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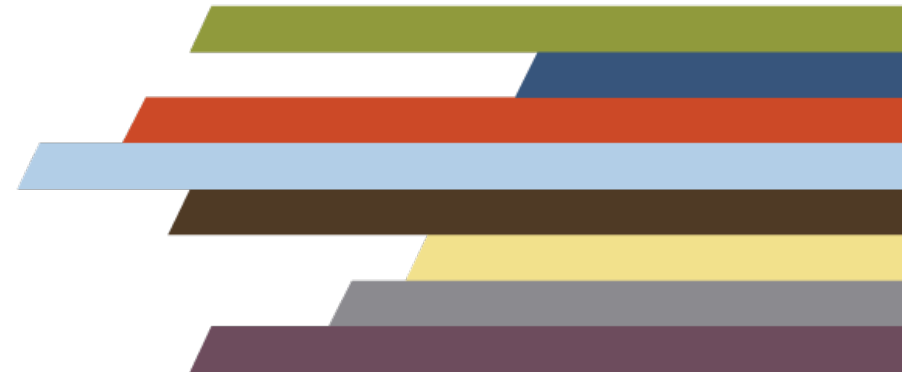
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Barriers to Mental Health Services in the Trans, Queer and Non-Binary Community

Dr. Miguel Vázquez-Rivera



Objectives



Basic Concepts

Review basic concepts relevant to the LGBT community.

Contextualize the experience of developing in a transgender identity.

Identity Development



Healthcare Barriers and Ethical Interventions

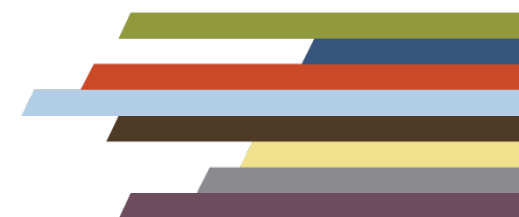
Discuss ethical and sensible interventions.



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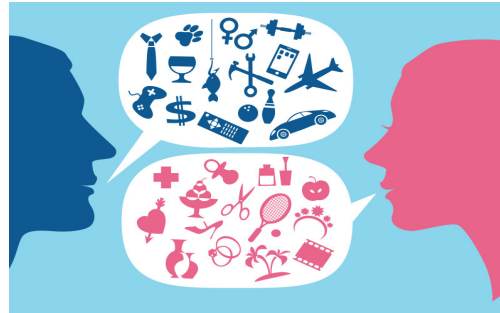


Basic Concepts



Sex

Biological classification of a person as a man, woman, transexual or intersex person. Comprehends characteristics such as: internal and external genitals, chromosomes, and sex hormones (APA, 2006, 2011a; SFHRC, 2011).



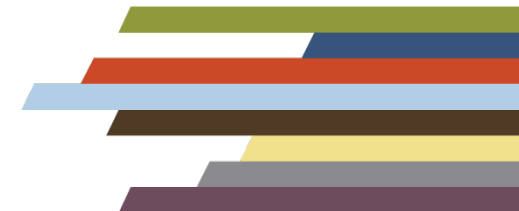
Gender

Social classification that refer to attitudes, emotions and behaviors given to a person by culture and associated to the sex assigned at birth (APA, 2011a; NCFTE, 2014).



Sexual Orientation

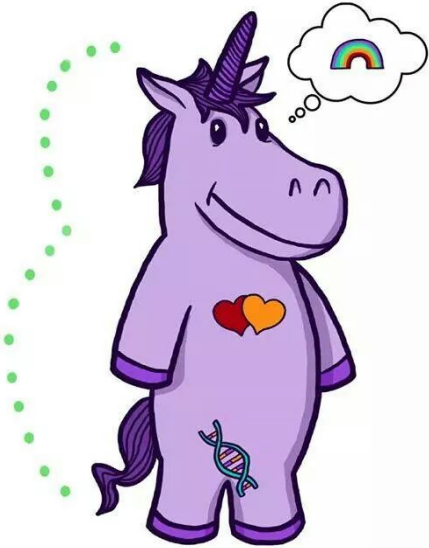
Physical, romantic, emotional and spiritual attraction towards the same gender/sex or other. (bisexuality, heterosexuality and homosexuality). It can be continuous or fluid. (APA, 2011b; SFHRC, 2011).



Illustrated Concepts

The Gender Unicorn

Graphic by:
TSER
Trans Student Equality Resources



Gender Identity

- Female/Woman/Girl
- Male/Man/Boy
- Other Gender(s)

Gender Expression/Presentation

- Feminine
- Masculine
- Other

Sex Assigned at Birth

- Female
- Male
- Other/Intersex

Sexually Attracted To

- Women
- Men
- Other Gender(s)

Romantically/Emotionally Attracted To

- Women
- Men
- Other Gender(s)

To learn more go to:
www.transstudent.org/gender
Design by Landyn Pan

TSER, 2020)

LGBT+ Community



Gays

Man who has physical, romantic, emotional and/or spiritual attractions to men (SFHRC, 2011).



Bisexuals

Person who has physical, romantic, emotional and/or spiritual attractions to more than one gender (APA, 2008, SFHRC, 2011).



Transgender

Person whose gender identity or expression is different than the one assigned at birth (NCFTE, 2014; SFHRC, 2011).



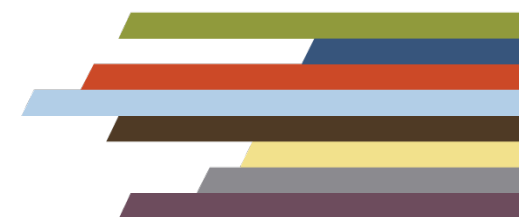
Lesbians

Woman who has physical, romantic, emotional and/or spiritual attractions to women (SFHRC, 2011)



Questioning

Refers to a person who is uncertain about their sexual orientation or gender identity. (SFHRC, 2011).



Illustrated Concepts

TRANS GENDER UMBRELLA

cisgender: individuals whose identity and expression usually match up with the sex assigned to them at birth.

Transgender
the umbrella term, sometimes abbreviated as **trans***
describes what these varied identities have in common:
some element of crossing over or challenging
traditional gender roles, expressions, or expectations.

You might be intimidated by all these new words. I know I was. So...why all the labels? I think about that Mark Twain quote, you know, the one that says the difference between the right word and the almost-right word is the difference between lightning and a lightning bug. Fortunately, we don't have to memorize all these terms - there's no quiz! Just remember to approach each new person you meet with a respectful attitude and open heart.

We live in a world...

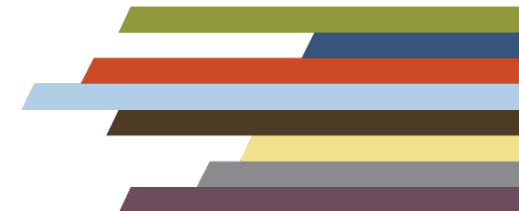
Heterosexist.

Its an attitude and assumption that heterosexuality is the only valid or superior sexual orientation (SFHRC, 2011).

