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# THE STATE OF TRANS HEALTH

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TRANS LATIN@S AND  
THEIR HEALTHCARE NEEDS





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# ABOUT THE TRANSLATIN@ COALITION

## THE VOICE OF TRANSLATIN@S IN THE USA



### MISSION

The mission of TransLatin@ Coalition is to advocate for the specific needs of the Trans Latin@ community that resides in the U.S.A. and to plan strategies that improve our quality of life.

### VALUES

- Altruism, respect, and dignity for everyone
- Transparency, integrity, and honesty
- Pluralism and diversity
- Collaboration, inclusivity, and social justice
- Good resource administration

### VISION

The vision of TransLatin@ Coalition is to amplify education and resources to promote the empowerment of Trans leaders.



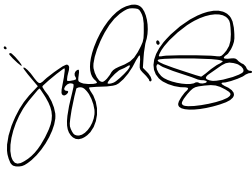
*In this study, Trans Latin@ refers to: a person over the age of 18 who was assigned male or female at birth and does not identify with that assigned sex and gender, and uses the term(s) Transgender, Trans, Transwoman, Transman, Transmasculine, or Transfeminine, and who reside in the southern part of the state of California, and identifies as Latin@.*

## FOREWORD

California leads the country in anti-discrimination laws in employment, housing, and public accommodations; which include medical and health care. While anti-discrimination laws have been in place for over a decade in California, Trans individuals in the state continue to face high levels of unemployment, and discrimination in housing, and receiving health related care due to their gender identity and expression<sup>1</sup>. For Trans Latin@s who face transphobia and racism, marginalization is often exacerbated. In order to understand the needs of Trans Latin@s, TransLatin@ Coalition conducted the first ever study to shed light on the needs of Trans Latin@s in Southern California IN 2016.

It is important to survey the Trans community in order to understand the components of their lives that allow them to be physically, socioeconomically, and emotionally healthy individuals. Understanding these components and where they are lacking will allow service providers to help fill in the gaps that are inhibiting the health and well-being of this vulnerable community.

The TransLatin@ Coalition has begun to fill these needs through the creation of the Center for Violence and Transgender Wellness. The TransLatin@ Coalition seeks to improve the health outcomes of Trans people in California. This report will provide evidence of the specific healthcare needs of Trans Latin@s and what makes Trans Latin@s healthy individuals in the southern part of the golden state. California is recognized across the nation as a model state that provides the most comprehensive legislation and protections towards Trans people. However, there is still a lot of work that needs to be done to address the basic social supportive needs of Trans Latin@ people. We hope that this report provides a road map to assess what is it that supports trans Latin@s to fully realize their humanity, health, and happiness here in California.



**JACQUELINE CARAVES, M.A.**

Co-Principal Investigator  
Ph.D. Candidate  
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<sup>1</sup> Hartzell, E., Frazer, M. S., Wertz, K. and Davis, M. (2009). The State of Transgender California: Results from the 2008 California Transgender Economic Health Survey. Transgender Law Center

# ACKNOWLEDGMENTS

## A THANK YOU TO THOSE WHO HAVE HELPED US



**This report became a reality thanks to the support from The California Endowment and the hard work and dedication of the members of the TransLatin@ Coalition.**

Because of the members of TransLatin@ Coalition, we gathered 129 surveys with Trans Latin@ individuals in six different critical points in Southern California. We would like to give a special acknowledgment to those individuals and groups who were crucial to the success of this data collection and who organized people to participate in completing the surveys: Erika De La Cruz, Johanna Wallace and Maria Roman from TransLatin@ Coalition in Los Angeles; Madeline Ambrosini and Somos Familia Valle in the San Fernando Valley; Grupo Transgenero 2000 in San Diego, Alexa Castañon from TransLatin@ Coalition in Long Beach, Pastor Carol Jackson from Spiritual Truth Church in Long Beach, The Long Beach LGBT Center, Zulma Velasquez

and Sasha Navarro TransLatin@ Coalition in El Monte, Adriel Rodríguez and Trans Union de OC in Orange County, Paolo Jara-Riveros (videographer), Steve Landaverde (graphic design – cucupan.com), Leisy Abrego, Feliz Quiñones, and Anisha Gandhi.

