Navigating Challenges for Transgender Persons in a Healthcare Arena

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Disclosure

In accordance with the California Society of Pharmacists Policy on Conflicts of Interest, I certify that I had no potential conflicts of interest while developing the materials for this program.

My credentials for presenting the CE are due to my current partner/wife transitioning from male to female (MtF) and the trials and tribulations of getting the appropriate medical care.
Goal:
Create a Welcoming Environment by Raising the Cultural Awareness of the Transgender population seeking Health Care

Objectives:

**Pharmacists:** Raise the cultural awareness, knowledge and skills of health care providers and staff in order to
1. Demonstrate enhanced patient interactions and health outcomes;
2. Create respectful and productive relationships in the workplace;
3. Embrace collaborative relationships with the communities we serve to find solutions to eliminate health care disparities; &
4. Describe examples of challenges facing patients and providers.

**Technicians:** Raise the cultural awareness, knowledge and skills of health care providers and staff in order to
1. Demonstrate knowledge of appropriate terminology when addressing Transgender individuals;
2. Enhance patient interactions; &
3. Describe examples of challenges facing patients and providers.
Transgender, or trans, is an umbrella term for people whose gender identity or expression is different from what is typically associated with the sex assigned to them at birth.
1. Name three (3) ways to enhance your communication with a Trans person.

2. Is it okay to “Out” a trans person? (i.e. that used to be a man)

3. Is it okay to assume a patient is female if they present as such (i.e. carrying a purse, wearing a dress, wearing lipstick, etc.)?

4. Which pronoun would you use, if a trans person is presenting as male and is pregnant?

5. Name three (3) ways to recover from a mistake of language, pronouns, or the persons name?
Trans in the Media

Chaz Bono was actually born Chloé Joy Bono in 1969 to Sammy and Chaz, and as their only child. Bono announced her transition in 1980, under a firebrand on the difficult process of coming out as gay or transgender. Chaz underwent female-to-male surgery between 2008 and 2010. A documentary covering the process premiered at the 2011 Sundance Film Festival.
**Basic Terminology:**

**Cis(gender):** Adjective that means “identifies as their sex assigned at birth” derived from the Latin word meaning “on the same side.” A cisgender/cis person is not transgender. “Cisgender” does not indicate biology, gender expression, or sexuality/sexual orientation, hormonal makeup, physical anatomy, or how one is perceived in daily life. In discussions regarding trans issues, one would differentiate between women who are trans and women who aren’t by saying trans women and cis women. Cis is not a “fake” word and is not a slur. Note that cisgender does not have an “ed” at the end.

**Transgender/Trans:** An umbrella term for people whose gender identity differs from the sex they were assigned at birth. The term transgender is not indicative of gender expression, sexual orientation, hormonal makeup, physical anatomy, or how one is perceived in daily life. Note that transgender does not have an “ed” at the end.

**Queer:** A term for people of marginalized gender identities and sexual orientations who are not cisgender and/or heterosexual. This term has a complicated history as a reclaimed slur.
**Gender Expression/Presentation:** The physical manifestation of one’s gender identity through clothing, hairstyle, voice, body shape, etc. (typically referred to as masculine or feminine). Many transgender people seek to make their gender expression (how they look) match their gender identity (who they are), rather than their sex assigned at birth. Someone with a gender nonconforming gender expression may or may not be transgender.

**Gender Identity:** One’s internal sense of being male, female, neither of these, both, or other gender(s). *Everyone has a gender identity, including you.* For transgender people, their sex assigned at birth and their gender identity are not necessarily the same.

**Sex Assigned At Birth:** The assignment and classification of people as male, female, intersex, or another sex assigned at birth often based on physical anatomy at birth and/or karyotyping.