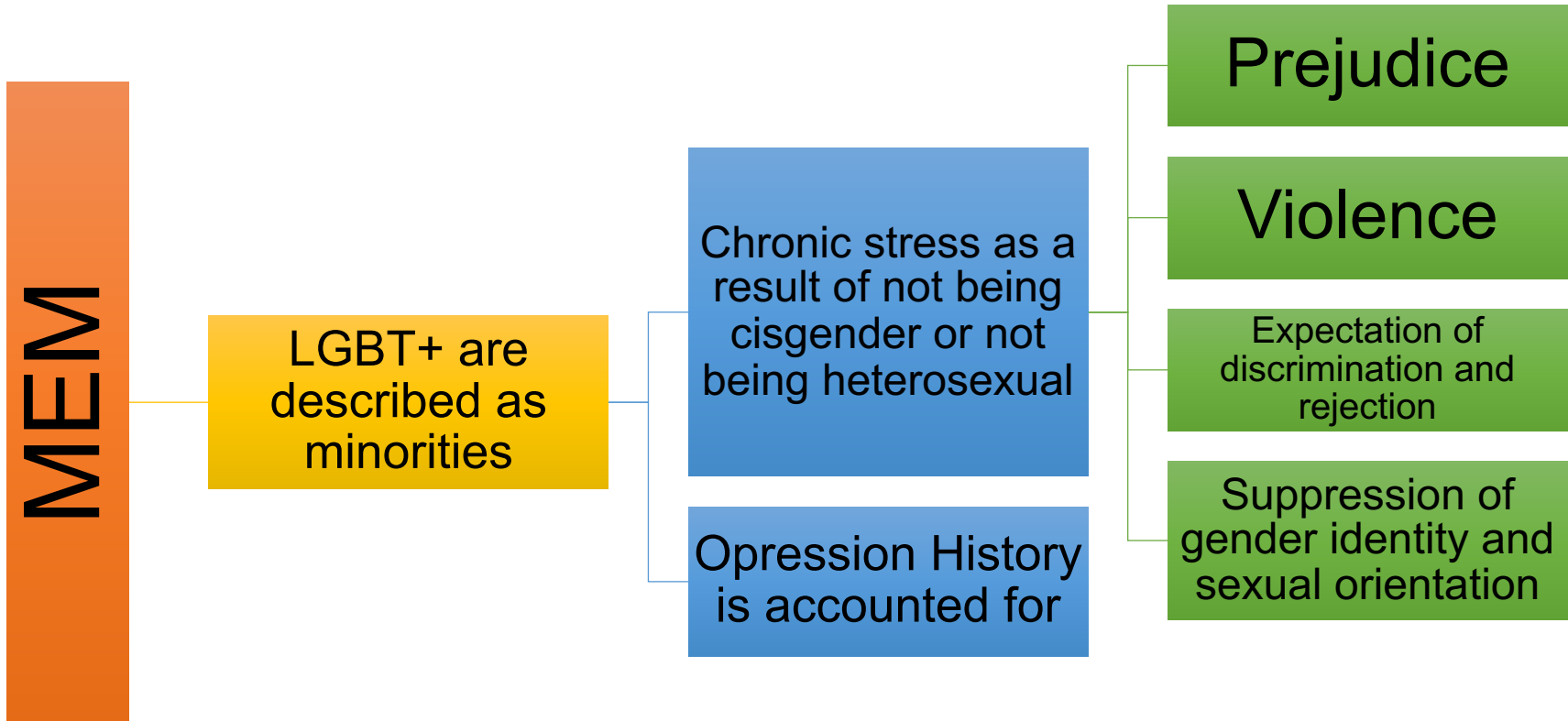


Cissexist.

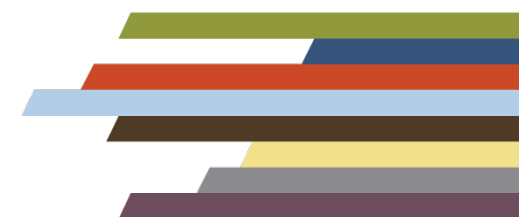
Its an attitude and assumption that everyone conforms to the sex and gender assigned at birth, or that cisgender people are the only valid gender identity or superior than transgender people. (Rodríguez-Madera, 2012).



Minority Stress Model

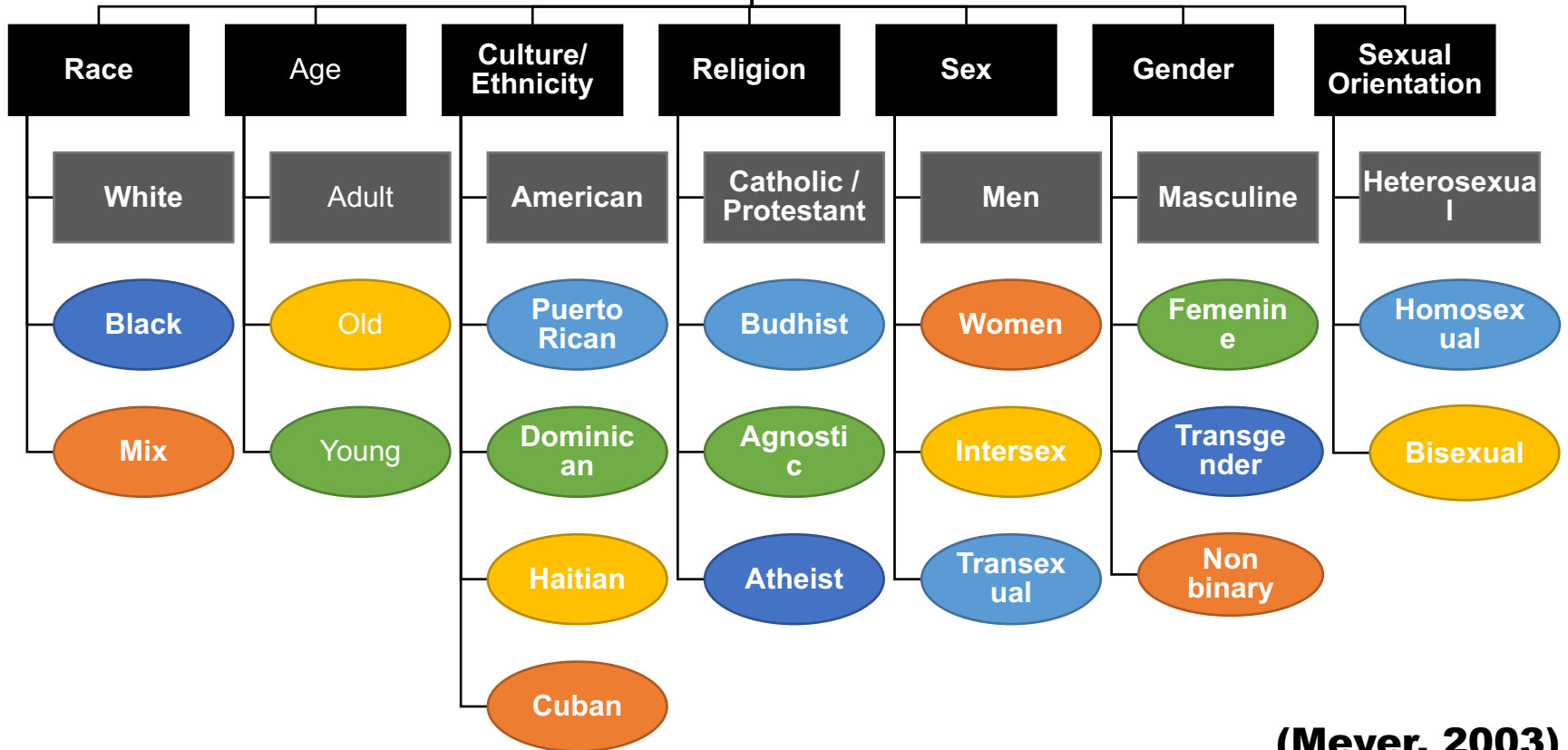


(Brooks, 1981; Meyer, 2003; IOM, 2011; Grov et al., 2006; Martinez & Sullivan, 1998; Savin-Williams, 1997).