In addition, the research team would like to thank the anonymous respondents who shared their valuable time with us. Often reliving negative experiences to give voice to the continuous discrimination and marginalization they resist on daily basis in an effort to become healthy individuals. Through the sharing of the intimate details of their everyday lives and their experiences in relation to their mental, physical, and emotional health and well-being as Trans individuals living in Southern California we have been able to put together this very important and timely report. The results of this survey are dedicated to all of you and to the younger generations of Trans Latin@s in Southern California as well as those across the state and the nation.

# EXECUTIVE SUMMARY

## THROUGHOUT THE COUNTRY, TRANS AND GENDER NON-CONFORMING INDIVIDUALS FACE DISCRIMINATION IN EVERY REALM OF THEIR LIVES.

Transgender and gender non-conforming individuals experience marginalization in employment, housing, health care, and education based on their gender identity and /or gender expression<sup>2</sup>. Transgender people of color in the U.S. experience racism and therefore experience heightened vulnerabilities in comparison to their white counterparts. For example, according to the National Center for Trans Equality, “Latino/a Trans people often live in extreme poverty with 28% reporting a household income of less than \$10,000/year. This is nearly double the rate for Trans people of all races (15%), over five times the general Latino/a community rate (5%), and seven times the general U.S. community rate (4%). The rate for Latino/non-citizen respondents was 43%.<sup>3</sup>”

Given the urgent nature of these statistics, the TransLatin@ Coalition joined with researcher Jacqueline Caraves to conduct a more in-depth study focusing on the lives of Trans Latin@s who reside in Southern California and the social factors that support their health. Considering the vulnerabilities that Trans Latin@s experience, we identified the key areas that impact one’s overall health, and asked questions related to their access and needs concerning gaps in those areas.

Those areas include: housing, employment, health care, sexual health, mental health, and spiritual services.

The findings presented in this study were compiled from the surveys that were gathered from 129 Trans Latin@s living in different parts of southern California with greater concentration in Los Angeles, Orange County and San Diego Counties. While the survey was open to all Trans Latin@s, 91% of participants were assigned male at birth (transwomen) while 9% of participants were assigned female at birth (transmen). The surveys were anonymous. The surveys were composed of various forms of questions. There were dichotomous questions, Likert scale questions, as well as open-ended questions. This report shares the participants’ views as to how these issues affect their lives as Trans Latin@s in Southern California. We hope that this report will serve as a tool to advance the rights of Trans Latin@s in the United States and informs policies that will improve the health and wellness needs of Trans Latin@s in the nation. We offer this report to the Trans community, the Latin@ community, and social service organizations as well as policy makers, service providers and scholars working toward social justice.

<sup>2</sup> Hartzell, E., Frazer, M. S., Wertz, K. and Davis, M. (2009). The State of Transgender California: Results from the 2008 California Transgender Economic Health Survey. Transgender Law Center.

<sup>3</sup> Harrison-Quintana, J., Perez, D., Grant, J. (2011). Injustice at every turn: A look at Latina/o respondents in the National Transgender Discrimination Survey. National Center for Transgender Equality.

# RESEARCH TEAM

## **JACQUELINE “JACKIE” CARAVES, CO-PRINCIPAL INVESTIGATOR**

Jackie is a gender non-conforming queer Latina and a Ph.D. Candidate in the César E. Chávez Department of Chicana and Chicano Studies at the University of California, Los Angeles (UCLA) where she also received her Master of Arts degree in Chicana/o Studies and is in the process of completing her graduate certificate in Gender Studies. Jacqueline holds a Bachelor of Arts degree in Latin American & Latino Studies and Politics from the University of California, Santa Cruz (UCSC). Jackie's dissertation work centers the experiences of Trans and gender non-conforming Latin@s and the role of family and spirituality in serving as spaces of empowerment and resistance. Jackie hopes to lend visibility to the Trans and gender non-conforming community and to show how this community survives and thrives in the most beautiful ways.



