Do you use condoms or birth control?

Me: No

Doctor:



Takeaways and Recommendations:

- Request and review personal information through a questionnaire prior to the appointment
- Ask about sexual history within a certain period and be clear about the reasons why this information is relevant
- Comments meant to be positive can make someone feel “othered”
- Employee and/or social support groups can have a significant impact in fostering a sense of belonging



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Enter your questions for Gaby
into the Q&A pod now!





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Employee Training: Success, Barriers and Best Practices

Dr. Kristie Overstreet
PhD, LPCC, LMHC, LPC, CST
Founder of the Therapy Department

Benefits of Required Training for All Staff

1. Staff feel more competent and confident in their clinical skills when working with transgender and nonbinary patients
2. Staff feel more supported by their organization to ensure all patients regardless of gender identity or expression are treated with respect
3. Ensures that all staff know that discrimination of any form won't be tolerated in the organization
4. Keeps a focus on patient safety
5. Assists to remove healthcare barriers for the patient
6. It's the right thing to do to ensure all patients are treated with dignity

Best Practices in Training

1. Provide options for learning (in person/virtual live/online course)
2. Confidentiality before/during/after patient visit
3. Understanding of the power dynamic between staff and patient
4. Importance of not inflating or deflating gender identity or expression
5. Use of vignettes to assist staff learning, comprehension, and empathy
6. Understanding the Risk Prevention Process
7. Understanding of staff accountability and organizational stance on discrimination



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Q&A: Open Forum



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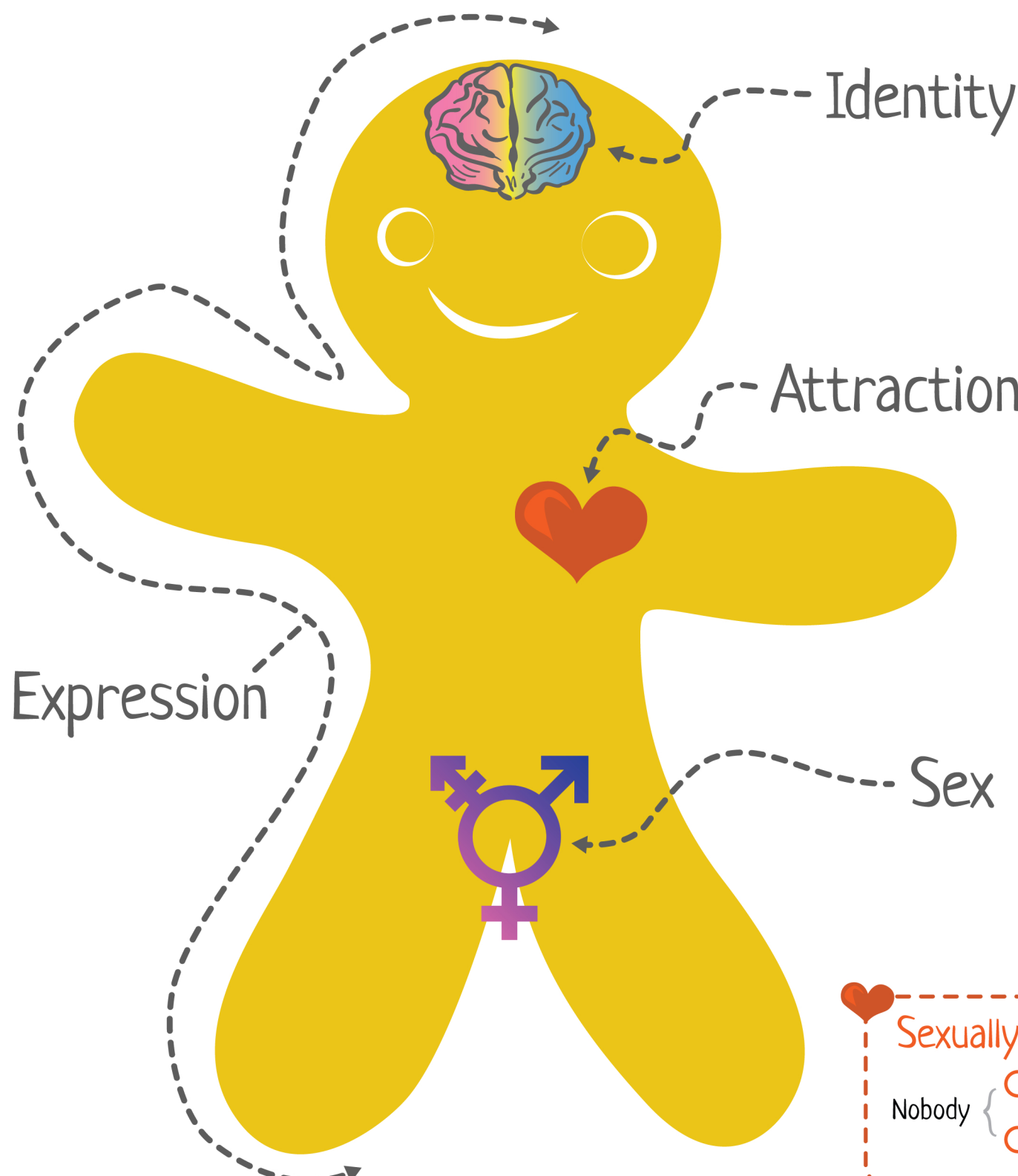
Thank you!