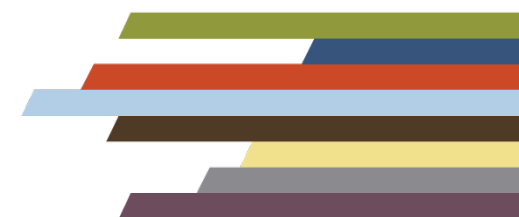


Minority Stress Model

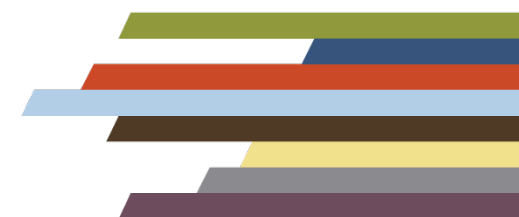
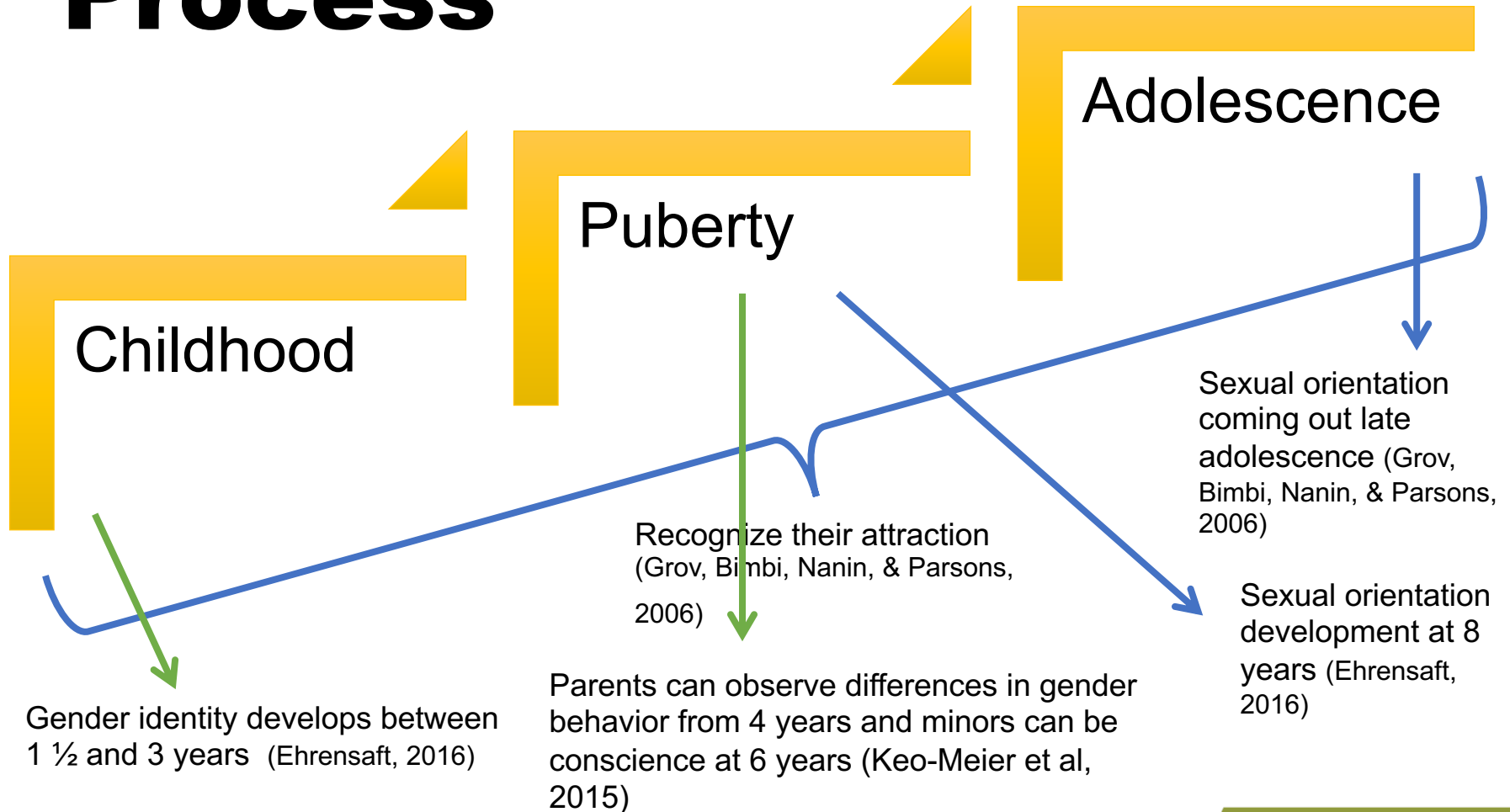
Categories



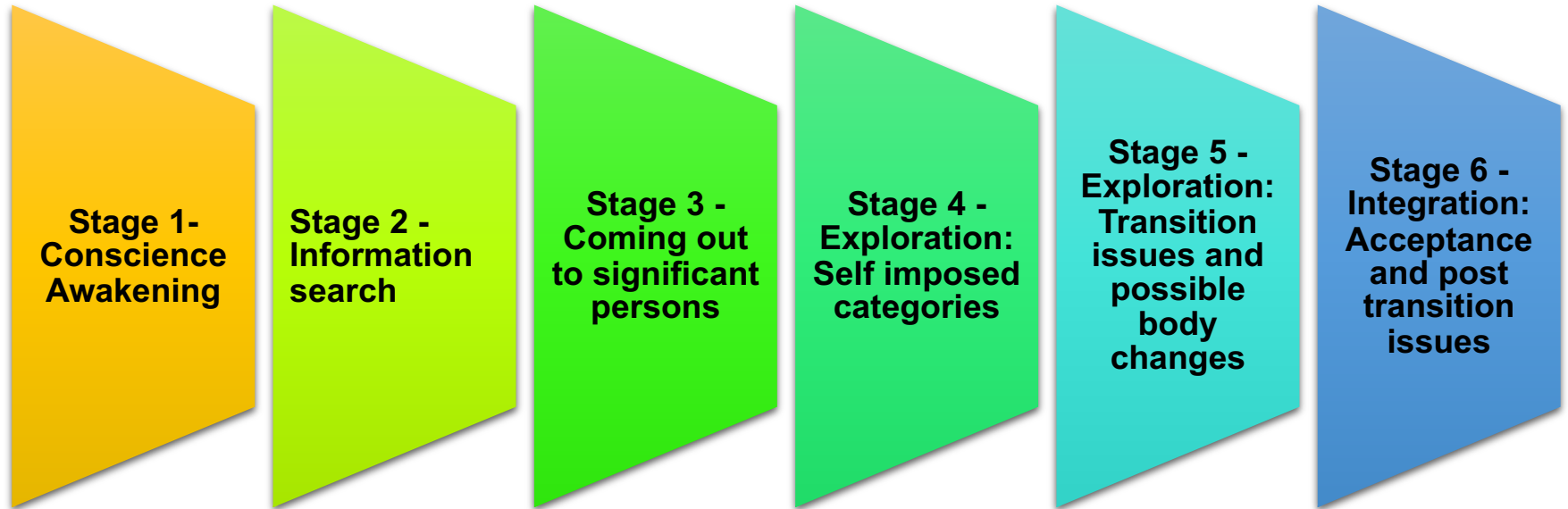
(Meyer, 2003)