**Sexual Orientation:** A person’s physical, romantic, emotional, aesthetic, and/or other form of attraction to others. In Western cultures, gender identity and sexual orientation are not the same. Trans people can be straight, bisexual, lesbian, gay, asexual, pansexual, queer, etc. just like anyone else. For example, a trans woman (MtF) who is exclusively attracted to other women would often identify as lesbian.
Some Terms & Definitions

Terms are always changing in the LGBTQ+ community

Basic Terminology: (continued)

**Transition:** A person’s process of developing and assuming a gender expression to match their gender identity. Transition can include: coming out to one’s family, friends, and/or co-workers; changing one’s name and/or sex on legal documents; hormone therapy; and possibly (though not always) some form of surgery. It’s best not to assume how one transitions as it is different for everyone.

**Transsexual:** A depreciated term (often considered pejorative) similar to transgender in that it indicates a difference between one’s gender identity and sex assigned at birth, with implications of hormonal/surgical transition from one binary gender (male or female) to the other. Unlike transgender/trans, transsexual is not an umbrella term, as many transgender people do not identify as transsexual. When speaking/writing about trans people, please avoid the word transsexual unless asked to use it by a transsexual person.

**Transvestite:** A person and especially a male who adopts the dress and often the behavior typical of the opposite sex especially for purposes of emotional or sexual gratification. It includes the prefix trans-, "across", and thus means literally "cross-dresser". In the theater, from ancient Greece to Elizabethan England, transvestism was common because all parts—even Juliet—were played by men. Traditional Japanese Kabuki and Noh drama still employ transvestism of this sort.
Transgender vs Transsexual vs Transvestite vs Intersex

“There is often a lot of confusion about what it means to be transgender, transsexual, or transvestite. People have difficulty understanding these terms and differentiating between them”.

- **Transgender** is the term given to someone whose gender identity does not match up with their assigned sex.
- **Transsexual** people also feel that they are not the gender which they were assigned, but this comes from a neurological condition and often needs to treated with medical intervention, including gender reassignment surgeries and hormone therapy.
- **Transsexualism** and **transgenderism** are not the same, and should not be treated as such. If someone identifies as transsexual, or transgender that is their choice and should be respected.
- **Intersex** is something which is not given much attention today; it refers to someone who is born with genital ambiguity. That’s to say, their chromosomes don't match a convention man or woman's, nor do their genitals. They can identify as male, female, or neither and choose to surgically change their genitals to match their sexual identity or not.

Source credit: By Laura Flaherty (UCC Correspondent), February 6, 2014 http://campus.ie/surviving-college/personal/do-you-know-difference-between-transexual-transgender-and-transvestite
The Gender Unicorn

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
- Women
- Men
- Other Gender(s)

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

Design by Landyn Pan and Anna Moore
# Gender Pronouns

Please note that these are not the only pronouns. There are an infinite number of pronouns as new ones emerge in our language. Always ask someone for their pronouns.

<table>
<thead>
<tr>
<th>Subjective</th>
<th>Objective</th>
<th>Possessive</th>
<th>Reflexive</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>She</td>
<td>Her</td>
<td>Hers</td>
<td>Herself</td>
<td>She is speaking. I listened to her. The backpack is hers.</td>
</tr>
<tr>
<td>He</td>
<td>Him</td>
<td>His</td>
<td>Himself</td>
<td>He is speaking. I listened to him. The backpack is his.</td>
</tr>
<tr>
<td>They</td>
<td>Them</td>
<td>Theirs</td>
<td>Themself</td>
<td>They are speaking. I listened to them. The backpack is theirs.</td>
</tr>
<tr>
<td>Ze</td>
<td>Hir/Zir</td>
<td>Hirs/Zirs</td>
<td>Hirself/Zirself</td>
<td>Ze is speaking. I listened to him. The backpack is zirs.</td>
</tr>
</tbody>
</table>

For more information, go to transstudent.org/graphics
5 THINGS YOU SHOULD KNOW ABOUT TRANS PEOPLE

1. Not all trans people identify as male or female. Trans people have all sorts of different identities outside the gender binary.

2. Trans folks actually have many different sexual orientations. Gender identity and sexual orientation are separate spectrums. Learn more at: www.transstudent.org/gender

3. Trans people led the Stonewall riots. Sylvia Rivera and Marsha P. Johnson were two among many trans women of color who were on the front lines.