## **BAMBY SALCEDO, CO-PRINCIPAL INVESTIGATOR**

Bamby is an internationally recognized leader and educator. Bamby is a proud Trans Latina woman whose commitment to the multiple communities that her life intersects has been the driving force of her success. Bamby is pursuing a master's degree in Latino/a Studies. Bamby is the President and CEO of the TransLatin@ Coalition, a national organization that focuses on addressing the issues of Trans Latin@s in the US. Bamby is currently developing the Center for Violence Prevention & Transgender Wellness, a multipurpose, multi-service space for Trans people in Los Angeles. Her powerful, sobering and inspiring speeches and her warm, down-to-earth presence have provided emotional grounding and perspective for diverse gatherings. She speaks from the heart, as one who has been able to transcend many of her own issues, to truly drop ways of being and coping that no longer served her, issues that have derailed and paralyzed countless lives. Her words and experience evoke both tears and laughter, sobriety and inspiration through the documentary made about her life called TransVisible: Bamby Salcedo's Story. Bamby has been featured in multiple media outlets such as People en Español, Latina Magazine, Cosmopolitan, the Los Angeles Times, Los Angeles Magazine and 2015 OUT 100 and featured in the 2016 Trans List with HBO among many other. Bamby has also been recognized for her outstanding work by multiple national and local organizations.



## HOUSING

**18.8 %**

18.8% of participants are either **homeless or living in temporary housing** and 13.4% of participants rely on someone else to pay for their housing (i.e. spouse or partner, etc).



## EMPLOYMENT

**20 %**

Only 20% of participants have **full-time employment**, while 80% of participants include participants who are self-employed (%), unemployed (26%), on disability (%), or other.

# KEY FINDINGS



## SPIRITUALITY

54.2% of participants report that having **access to regular spiritual services** is extremely important.

76.3% of participants believe that spirituality is important to their overall health.

# HEALTH STATS



## MEDICAL HEALTH

**49.5 %**

49.5% of participants are **covered under Medicare/Medicaid/Medi-Cal**.

While 28.1% of participants have no health insurance coverage.

31.2% of participants go to the Emergency Room when in need of health care.

36% of participants strongly agree that it is because of a lack of personal resources that their medical needs are not being met, while 35% of participants agree that it is because of a lack of Trans sensitive health care providers that their medical needs are not being met.



## MENTAL HEALTH

**50.5 %**

50.5% of participants **currently experience anxiety**, while 26.4% of participants report that they are currently experiencing depression.

46.7% of participants strongly agree that their mental health needs are not being met because of a lack of personal resources while 43.7% of participants strongly agree that their mental health needs are not being met because of a lack of support groups.



## SEXUAL HEALTH

**90 %**

90% of participants report that they **practice safe sex**.

32.2% of participants reported being HIV positive and 97.4% of HIV positive participants are receiving treatment.

# METHODS

**THIS REPORT IS ORGANIZED  
AROUND SIX CATEGORIES:**

- 1** Access to Housing
- 2** Access to Employment
- 3** Access to Medical Care
- 4** Access to Sexual Health Care
- 5** Access to Mental Health Care
- 6** Access to Spiritual Services

## THE RESEARCH METHOD THAT WAS USED TO CONDUCT THIS RESEARCH PROJECT WAS COMMUNITY-BASED PARTICIPATORY RESEARCH<sup>4</sup>.