Identity and Coming Out Process



Trans Identity Development Stages (Lev, 2004)

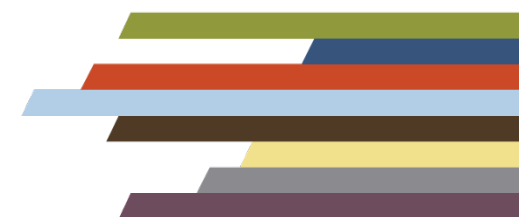


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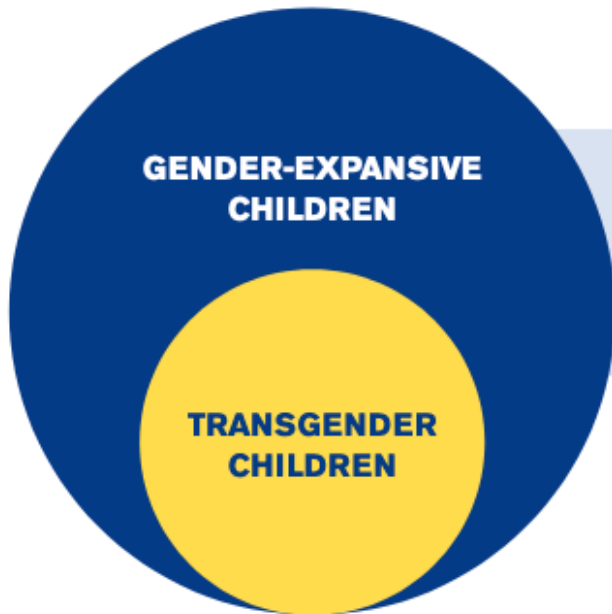
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Gender Expansive Children vs. Transgender Children



GENDER-EXPANSIVE CHILDREN

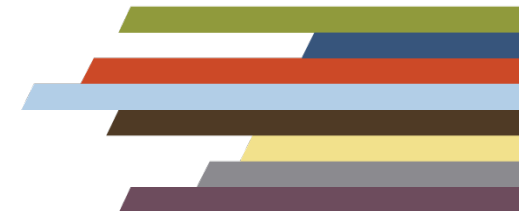
● GENDER-EXPANSIVE CHILDREN

- Behavior, preferences or other traits are not gender-typical
- Not necessarily distressed –except because of bullying or stigma

● TRANSGENDER CHILDREN

- Distressed about assigned sex and/or expected gender identity
- May call for gender transition

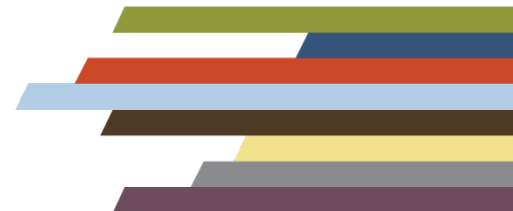
(Murchison, 2016)



Coming Out



LGBT youth have the right to self determination. They should choose how, when, where and to whom they will come out.



Family acceptance



Gender Nonconforming Children

Gender non conforming children are at a higher risk of sexual, physical, and psychological abuse from their caretakers (Roberts, Rosario, Corliss, Koenen & Austin, 2012a) (Roberts, Rosario, Corliss, Koenen & Austin, 2012b)



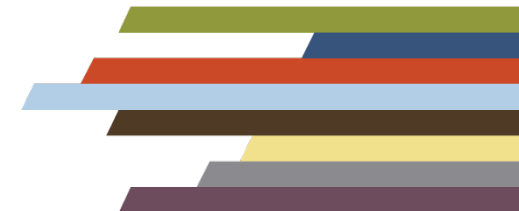
LGB Children

1/3 of LGB children are accepted by their parents, 1/3 rejected, and 1/3 don't come out until late adolescence or early 20s. In general terms, most parents accept at some point (Rosario, Schrimshaw & Hunter, 2011).

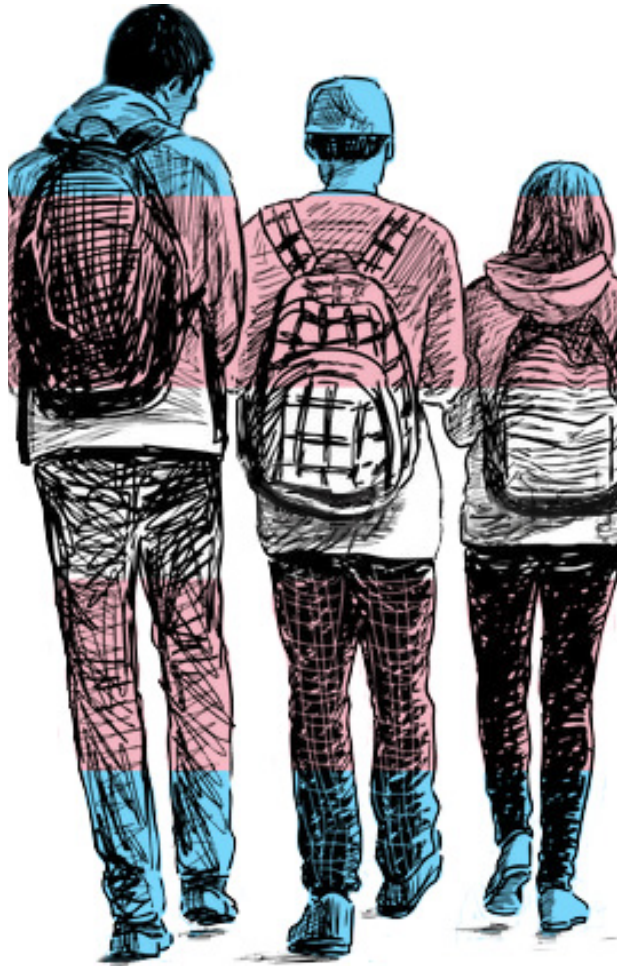


Trans children

Few studies on family acceptance. This study found more experience of rejection than cisgender peers (Yadegarfar, Meinhold-Bergmann & Ho, 2014)



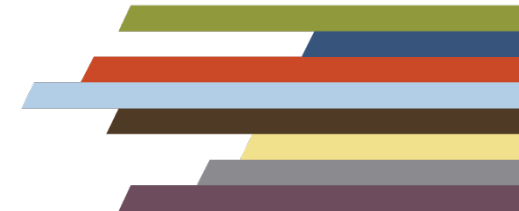
School Environment



Statistic

- **96%** heard negative comments of their gender expression (GE)
- **77%** heard negative comments of their GE from the faculty
- **68%** were victims of verbal harassment because of their GE
- **57%** did not feel secure because of their GE
- **37%** suffered harassment and physical aggression because of their GE

Giga, Danischewski, Greytak, Kosciw, & Ocasio-Domínguez, 2017).



Unboxing Trans Health

ATOD

Highest rates of ATOD (Sánchez, Sánchez, & Danoff, 2009; Gay & Lesbian Medical Association, 2010).

Health Barriers

More health barriers (Sánchez, Sánchez, & Danoff, 2009; Gay & Lesbian Medical Association, 2010).