4. Not all trans people want surgery and even fewer get surgery.

5. The word transgender was popularized by activist Virginia Prince in 1969. She first published the word in the December 1969 issue of “Transvestia”.

For more information, go to transstudent.org/graphics

Design by Landyn Pan

TSER
Trans Student Educational Resources
What is an Ally?

* An “Ally” is any person like you, who supports and honors diversity and inclusion, they act accordingly to challenge homophobic or transphobic remarks and behaviors, and explores and understands their own personal biases.
UCLA’s William Institute estimate: 0.6% of US population (1.4 million people) – This is an update to The Williams Institute’s widely accepted estimate five years ago of 0.3% -- new estimate drawn from a 2014 CDC telephone health survey.

As the national debate escalates over accommodations for transgender people, the new figure, though still just 0.6% of the adult population, is likely to raise questions about the sufficiency of services to support a population that may be larger than many policy makers assumed.

The percentage of adults identifying as transgender by state ranged from lows of 0.30% in North Dakota, 0.31% in Iowa, and 0.32% in Wyoming to highs of 0.78% in Hawaii, 0.76% in California, 0.75% in Georgia, New York 0.51%, and in Texas it was 0.66%.
How Many Transgender People Are There?

Adults Identifying as Trans:

- North Dakota: 0.30
- Iowa: 0.31
- Wyoming: 0.32
- Hawaii: 0.78
- California: 0.76
- Georgia: 0.75
- New York: 0.51
- Texas: 0.66
Noting that younger adults ages 18 to 24 were more likely than older ones to say they were transgender, researchers said that the new estimates reflected in part a growing awareness of transgender identity.

The analysis may also reflect the limits of self-reporting in obtaining definitive data. In some states seen as more accepting, more adults identified themselves as transgender. In some states perceived as more resistant, fewer adults did so, even though the surveys were anonymous.

That the new numbers could affect planning support services more effectively.
Planning Support Services more Effectively and Reduce the Challenges

* Trans elders who need gender-affirming services in nursing homes.
* Trans adults will need good health care.
* Looking ahead, there will be more trans youth who are economically vulnerable and required to be at school.
* Psychological ramifications of a medical emergency outing someone who’s lived in a community for years where no one knows he or she is a transgender person.
* Other issues include long-term effects of hormone use, sexually active elders, HIV/STD risk, and living in areas without trans resources.

Discrimination is Real

- 28% of transgender people avoid going to the doctor out of fear of discrimination.
- 48% reported postponing medical care due to inability to afford it.
- 50% of transgender patients report having to teach their medical provider and/or pharmacist about transgender care.
- 1 in 3 LGBTQ people identify themselves as a person of color (POC). Queer youth of color face unique hardships that lead to extreme amounts of discrimination.

The Myth of Trans Regrets

- Myth: A number of trans people are beginning to admit that choosing to transition ruined their lives.
- Myth: Transitioning will make a person bitter and depressed.
- Myth: Trans people don’t really want to change their body, they just get pressured into it.
- Myth: If you are Trans guy you would want a hysterectomy and never use your body to carry a pregnancy.

Tips to Recover from a Mistake of Language or Name

* Apologize promptly
* Refrain from giving reasons or excuses for the mistake
* Correct promptly when possible
* Respectful recovery example: “I’m sorry, I used the incorrect name, Paula”

* Inappropriate: “I called you Mike because that’s what it say on your medical record, I have to use your legal name”
* It is usually offensive to ask a transgender person about their birth name, genitals, or surgical goals
* Remember to **Respect** the Member’s Name and Pronoun
  
  Many transgender people go by a pronoun that you may not be used to. If you are unsure how to address someone. Just ASK, “What’s your pronoun?”
DMHC: Insurers Can not Deny Care to Transgender Patients

Friday, April 12, 2013  The California Department of Managed Health Care this week issued guidance reminding health plans that discrimination against transgender individuals violates anti-discrimination laws. DMHC urged insurers to review health plan documents – including coverage limitations based on gender – to ensure they are in compliance with the laws.