Recording, slides, presenter contact information and the digital Toolkit will be provided later today via email!

The Genderbread Person v3.3

by it's pronounced **METRO**sexual.com

Gender is one of those things everyone thinks they understand, but most people don't. Like *Inception*. Gender isn't binary. It's not either/or. In many cases it's both/and. A bit of this, a dash of that. This tasty little guide is meant to be an appetizer for gender understanding. It's okay if you're hungry for more. In fact, that's the idea.



Plot a point on both continua in each category to represent your identity; combine all ingredients to form your Genderbread. 4 (of infinite) possible plot and label combos

Gender Identity

Indicates a lack of what's on the right.

Woman-ness

Man-ness

How you, in your head, define your gender, based on how much you align (or don't align) with what you understand to be the options for gender.

Labels: "woman", "man", "two-spirit", "genderqueer"

Gender Expression

Feminine

Masculine

The ways you present gender, through your actions, dress, and demeanor, and how those presentations are interpreted based on gender norms.

Labels: "butch", "femme", "androgynous", "gender neutral"

Biological Sex

Female-ness

Male-ness

The physical sex characteristics you're born with and develop, including genitalia, body shape, voice pitch, body hair, hormones, chromosomes, etc.

Labels: "male", "female", "intersex", "MtF Female"

Sexually Attracted to

Nobody

(Women/Females/Femininity)

(Men/Males/Masculinity)

Romantically Attracted to

Nobody

(Women/Females/Femininity)

(Men/Males/Masculinity)

In each grouping, circle all that apply to you and plot a point, depicting the aspects of gender toward which you experience attraction.

USE THE PRONOUNS WE USE



Referring to people by the pronouns they determine for themselves is basic to human dignity.

SHE/HER/HERS **THEY/THEM**
HE/HIS/HIM **ZE/ZIR**

Ask: What pronouns do you use?

Using the wrong pronouns is often a form of harassment against trans and gender nonconforming people.