Unemployment

59% unemployed. Trans men more employment. 74% of trans women in poverty (TRANSforma Project, 2014).

Sexual Work

81% did sexual work (TRANSforma Project, 2014).

Homelessness

20 % considered homeless. (Bockting, Miner, Swinburne, Hamilton & Coleman, 2013).

Physical Security

1 of 12 trans women are killed. 1 of 8 black trans woman are killed (TSER)

HIV

High percentage of trans women live with HIV/STD. (Sánchez, Sánchez, & Danoff, 2009; Gay & Lesbian Medical Association, 2010).

Mental Health

Higher prevalence of depression, anxiety and suicide (Bockting, Miner, Swinburne, Hamilton & Coleman, 2013).



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Historical Data

DSM 3 Transsexuality=
discomfort with sexual
anatomy for more than 2
years (APA, 1980).

DSM 4: Gender
Identity Disorder
(Rodríguez Madera,
2012).

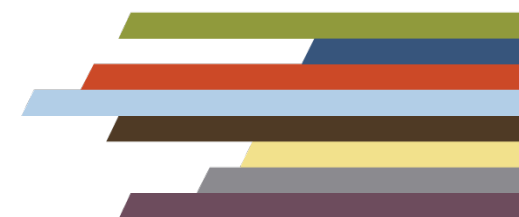
DSM 5: Gender
Dysphoria (APA,
2013).



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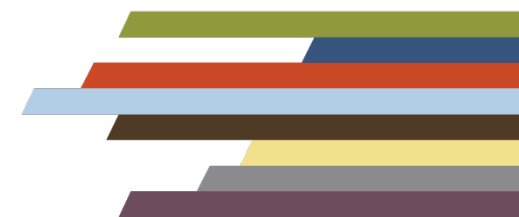
Historical Data

- May 2019
- Gender incongruence from mental disorders to sexual health.
- Rational: gender incongruence is treated by medical interventions

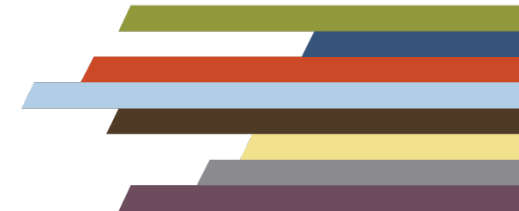


World Health
Organization

(HRW, 2019)

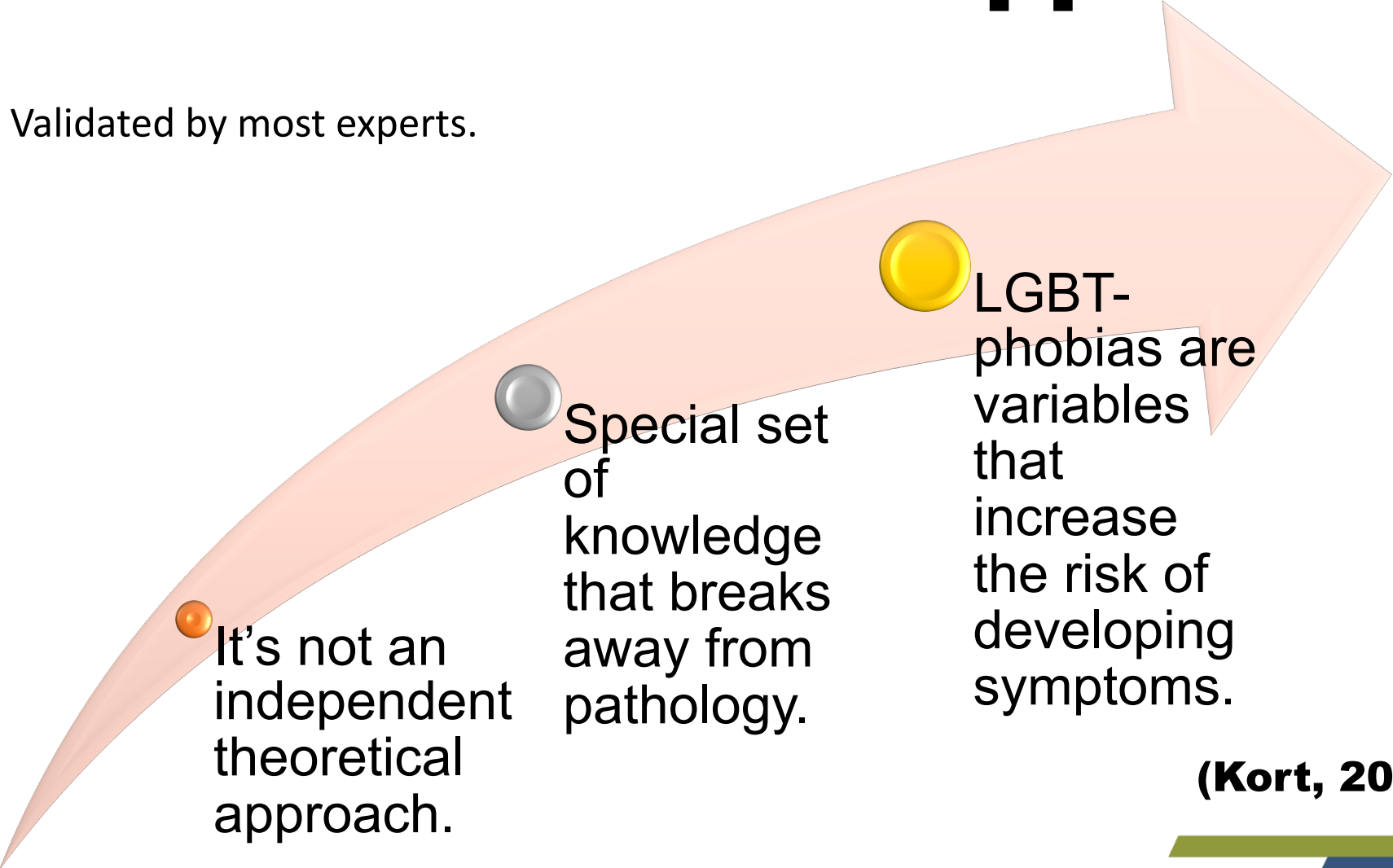


Gender Dysphoria



Transaffirmative Approach

Validated by most experts.