Federal health board rules Medicare can pay for transgender recipients’ sex-change surgeries

Friday, May 30, 2014  San Francisco (AP) Medicare can no longer automatically deny coverage requests for sex reassignment surgeries, a federal board ruled Friday in a groundbreaking decision that recognizes the procedures are medically necessary for some people who don’t identify with their biological sex.
Many Trans persons seek out Hormone Therapy to help their bodies feminize or masculinize.

* Hormone Therapy – Why seek out a medical provider for Hormones?
* Monitoring of Hormones and Potential Risks.
* Getting Hormones from a Reputable Source.

In the end, what is important to know is that taking hormones can be done in a safe and healthy way. Working with a trained medical professional and understanding all of the ways hormones will change/affect the body and mind, including the possible risks.
Possible Transition Procedures Male to Female (MtF)

- Transfemine Hormone Therapy –
  - Estrogen, Testosterone blockers, and progesterone.

- Transfemine Surgeries –
  - Breast Augmentation (Implants)
  - Facial Feminization
  - Labiaplasty
  - Laryngeal Surgery
  - Orchiectomy
  - Tracheal Surgery
  - Vaginoplasty
Possible Transition Procedures Female to Male (FtM)

- Transmasculine Hormone Therapy –
  - Testosterone Regimens
- Transmasculine Surgeries –
  - Hysterectomy
  - Mastectomy Partial (Top Surgery)
  - Metoidioplasty
  - Oophorectomy
  - Penile/Testicular Implants
  - Phalliplasty
  - Viginectomy
Health Screenings for ALL Genders

- MtF – Organs assigned at birth and still intact (prostate exams (PSA tests))
- FtM – Organs assigned at birth and still intact (pap smears, cervical and uterine exams, ovaries, etc.)
- MtF & FtM – Breast screenings (mammograms), routine colon testing

- FtM may no longer feel comfortable with an OB-Gyn waiting room or exam room for their appointments and may avoid routine visits.
Case Study: Fernando (FtM)

- Identifies as male
- Pronoun him, his, he, or they
- Age 25
- Hormone therapy 7 years
- Birth genitalia female intact (vagina, cervix, uterus, and ovaries)
- Breast Augmentation three (3) years ago

Wants to have a baby and breastfeed
Case Study: Fernando (FtM) cont.

After the baby is born Fernando wants to breastfeed:

- Medications that might be used to promote milk production: Progesterone, Domperidone, Fenugreek a herbal supplement one of the key compounds, diosgenin, has been shown to increase milk flow, which makes this herb very popular among breastfeeding mothers.

- Fernando’s Pharmacy Experience -- , “my baby doesn’t know about gender. I am not female, I am the baby’s parent”.

- While the diapers, bottles and sleepless nights of parenthood are universal – “a baby doesn’t know what your pronouns are,” he says – additional barriers transgender parents often face in navigating healthcare systems unfamiliar with their needs. Question: “Why would a man need access to the obstetrics unit at the nearest hospital and not feel safe?”
It’s those kind of stories he hopes to bring into focus by sharing his own experiences. As the push for transgender rights in the US stagnates in the grasp of a polarizing debate on bathrooms – “it’s so sad; this is a population that is already incredibly vulnerable to suicide,” he says – he believes the need to widen the parameters of the discussion elsewhere is vital.

He points to Thomas Beatie, a transgender dad who made headlines in 2008. “People wrote about it as the world’s first pregnant man. And people in the trans community said, no, no he’s really not. He was the first really publicized person.”

Fernando was transitioning just as Beatie’s story was making headlines. “I specifically remember thinking I am not going to do anything like that,” he says with a twinkle in his eye. “I just wanted to be a nice, normal trans person – an acceptable trans person.”
Q: What terms should I use when referring to a transgender or gender non-conforming parent?
A: The phrases used can be made more inclusive by substituting “parent” for “mother” or “woman”. Or simply using general inclusive phrases, such as, “Anyone preparing to breastfeed, or currently breastfeeding, or who has breastfed is welcome to use our lactation room,” and “Our meetings offer information, encouragement and support to all breastfeeding parents.”

