University Health Care

TRANSformation: How to Make Your Health Center More Inclusive for Trans* Students

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Why Is This Important?

Health is critical for student success

• Health creates capacity

• Positive health status is associated with greater ability and readiness to learn and engage fully

• “The learner as a whole person matters in the learning.”

(Silverman, Underhile, & Keeling, 2008)
University Health Centers’ Role in Overall Student Health

- Provide high quality outpatient services, both prevention and intervention

- Example Mission Statement (UIUC):
  - “Provide high quality ambulatory healthcare and health education to students and offer advisory expertise to University leadership”
Health Disparities Among Trans* People

- Survey conducted by Center for American Progress found:
  - 48% postponed medical care because of affordability
  - 28% postponed care due to discrimination
  - 25% reported being harassed in health care settings
  - 2% report being physically assaulted

- Barriers include:
  - Stigma
  - Providers that are not knowledgeable
  - Forms that are not inclusive
  - Lack of gender neutral bathrooms
  - Calling patients by their legal name
  - Not inquiring about pap smears in FTM patients

www.transgenderlaw.org
I start HRT at an informed consent clinic. My GP has now magically refused to reup any of my blood pressure scrips. #TransHealthFail

9/14/15, 1:05 PM
Dear doctor. Thanks for outing me and misgendering me simultaneously. Nice one. #transhealthfail

9/4/15, 10:50 AM

2 RETWEETS 1 FAVORITE
What is the Role of University Health Centers concerning Trans* Students?

• To ensure that access to and treatment in university health centers is not discriminatory toward trans* students (Title IX)
  • Reduce barriers to accessing high quality health services
  • Ensure that students are not subject to harassment or discrimination
  • Provide outpatient health services that meet the needs of trans* students.
Stats: University Health Centers and Trans* Students

• 983 colleges and universities have non-discrimination policies that include gender identity/expression
  • Example from UIUC

• 63 colleges or universities offer student health insurance that covers hormones and gender confirmation surgeries

• Another 20 colleges or universities offer insurance that covers just hormones

• 47 colleges enable students to change their gender on their campus records without evidence of medical intervention.
Who Are the Key Players?

• University Health Professionals
  • Doctors, physician assistants, nurse practitioners, nurses, medical assistants, psychiatrists, psychologists, counselors, health educators, administrators

• Health Center front line staff
  • Clerks, secretaries, administrative assistants

• Student Insurance staff

• Allies in other parts of the university
  • LGBT Resource Center, Counseling Center, Housing, Cultural Houses, Student Affairs professionals, Faculty
Health Concerns specific to Trans* Students: Hormone Therapy

- **Testosterone**
  - Cis-male hypogonadism

- **Estrogen**
  - Contraception, post-menopause

- **Androgen antagonists**
  - Acne, blood pressure, heart failure

- **Progesterone**
  - Contraception, menstrual irregularity
Health Concerns specific to Trans* Students: Hormone Therapy

Lab monitoring:
- Complete blood count
- Liver tests
- Basic chemistries
- Lipids (Cholesterol)
- Hormone levels

Types of prescribing:
- Bridging (until under care of another prescriber)
- Maintenance (student already transitioned)
- Initiation (requires most resources, experience)
Health Concerns specific to Trans* Students: Gender Confirmation Procedures

• **Surgical Options**
  • Breast reduction
  • Breast implantation/construction
  • Hysterectomy
  • Genital reconstruction

• **Issues for Primary Care**
  • Documentation and letters of support
  • Pre-operative management of health
  • Pre-operative clearance
  • Pre-operative labs
  • Post-operative issues (ask the surgeon!)
Health Concerns specific to Trans* Students: Minority Stress

• Health effects of chronic stress created by stigmatization (Meyer, 2003; Potter, Goldhammer & Makadon, 2008)

• Transgender-related discrimination & relationship stigma associated with increased odds of depression, anxiety & somatization (Bockting et al., 2013; Gamarel et al., 2014).

• Health care providers can be a part of decreasing or increasing minority stress - and therefore impact patient health.
Health Concerns specific to Trans* Students

Higher Risk for:

• Substance use: smoking, alcohol, drugs
• Mental health concerns: suicide, anxiety, depression, somatization
• HIV and STIs
• Eating disorders, obesity
• Cancer: anal, breast, cervical
• Victimization: hate crimes, interpersonal violence
Health Concerns specific to Trans* Students

- Psychotherapy
  - To explore gender identity/role/expression
  - To address negative impact of gender dysphoria
  - To address negative impact of transphobia, sexism, heterosexism, contextual issues
  - To alleviate internalized transphobia
  - Enhance support systems
  - Improve body image
  - Promote resilience
  - Possible Assessment for Letter Writing
Standards of Care: History

- 1979: Harry Benjamin International Gender Dysphoria Association (HBIGDA) formed, later renamed World Professional Association for Transgender Health (WPATH)
- Created Standards of Care (SOC) to improve outcomes; now in its 7th version (2011)
- “The safest and most effective treatment for the distress experienced by people who are otherwise unable to physically manifest their true sex is medical care that may include hormone therapy, surgical interventions, and other appropriate treatment as determined by the individual in consultation with their medical provider(s)”
Standards of Care: History

Outcomes have steadily improved over time with adoption of the SOC:

• **1981**: 80.7% of FTM’s satisfied, 71.4% of MTF’s satisfied
• **1990**: 97% of FTM’s satisfied, 87% of MTF’s satisfied; all have improved psychosocial outcomes (Green & Fleming, 1990)
• **2010**: 86% assessed by clinicians as being stable (“normal”) or improved global functioning @ follow-up (Johansson, Sundbom, Hojerback, & Bodlund, 2010)
WPATH Standards of Care (2011)
http://www.wpath.org/uploaded_files/140/files/Standards%20of%20Care,%20V7%20Full%20Book.pdf

• Discusses unique health needs of trans* patients

• Outlines tasks of mental health providers and responsibilities of treating physicians
  • Emphasizes relationship among providers – counselors, physicians, surgeons
  • Letter writing content

• Informed Consent
  • Psychological/physical benefits and risks
  • Psychosocial implications of HRT
  • Informed Consent Models fit within SOC, v.7
Measures to Complement Your Assessment for Letter Writing


Making Health Centers more Trans*-Inclusive: Best Practice Guidelines

- American College Health Association (ACHA) Guidelines: “Best Practices to Be Trans-Inclusive for Campus Health Centers,” April 2015 (acha.org)


- Transgender Law and Policy Institute, “Best Practices for Transgender Students”
Best Practice Guidelines: Overview

- Health insurance coverage (hormones, gender confirmation procedures)
- All gender bathrooms
- Inclusive language, trans* specific info on website
- Patient advocates, regular trans health clinic
- Prescriptions with preferred name
- Women’s health exams outside of women’s health
- Allow students to self-identify gender, use preferred name, and indicate “sex assigned at birth”
- Train/hire/maintain knowledgeable/supportive staff (all levels), train physicians to start hormones/write Rx
- Education/prevention strategies for issues specific to trans* students (developed with the trans* community)
How to be Effective: Working with Allies

• **Relationships with Allies**
  • Collaborating within/outside of health center
  • Voices are stronger together

• **What can allies do?**
  • **Training/Outreach**
    • In-service for health center staff
      • Ongoing, all staff
      • Familiarize with needs of trans* students
      • Competent/non-judgmental care
      • Resources on/off campus
    • Ally trainings
  • **Advocacy**
    • Both on/off campus (examples)
  • **Consultation**
    • Holistic wellness, comprehensive care
How to be Effective: Tailor Your Approach

• Provide information
  • WPATH Standards of Care
  • Best Practice Guidelines
  • Services other universities are offering (campus pride clearinghouse)

• Secure “buy-in”: convey why this is important
  • Health disparities
  • Allow trans* students to share their experiences
  • Non-discrimination policy/mission statement/Title IX

• Meet your audience where they’re at
  • Provide basic info to audiences who are not familiar
  • Decrease defensiveness/encourage openness
    • Give tangible strategies (inclusive language is a good start)

• Be strategic
  • Don’t try to do everything at once
  • Set a series of goals and start with the small ones
How to be Effective: Specific Steps

• Educate yourselves
  • Network, read, attend presentations
  • Know the resources available to trans* students in your area

• Engage in case consultation
  • Connect with primary care, psychiatry, counseling, etc

• Conduct a Needs Assessment
  • Invite feedback from the trans* community
    • Solicit feedback from trans* students about their experiences
  • What is your center already doing well?
  • What changes/additions are needed?
  • What do stakeholders want?
  • How is this in line with the center’s mission and the university’s commitment to inclusion/non-discrimination policy
How to be Effective: Specific Steps

• Identify stakeholders and interested individuals
  • Health Center staff, LGBT RC staff, Counseling Center, campus and community advocates, community providers
  • Meet and assess needs

• Meet with administrators/center director
  • Share information from assessment, convey passion/interest
  • Propose specific goals and strategies for implementing changes
  • Assess level of support from admin and system
    • Find other allies on campus/in community/online as needed
How to be Effective: Specific Steps

• Form a team
  • Identify interested staff
  • Establish regular meetings
  • Identify goals and timeline
    • Example goals:
      • Train all staff
      • Make paperwork and signage inclusive
      • Establish all-gender bathrooms
      • Implement hormone replacement therapy
      • Advocate for insurance coverage
      • Provide more inclusive/integrated health services

• Monitor progress

• Ongoing professional development and collaboration across campus
How to be Effective: Resources for Medical Providers

- **WPATH (World Professional Association for Transgender Heath)** - [http://www.wpath.org/](http://www.wpath.org/)
  - Standards of Care (SOC7)
  - Provider Directory
  - Training Courses
- **GLMA (Health Professionals Advancing GLBT Equality)** - [http://www.glma.org/](http://www.glma.org/)
  - Online transgender learning module
  - Provider directory
- **UCSF Center of Excellence for Transgender Health** - [http://www.transhealth.ucsf.edu/](http://www.transhealth.ucsf.edu/)
  - Primary Care Protocol
  - Online Learning resources
Things to keep in mind...

- Setbacks will happen and mistakes will be made
  - Stay positive and try not to get discouraged!

- Two steps forward, one step back
  - Example: UIUC health insurance coverage/denial of claims

- Connect with other allies and students
  - Remind yourself of goals and why you’re doing this work, get support from others, brainstorm ways to overcome setbacks

- You can always make a difference on an individual level while you’re working toward larger-scale changes
References

American College Health Association, www.acha.org

Campus Pride Trans Policy Clearinghouse, www.campuspride.org

Center for American Progress, www.americanprogress.org


Transgender Law and Policy Institute, www.transgenderlaw.org

World Professional Association for Transgender Health, www.wpath.org
Questions?

Thank you!