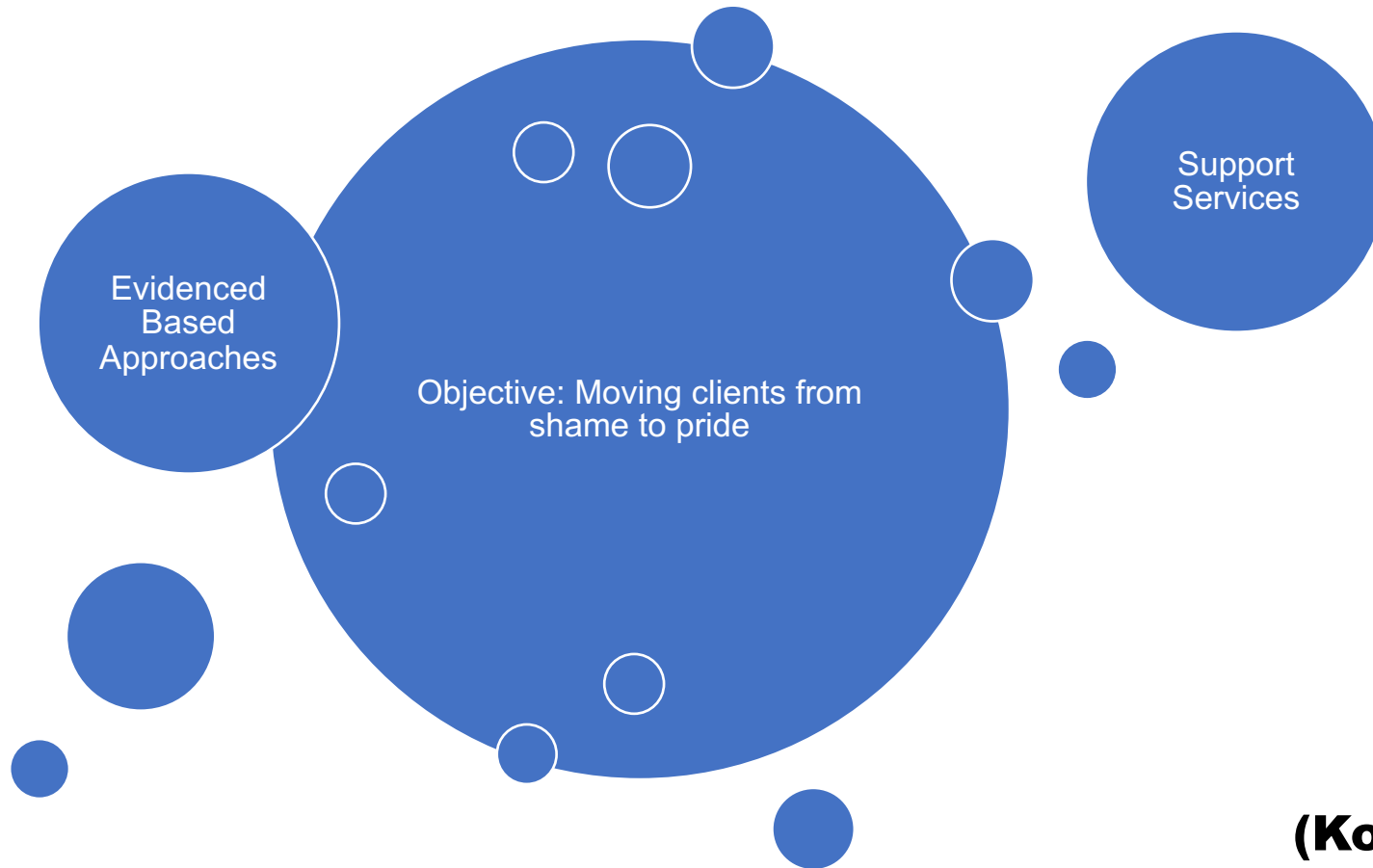
It's not an independent theoretical approach.

Special set of knowledge that breaks away from pathology.

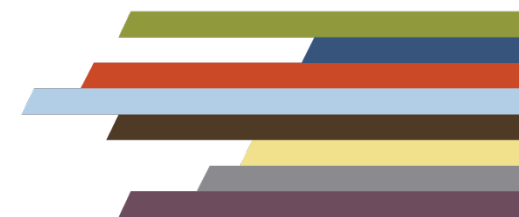
LGBT-phobias are variables that increase the risk of developing symptoms.

(Kort, 2008)

Transaffirmative Approach



(Kort, 2008)



Documentation

What is your current sexual orientation?

- Heterosexual
- Homosexual (Gay or Lesbian)
- Bisexual
- Other, specify:
- I rather not say

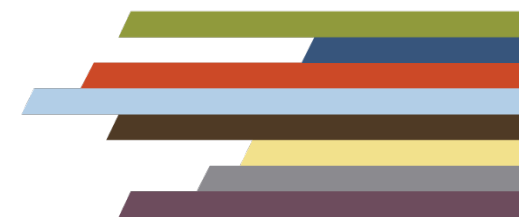
(Keuroghlian & Grasso, 2017)

What is your current gender identity?:

- Masculine
- Feminine
- Transgender Man/Trans Man/Female to Male (FtM)
- Transgender Woman/Trans Woman/Male to Female (MtF)
- Genderqueer, neither man nor woman
- Other, specify:
- I rather not say

¿What sex were you given in your birth certificate?:

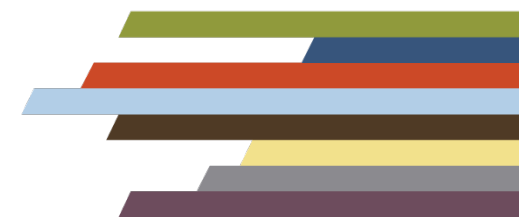
- Masculine
- Feminine
- I rather not say



Intake Questions



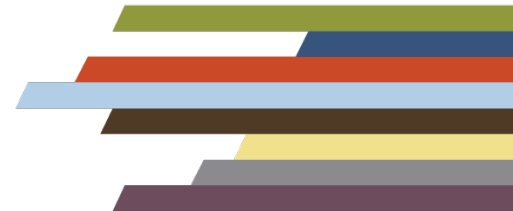
- Don't assume, ask... ¿what is your name? ¿how do you prefer that I call you?
- If in doubt, use neutral pronouns (you, they, person)
- Surgery questions are intimate questions. Ask if absolutely necessary.
- People have the right and the option to present themselves to the world as they desire.



Transaffirming your office



- Give sensibility trainings to staff
- Gender neutral bathrooms
- Affirming EHRs
- Protocols and HR Policies
- Equality or Trans symbols
- Get to know community resources
- Advocate for their health
(healthplans)
- Educate yourself on trauma
informed work

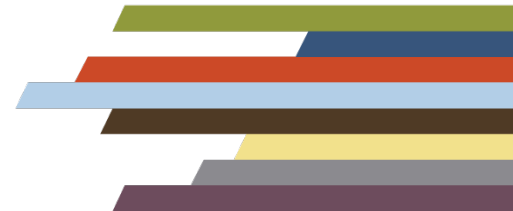


Avoid...

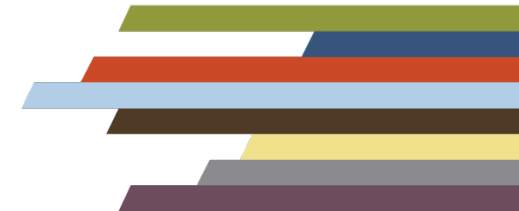
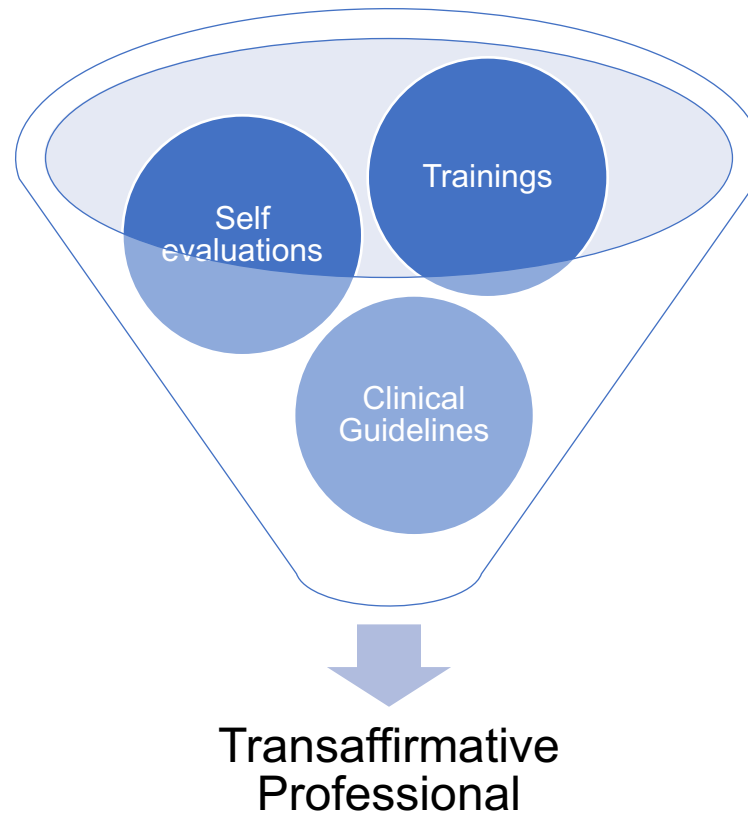