After consulting with members of the TransLatin@ Coalition (TLC), the members prioritized assessing the health care needs of Trans Latin@s was paramount. With this concept in mind, Bamby Salcedo approached Jackie Caraves to seek interest in partnering with the TLC to evaluate the needs of the Trans Latin@ community. After several conversations, Jackie agreed and understood the importance of having a community-engaged partnership. Jackie and Bamby formulated the type of questions that were relevant to collect, reviewed survey tools, and conducted pilot interviews with members of the target community.

After receiving feedback from community members about the survey instrument, the research team made modifications. The research team received Internal Review Board

(IRB) approval from the University of California, Los Angeles, (Study #: 15-001883) went on to collect surveys between January 2016 and August 2016. The survey specifically targeted Trans Latin@s over the age of 18, who identify both as Trans and/or Transgender and Latin@. The survey was administered in cities and surrounding communities in El Monte, Long Beach, Los Angeles, San Diego, San Fernando Valley, and Santa Ana. These cities were chosen because of the established presence of Trans support groups that are linked and/or associated to TransLatin@ Coalition. The research team drew upon these six areas of concern to prepare the 70-question survey guiding this study.

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**8 MONTHS OF RESEARCH**

**70 SURVEY QUESTIONS**

<sup>4</sup> Community based participatory research is a research approach that involves community members, organizational representatives in all aspects of the research process. All partners contribute their knowledge and expertise in the decision making process, in Wallerstein, N., & Duran, B. (2010). Community-based participatory research contributions to intervention research: the intersection of science and practice to improve health equity. American journal of public health, 100(S1), S40-S46.

# SOCAL

## DEMOGRAPHIC CHARACTERISTICS

**THIS SECTION PROVIDES A DESCRIPTION OF THE DEMOGRAPHICS OF INDIVIDUALS WHO PARTICIPATED IN THIS NEEDS ASSESSMENT.**

### RECRUITMENT

Recruitment took place by members of the Trans Latin@ community throughout Southern California, with a specific focus in the areas where Trans Latin@ individuals thrive and are growing. The research team administered the surveys at each of these locations. The survey was available in both English and Spanish, and ninety-five participants answered the survey in Spanish. Participants took anywhere from half an hour to an hour to complete the survey. This report draws on the responses on 129 of survey participants who met the qualifications of being Trans, Latina@ and over the age of 18. Most participants were recruited during regular programming at local Trans support groups, or places where they frequently gathered. Survey participants who have no affiliation or connection to TransLatin@ Coalition were also recruited. The survey served an additional function as it connected these unaffiliated participants with Trans support groups. The surveys were distributed in private group settings on specific dates and times in each targeted city.

### DATA ANALYSIS

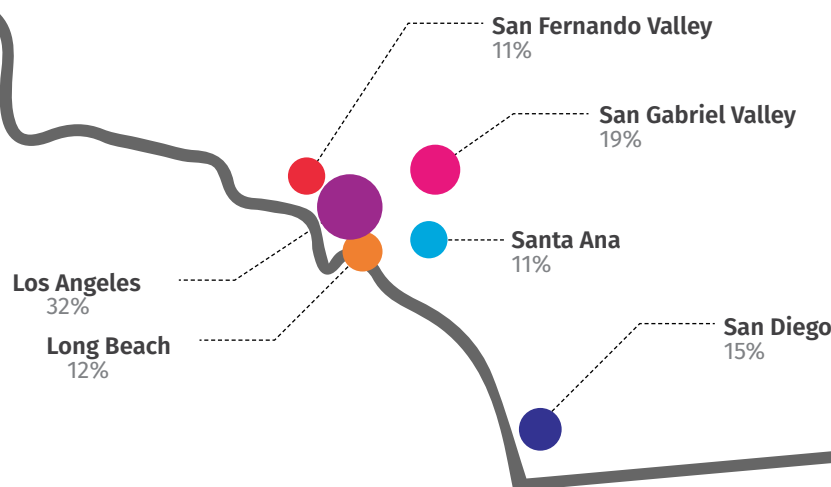
Upon gathering all surveys, the research team used Statistical Software (SPSS) to analyze the data, and worked collaboratively to draft charts/graphs, write, and design this report. This report benefits from the input, revisions, and approval of the TransLatin@ Coalition.

