

**7. Keep in mind that the presence of a transgender person in your treatment room is not always a “training opportunity” for other health care providers.**

Many transgender people have had providers call in others to observe their bodies and the interactions between a patient and health care provider, often out of an impulse to train residents or interns. However, like in other situations where a patient has a rare or unusual finding, asking a patient’s permission is a necessary first step before inviting in a colleague or trainee. For transgender patients, in particular, it is often important to maintain control over who sees you unclothed. Therefore, when patients are observed without first asking their permission, it can quickly feel like an invasion of privacy and creates a barrier to respectful, competent health care.

**8. It is inappropriate to ask transgender patients about their genital status if it is unrelated to their care.**

A person’s genital status—whether one has had surgery or not—does not determine that person’s gender for the purposes of social behavior, service provision, or legal status.

**9. Never disclose a person’s transgender status to anyone who does not explicitly need the information for care.**

Just as you would not needlessly disclose a person’s HIV status, a person’s gender identity is not an item for gossip. Having it known that one is transgender can result in ridicule and possible violence towards that individual. If disclosure is relevant to care, use discretion and inform the patient whenever possible.

**10. Become knowledgeable about transgender health care issues.**

Get training, stay up to date on transgender issues, and know where to access resources. For medical and mental health protocols, you can learn about the Harry Benjamin International Gender Dysphoria Association’s Standards of Care for the treatment of gender identity disorders by visiting [www.hbgda.org](http://www.hbgda.org). These internationally recognized protocols are intended as flexible guidelines. Clinical departures may be warranted based on patient characteristics, the provider’s evolving sensibilities, or research protocol.

**Resources**

You can view the Tom Waddell treatment protocols at [www.dph.sf.ca.us/chn/HlthCtrs/transgender.htm](http://www.dph.sf.ca.us/chn/HlthCtrs/transgender.htm). These comprehensive guidelines reflect the expertise of this San Francisco community clinic, which has been providing transition-related hormone therapy and primary care for low-income transgender individuals since 1993.

With attention to these guidelines, you can provide a vital service to a medically underserved population. By enhancing your knowledge and skills and demonstrating culturally competent behavior with transgender people, you will be on your way to building trust with individuals in the community by providing the respectful care that they need and deserve.

Thank you for doing your part to ensure health care access for all!

This pamphlet was produced by TLC’s Health Care Access Project (HCAP), a joint effort of TLC and the California Endowment. If you have questions about HCAP or would like to book a free training on transgender cultural competency, medical, or health law issues, contact Willy Wilkinson at [Willy@transgenderlawcenter.org](mailto:Willy@transgenderlawcenter.org) or **(510) 531-5710**.

# 10 Tips for Working with Transgender Individuals

An information and resource publication for health care providers



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## A guide for health care providers

As a health care provider, you likely encounter and serve a population that is diverse with regards to race, nationality, immigration status, socioeconomic status, sexual orientation, gender identity, HIV status, medical condition, and disability, among other issues. At the Transgender Law Center, we recognize that many health care providers are eager to provide a safe, welcoming treatment environment for members of the transgender community, yet may not have had the opportunity to access information about the needs and experiences of this marginalized population. With this barrier in mind, we have created this pamphlet so that we may work in partnership with providers to improve quality of care and provider-patient outcomes.

### Introduction to the Transgender Community

Gender identity, a characteristic that we all possess, is our internal understanding of our own gender. The term “transgender” is used to describe people whose gender identity does not correspond to their birth-assigned sex and/or the stereotypes associated with that sex. A male-to-female transgender individual is a transgender woman and a female-to-male transgender individual is a transgender man. There are also gender non-conforming people who do not identify as transgender and some individuals in the transgender community who do not identify as male or female.

For many transgender individuals, the lack of congruity between their gender identity and their birth sex creates stress and anxiety that can lead to severe depression, suicidal tendencies, anti-social behavior, and/or increased risk for alcohol and drug dependency. Transitioning, the process that many transgender people undergo to bring their outward gender expression into alignment with their gender identity, is a medically necessary treatment strategy that effectively relieves this stress and anxiety.

Transgender people are medically underserved. Access to affordable and appropriate health care is central to avoiding negative health consequences, yet most insurance companies exclude gender identity-

related care and services, including mental health therapy, hormonal therapy, and surgeries. In addition, many transgender people have had multiple negative experiences in health care settings in the care of providers and office staff who have lacked the information necessary to provide sensitive services. Discrimination in the provision of services causes transgender people to delay or avoid necessary health care services, including health care that is not transition-related, often to the point of putting their overall health at severe risk.

### The following are ten suggestions for improving services for transgender people:

#### 1. Welcome transgender people by getting the word out about your services and displaying transgender-positive cues in your office.

You can utilize LGBT community centers, services, newspapers, and Internet resources to advertise your services. Posters, buttons, stickers, and literature about transgender people can demonstrate that you are transgender-friendly. You can rewrite your intake form to include “chosen name” in addition to “legal name,” as well as a third, blank option for “sex/gender” where someone can more accurately describe their gender. And single-use restrooms are a welcome addition for many, including transgender people.

#### 2. Treat transgender individuals as you would want to be treated.

You can show respect by being relaxed and courteous, avoiding negative facial reactions, and by speaking to transgender clients as you would any other patient or client.

#### 3. Remember to always refer to transgender persons by the name and pronoun that corresponds with their gender identity.

Use “she” for transgender women and “he” for transgender men, even if you are not in the patient’s presence.

#### 4. If you are unsure about a person’s gender identity, or how they wish to be addressed, ask politely for clarification.

It can be uncomfortable to be confused about someone’s gender. It can also feel awkward to ask someone what their gender is. However, if you let the person know that you are only trying to be respectful; your question will usually be appreciated. For instance, you can ask, “How would you like to be addressed?” “What name would you like to be called?” “Which pronoun is appropriate?” In order to facilitate a good provider-patient relationship, it is important not to make assumptions about the identity, beliefs, concerns, or sexual orientation of transgender and gender non-conforming patients.

#### 5. Establish an effective policy for addressing discriminatory comments and behavior in your office or organization.

Ensure that all staff in your office or organization receives transgender cultural competency training and that there is a system for addressing inappropriate conduct.

#### 6. Remember to keep the focus on care rather than indulging in questions out of curiosity.

In some health care situations, information about biological sex and/or hormone levels is important for assessing risk and/or drug interactions. But in many health care situations, gender identity is irrelevant. Asking questions about one’s transgender status, if the motivation for the question is only your own curiosity and is unrelated to care, is inappropriate and can quickly create a discriminatory environment.