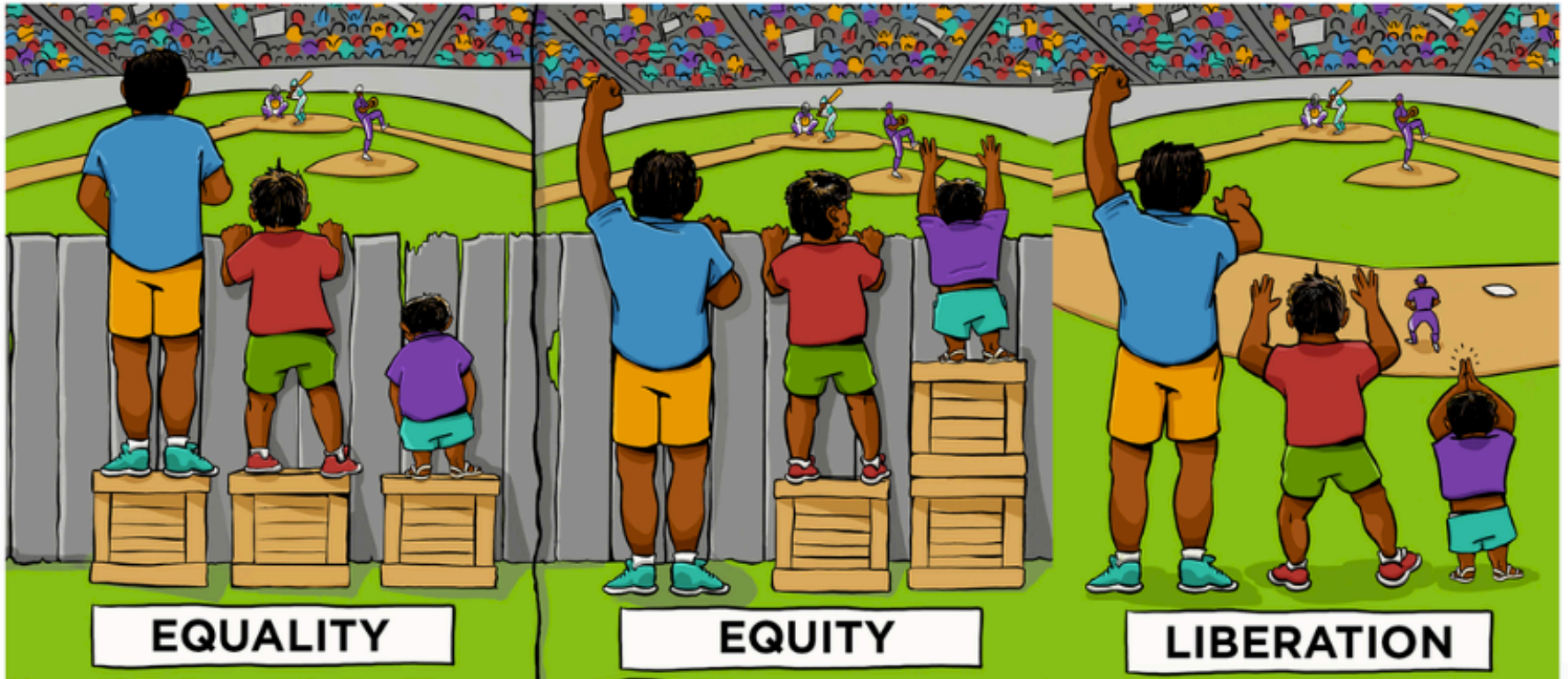
- Refraining self disclosures about gender identity or sexual orientation
- Denying cissexism consequences
- Outdated or imposing terminology
- Affirming childhood identities
- Having a neutral stance

(Kort, 2008)

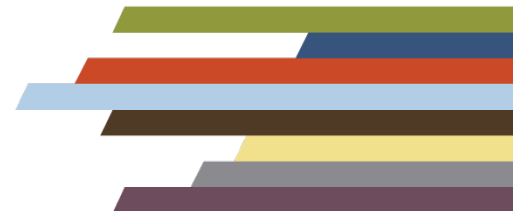


Professional Growth





The Problem with that equity vs. equality graphic you're using (2016).

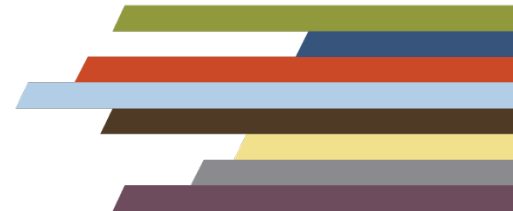


Cultural Sensibility versus Cultural Humility



“Being professionally humble, means that you are willing to learn”

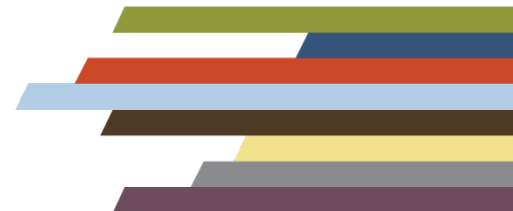
(Tervalon & Murray-Garcia, 1998)





- **“It is much more difficult to judge oneself than to judge others. If you succeed in judging yourself rightly, then you are indeed a man of true wisdom.”**

(Saint-Exupéry, A, and Katherine Woods, 1961)





Contacts



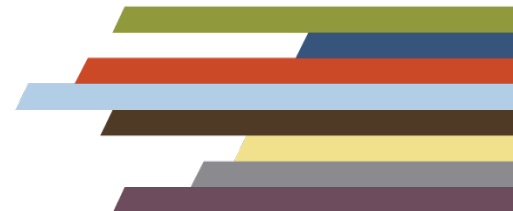
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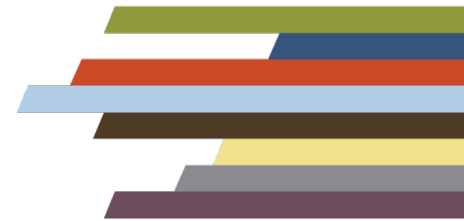


<https://www.surveymonkey.com/r/HKD7DZZ>

Website:

<http://www.mhttcnetwork.org/hispaniclatino/>

Email: hispaniclatino@mhttcnetwork.org



References

- American Psychological Association. (2006). Answers to your questions about individuals with intersex conditions. Washington, DC: Autor. Recuperado de <http://www.apa.org/topics/lgbt/intersex.aspx>
- American Psychological Association. (2008). Answers to your questions for a better understanding of sexual orientation & homosexuality. Washington, DC: Autor. Recuperado de <http://apa.org/topics/sexuality/orientation.pdf>
- American Psychological Association. (2011a). Answers to your questions about transgender people, gender identity and gender expression. Washington, DC: Autor. Recuperado de <http://www.apa.org/topics/lgbt/transgender.aspx>
- American Psychological Association. (2011b). Guidelines for psychological practice with Lesbian, Gay, and Bisexual clients. Washington, DC: Autor. Recuperado de <http://apa.org/pi/lgbt/resources/guidelines.aspx>
- APA (1980). *Diagnostic and statistical manual of mental disorders (3rd Edition) (DSM-III)*. American Psychiatric Association, Washington DC.
- APA (2000). *Diagnostic and statistical manual of mental disorders (4th edition) (DSM-IV TR)*. American Psychiatric Association, Washington DC.
- APA (2013). *Diagnostic and statistical manual of mental disorders (5th Edition) (DSM 5)*. American Psychiatric Association, Washington DC.
- Bockling, W.O., Mliner, M.H., Swimburne Romine, R.E., Hamilton, A. & Coleman, E. (2013). Stigma, mental health, and resilience in an online sample of the Us transgender population. *American Journal of Public Health, 103*(5), 943-951.
- Brooks, V.R. (1981). *Minority stress and lesbian women*. Lexington Books.
- Ehrensaft, D. (2016). *The gender creative child: Pathways for nurturing and supporting children who live outside gender boxes*. New York, NY: The Experiment.
- Gay and Lesbian Medical Association (2010). *Healthy people 2010 companion document for lesbian, gay, bisexual, and transgender (LGBT) health*. San Francisco, CA.
- Giga, N. M., Danischewski, L., Greytak, E. A., Kosciw, J. G., & Ocasio-Dominguez, S. (2017). *The Puerto Rico school climate survey: The experiences of lesbian, gay, bisexual, transgender, and queer youth in Puerto Rico's schools. (Encuesta sobre el ambiente escolar de Puerto Rico: Las experiencias de jóvenes lesbianas, gays, bisexuales, transgéneros y queers en las escuelas de Puerto Rico)*. Nueva York: GLSEN.
- Grov, C, Bimbi, DS, Nanin, JE, & Parsons, JT. (2006). Race, ethnicity, gender, and generational factors associated with the coming-out process among lesbian, and bisexual individuals. *J Sex Res.* 43(2):115-121. doi:10.1080/00224490609552306
- Human Rights Watch (2019). New Health Guidelines Propel Transgender Rights: World Health Organization Removes "Gender Identity Disorder" Diagnosis. Recuperado de: <https://www.hrw.org/news/2019/05/27/new-health-guidelines-propel-transgender-rights>
- Institute of Medicine of the National Academies (IOM) (2011). *The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding*. Recuperado de: <https://www.nap.edu/resource/13128/LGBT-Health-2011-Report-Brief.pdf>
- Keo-Meier, C.L., Herman, L.I., Reisner, S.L., Pardo, S.T., Sharp, C. & Babcock, J.C. (2015). Testosterone treatment and MMPI-2 improvement in transgender men: A prospective controlled study. *Journal of Consulting and Clinical Psychology, 83*(1), 143-156.
- Keuroghlian, A. & Grasso C. (2017). Collecting Sexual Orientation and Gender Identity (SO/GI) Data in Electronic Health Records. National LGBT Health Education Center: A Program of the Fenway Institute Recuperado de: <https://www.lgbthealtheducation.org/wp-content/uploads/2017/05/SOGI-Office-Hours-Update-Final.pdf>
- Kort, J. (2008) *Gay affirmative therapy for the straight clinician: The essential guide*. New York, London: W.W. Norton & Company, Inc.
- Lev, A.I. (2004). *Transgender Emergence: Therapeutic Guidelines for Working with Gender-Variant People and Their Families*. New York, NY: Routledge.
- Martinez, D.G. & Sullivan, S.C. (1998). African-American gay men and lesbians: Examining the complexity of gas identity development. *Journal of Human Behavior in the Social Environment, 1*(2/3), 243-264.
- Meyer, I.H. (2003). Prejudice, social stress, and mental health in Lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin, 129*, 674-697.
- Murchison, G. (2016). *Supporting & Caring for Transgender Children*. Washington, D.C.
- National Center for Transgender Equality. (2014). *Transgender Terminology*. Washington, DC: Autor. Recuperado de http://transequality.org/Resources/TransTerminology_20 Pdf
- Roberts, A., Rosario, M., Corliss, H. Koenen, K. & Bryn Austin, S. (2012a). Childhood gender nonconformity: A risk indicator for childhood abuse and posttraumatic stress in youth. *Pediatrics, 410-417*.
- Roberts, A., Rosario, M., Corliss, H. Koenen, K. & Bryn Austin, S. (2012b). Pervasive trauma exposure among US sexual orientation minority adults and risk of posttraumatic stress disorder. *American Journal of Public Health, 100*(12), 2433-2441.
- Rodríguez-Madera, S. L. (2012). TRANS-acciones de la carne: Criminalización de mujeres trans que ejercen el trabajo sexual. En S. Serrano (Ed.), *Registros criminológicos contemporáneos* (pags. 107-150). San Juan, PR: Situm
- Rosario, M., Schrimshaw, E.W. & Hunter, J., (2011). Different patterns of sexual identity development over time: Implications for the psychological adjustment of lesbian, gay, and bisexual youths. *Journal of Sex Research, 48*(1), 3-15.
- Saint-Exupéry, Antoine de, and Katherine Woods. (1961). *The Little Prince*. New York: Harcourt Brace Jovanovich. Print.
- San Francisco Human Rights Commission. (2011). Bisexual invisibility: Impacts and recommendations. San Francisco, CA: Autor. Recuperado de http://sf-hrc.org/sites/sf-hrc.org/files/migrated/FileCenter/Documents/HRC_Publications/Articles/Bisexual_Invisibility_Impacts_and_Recommendations_March_2011.pdf
- Sanchez, N.F., Sanchez, J.P., & Danoff, A. (2009). Health care utilization, barriers to care, and hormone usage among male-to-female transgender persons in New York City. *American Journal of Public Health, 99*(4), 713-719.
- Savin-Williams, R.C. (1997). *And then I became gay: Young Men's Stories*. New York, NY: Routledge.
- Tervalon M, Murray-Garcia J. Cultural humility versus cultural competence: a critical distinction in defining physician training outcomes in multicultural education. *J Health Care Poor Underserved.* 1998;9(2):117-125. doi:10.1353/hpu.2010.0233
- The Problem with that equity vs. equality graphic you're using (2016). Recuperado de: <https://culturalorganizing.org/the-problem-with-that-equity-vs-equality-graphic/>
- Trans Student Educational Resources (2020). The Gender Unicorn. Recuperado de: <http://transstudent.org/what-we-do/graphics/gender-unicorn/>
- Transgender Umbrella (2020). Recuperado de: <https://queer-pack.com/2017/03/31/transgender-gay-visibility-celebrating-diversity-trans-identities-umbrella/>
- Yadegarfar, M., Meinhold-Bergmann, M.E. & Ho, R. (2014). Family rejection, social isolation, and loneliness as predictors of negative health outcomes (depression, suicidal ideation, and sexual risk behavior) among Thai male-to-female transgender adolescents. *Journal of LGBT Youth, 11*, 347-363.