TRANS PEOPLE AT RISK

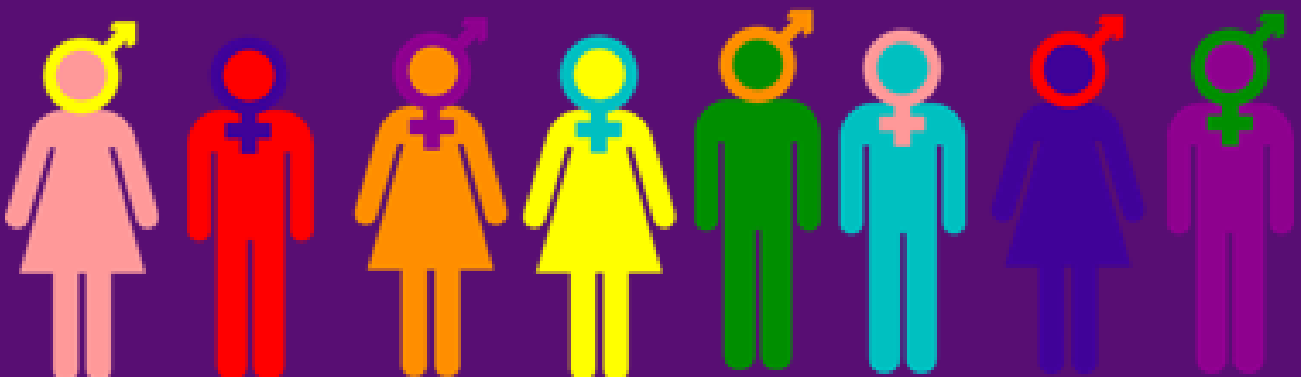
\$1.4M 1.4 million adults in the US
Identify as trans

- 1 in 3 get harassed or assaulted
- 1 in 5 experience homelessness
- 47% kicked out of home
- 28 states don't protect jobs, housing, public accommodations



OVER 40% ATTEMPT SUICIDE

GENDER DIVERSITY IS NORMAL



genderqueer | gender fluid | gender nonbinary | gender nonconforming | bigender | agender | two spirit ...



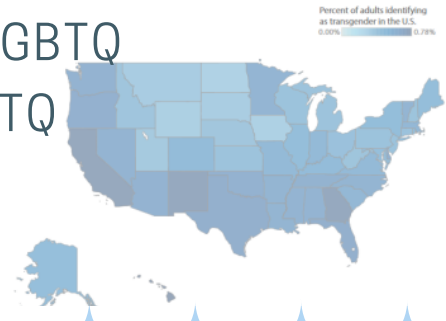
OVER 88% OF GEN Z ARE EXPLORING THEIR GENDER IDENTITY

UNDERSTANDING

THE LGBTQ PATIENT

14.8M

- 4.5% of people in the US are LGBTQ
- 7.3% of 18-35 yr olds are LGBTQ
- .6% identify as transgender



TRANS PEOPLE AT RISK



- 1 in 3 get harassed or assaulted
- 1 in 5 experience homelessness
- 47% kicked out of home
- 28 states don't protect jobs, housing, public accommodations
- 25.8% avoid the doctor
- 81% have depression



OVER 40% ATTEMPT SUICIDE

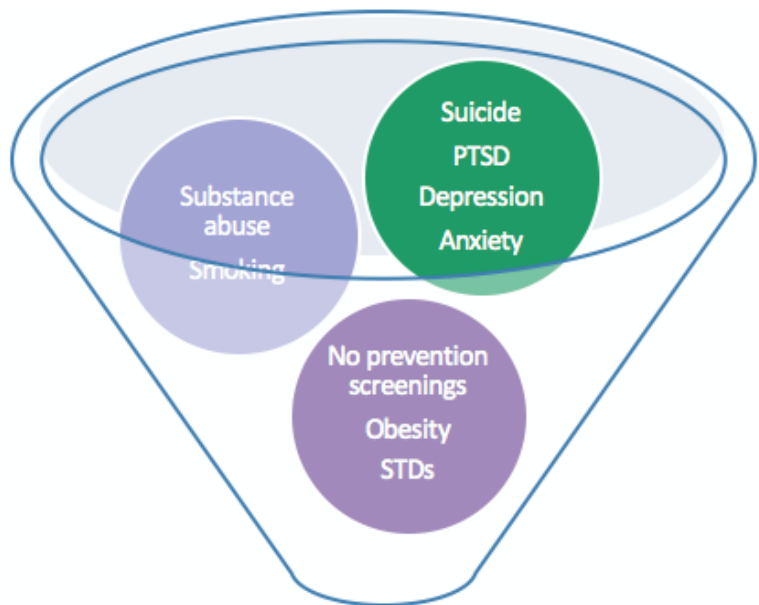
LGBTQ YOUTH

- 77% report feeling depressed or down over the past week
- 95% have trouble sleeping at night
- 70% report feelings of worthlessness and hopelessness in the past week
- 5% say school staff are supportive
- 67% have heard homophobic/negative comments from family members
- 40% of homeless youth are LGBTQ