Q: Should I use the term “breastfeeding” or “chestfeeding” when talking about male nursing?
A: This can vary from person to person, so it is always best to ask them, rather than to assume. In written literature, alternating between “breastfeeding,” “chestfeeding,” and “lactating” may work depending on the context. Another option may be “breastfeeding/chestfeeding.”

Q: What pronoun should I use when talking to a transgender or gender non-conforming person?
A: Ask them! Don’t assume. You will save both yourself and them discomfort by simply asking in a friendly tone what pronoun you should use. It is not usually offensive to ask, but it could be very offensive to get it wrong. It’s usually safe and respectful to use the terms “they” and “them” as gender-neutral pronouns (ignoring the old rule that “they” is only plural).
Case Study: Paula (MtF)

Ms. Paula’s journey

- Identifies as female
- Pronoun she, her
- Age 61
- Hormone therapy 3 years
- Birth genitalia male intact (scheduled for bottom surgery 02/2017)
- No Other surgical procedures
Case Study: Paula (MtF) cont...
Ms. Paula’s journey

* The “Big Step” -- Gender Dysphoria
* No Prior History growing-up
* The Health Care Journey
  * The Medical Appointments
  * The Pharmacy “trials & tribulations”
  * Mental Health Appointments
  * Transgender Clinic
  * Sex Reassignment Surgery (SRS) Date 02/2017 (Orchiectomy, Vaginoplasty, & Labiaplasty)
I agree with Laura Flaherty “even though we live in a developed, educated country in the 21st century, there is still a lot of ignorance surrounding these terms and others like them, which is inexcusable. Transgender and transsexual people often encounter trouble when it comes to relationships and public restrooms, more often that not experiencing violence and abuse. Every step needs to be taken so that people who fit into these categories feel as accepted and comfortable as possible”.

It is a simple human right.
1. Name three (3) ways to enhance your communication with a Trans* person.
2. Is it okay to “Out” a trans person? (i.e. that used to be a man)
3. Is it okay to assume a patient is female if they present as such (i.e. carrying a purse, wearing a dress, wearing lipstick, etc.)?
4. Which pronoun would you use, if a trans person is presenting as male and is pregnant?
Q1. Name three (3) ways to enhance your communication with a Trans person.
   1) Do not make assumptions. Gender roles shift over generations and from culture to culture. Distinctions include, however, may not be limited to hairstyles, clothing, and or body ornamentations.
   2) Use correct names & pronouns– if you are not sure – just ask.
   3) Take time to talk with the person and be prepared to listen. Allow them to educate you.
   4) Extra credit answer: Learn what you can do to be an ally.

Q2. Is it okay to “Out” a trans person? (i.e. that used to be a man)
   Outing the status of a trans person is not appropriate before, during, or after a gender transition. Transitioning status should be disclosed on a need-to-know basis and only with the consent of the patient.

Q3. Is it okay to assume a patient is female if they present as such (i.e. carrying a purse, wearing a dress, wearing lipstick, or even pregnant, etc.)?
   Assumptions made about gender roles shift over generations and from culture to culture. Ask which pronoun they prefer.

Q4. Which pronoun would you use, if a trans person is presenting as male and is pregnant?
   Do not assume and ask which pronoun they prefer.

Q5. Name three (3) ways to recover from a mistake of language or name?
   1) Apologize promptly and/or Correct promptly when possible
   2) Refrain from giving reasons or excuses for the mistake
   3) Respectful recovery example “I am sorry, I used the incorrect name, Paula”
Session Code:

1. Write down the course code. Space has been provided in the daily program-at-a-glance sections of your program book.

2. To claim credit: Go to www.cshp.org/cpe before December 1, 2016.