GEN Z ONLY 48% ARE EXCLUSIVELY HETEROSEXUAL
OVER 88% ARE EXPLORING THEIR GENDER IDENTITY

MINORITY STRESS = POOR HEALTH OUTCOMES



BIAS ↑

OVER 50% OF LGBTQ PEOPLE REPORT DISCRIMINATION BY A HEALTHCARE PROVIDER; 29% OF TRANS PEOPLE HAVE BEEN REFUSED CARE



"COMING OUT" STARS

Materials Needed: Blue, Purple, Red, and Orange paper stars; and pen/pencils for each participant

Length of time: About 20 minutes, depending on size of group

Size of group: Any

*Let each person pick either a **BLUE, ORANGE, RED, or PURPLE** star and then read the following to them:*

Imagine that this star represents your world, with you in the center and those things or people most important to you at each point of the star. So we'll begin by writing your name in the center of the star, making it your very own star! Then, pick a side of the star to begin with. Choose a friend who is very close to you. Someone you care about very much. A best friend or a close friend, it doesn't matter. Write their name on this side of the star.

Next, think of a community that you belong to. It could be a religious community, your neighborhood, a fraternity or sorority, or just a group of friends. Take the name of this group that you are a part of and write it on the next side of the star moving clockwise.

Now, think of a specific family member. Someone that you have always turned to for advice or maybe who knows how to cheer you up when you're sad. A mother, father, aunt, or uncle ... any family member who has made a large impact in your life. Please write their name on the next side of the star.

What job would you most like to have? It could be anything from president to dentist. Whatever your career aspiration is, write it on the next side.

Lastly, what are some of your hopes and dreams? Maybe you want to be a millionaire, maybe you want the perfect family. Think of a few of your hopes and dreams and write them on the last side of your star.

*Have everyone stand up in a circle. Explain that each person is now gay or lesbian and each are about to begin their coming out process. Tell them that they **cannot talk** for the rest of this activity.*

You decide that it will be easiest to tell your friends first, since they have always been there for you in the past and you feel they need to know.

- If you have a **BLUE** star, your friend has no problem with it. They have suspected it for some time now and thank you for being honest with them. Luckily, they act no different toward you and accept you for who you are.

- If you have a **ORANGE or PURPLE** star, your friends are kind of hesitant. They are a little irritated that you have waited so long to tell them, but you are confident that soon they will understand that being gay or lesbian is just a part of who you are ... you just need to give them some time. Please fold back this side of your star.
- If you have a **RED** star, you are met with anger and disgust. This friend who has been by your side in the past tells you that being gay or lesbian is wrong and they can't associate with anyone like that. If you have a red star, please tear off this side and drop it to the ground, this friend is no longer a part of your life.

With most of you having such good luck with your friends, you decide that your family probably deserves to know. So, you turn to your closest family member first so that it will be a little easier.

- If you have a **PURPLE** star, the conversation does not go exactly how you planned. Several questions are asked as to how this could have happened, but after some lengthy discussion this person who is close to you seems a little more at ease with it. Fold this side of your star back, as they will be an ally, but only with time.
- If you have a **BLUE** star, you are embraced by this family member. They are proud that you have decided to come out and let you know that they will always be there to support you.
- If you have a **ORANGE or RED** star, your family member rejects the thought of being related to a person who is gay or lesbian. Much like some of your friends, they are disgusted and some of you are thrown out of your house or even disowned. You are now part of the 42% homeless youth who identify as gay or lesbian. If you have a orange or red star, please tear off this side and drop it to the ground.

Having told your friends and family, the wheels have started to turn and soon members of your community begin to become aware of your sexual orientation.

- If you have a **PURPLE or BLUE** star, your sexual orientation is accepted by your community. They continue to embrace you like anyone else and together you celebrate the growing diversity in your community.
- If you have a **ORANGE** star, you are met with a mixed response. Some accept you and some don't know what to think. You remain a part of the community, and with time, will fit in as you once did. If you have a orange star, please fold back this side.
- If you have a **RED** star, your community reacts with hatred. They tell you that someone like you doesn't belong in their community. Those who had supported you in your times of need no longer speak to you or acknowledge you. If you have a red star, tear this side off and drop it to the ground.

You have heard that rumors have started circulating at work regarding your sexual orientation. In the past, you have made it a point to confront these rumors as soon as they began, but now you're not sure if that will do more harm than good. But, unfortunately, you don't have the chance.

- If you have a **BLUE** star, your coworkers begin to approach you and let you know that they have heard the rumors and that they don't care, they will support you. Your bosses react the same way letting you know that you do good work and that's all that matters.
- If you have a **PURPLE** star, your workplace has become quite interesting. Everyone seems to think that you are gay or lesbian, even though you haven't mentioned it to anyone or confirmed any of the rumors. Some people speak to you less, but the environment has not seemed to change too drastically. If you have a purple star, please fold back this side.
- If you have a **RED or ORANGE** star, you continue to work as though nothing is happening, ignoring the rumors that have spread throughout your workplace. One day, you come in to find that your office has been packed up. You are called into your boss' office and she explains that you are being fired. When you ask why, she tells you that lately your work has been less than satisfactory and that she had to make some cutbacks in your area. If you have a red or orange star, please tear off this side and drop it to the ground.

Now ... your future lies ahead of you as a gay man or lesbian. Your hopes and dreams, your wishes for the perfect life ... for some of you these are all that remain.

- If you have a **PURPLE, BLUE, or ORANGE** star, these hopes and dreams are what keep you going. Most of you have been met with some sort of rejection since beginning your coming out process, but you have managed to continue to live a happy and healthy life. Your personal hopes and dreams become a reality.
- If you have a **RED** star, you fall into despair. You have been met with rejection after rejection and you find it impossible to accomplish your lifelong goals without the support and love of your friends and family. You become depressed and with nowhere else to turn, many of you begin to abuse drugs and alcohol. Eventually, you feel that your life is no longer worth living. If you have a red star, please tear it up and drop the pieces to the ground. You are now part of the 40% of suicide victims who are gay or lesbian.

Source: Jeff Pierce
University of Southern California

Check Yourself: Understanding Your Own Beliefs

Anti-LGBT bias is all around us. Yet we tend to overlook the subtle biases — the anti-LGBT jokes, the exclusion of LGBT related-themes in curricula, even anti-LGBT name-calling. Subtle or not, bias has the power to hurt and isolate people. Your work as an ally includes recognizing and challenging your own anti-LGBT bias. Answer each question honestly, and consider how these will affect your work as an ally to LGBT students.

1. If someone were to come out to you as LGBT, what would your first thought be?
 2. How would you feel if your child came out to you as LGBT? How would you feel if your mother, father or sibling came out to you as LGBT?
 3. Would you go to a physician whom you thought was LGBT if they were of a different gender than you? What if they were the same gender as you?
 4. Have you ever been to an LGBT social event, march or worship service? Why or why not?
 5. Can you think of three historical figures who were lesbian, gay or bisexual?
 6. Can you think of three historical figures who were transgender?
 7. Have you ever laughed at or made a joke at the expense of LGBT people?
 8. Have you ever stood up for an LGBT person being harassed? Why or why not?
 9. If you do not identify as LGBT, how would you feel if people thought you were LGBT?
-

Recognizing your own biases is an important first step in becoming an ally. Based on your responses to these questions, do you think you have internalized some of the anti-LGBT messages pervasive in our world? How might your beliefs influence your actions as an educator of LGBT students? The more aware we are of our own biases and their impact on our behavior, the easier it is to ensure that our personal beliefs don't undermine our efforts to support LGBT students.