### LIMITATIONS

The TransLatin@ Coalition is made of up members that identify as Transwomen, Transfeminine, and Woman. The TLC research team recruited participants from all members of the Trans Latin@ community. Due to the membership base of TransLatin@ Coalition it is important to note that Transmen/Transmasculine make up 9% of the participants in this study. It is important to look at Transmen in future research.

**The 129 respondents of this study currently live in various regions throughout Southern California.**

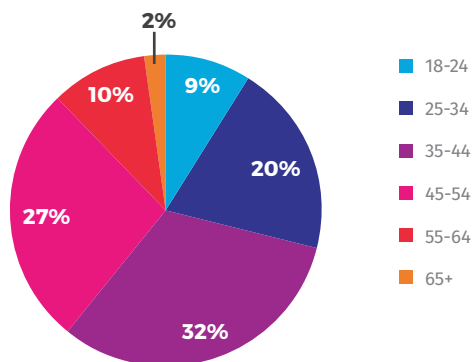
The following graph illustrates where interview participants geographic location based on the zip code or residence that they provided. As shown in the graph below, the largest percentage of Trans Latin@s in this needs assessment were from the city of Los Angeles, which accounted for 32% of the participants.



# GENERAL FACTS

## AGE

The following graph provides an overview of the age of Trans Latin@s who participated in the needs assessment.

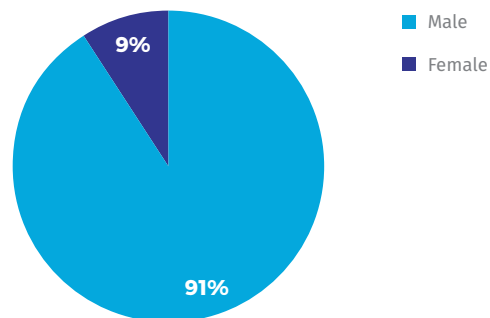


### Age Data Analysis

A majority of the participants are between the ages of 35-54.

## BIRTH SEX

The following graph provides an overview of the sex assigned at birth of Trans Latin@s who participated in this needs assessment.

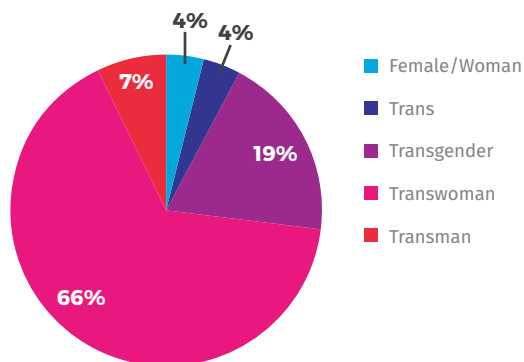




# BACKGROUND

## GENDER IDENTITY

The graph below illustrates the gender identity of Trans Latin@s who participated in this needs assessment.

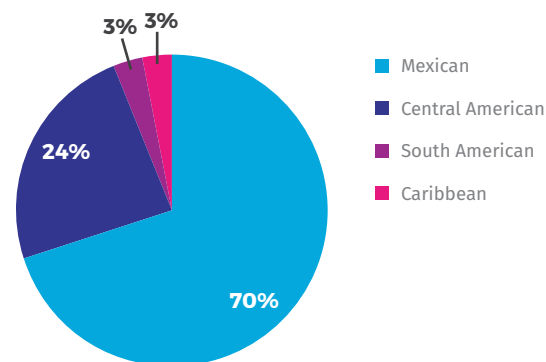


### Gender Identity Data Analysis

The largest identity category for participants is Transwoman at 66% while Transman accounted for the smallest identity category at 7%. Twenty-three percent of participants identified as Trans or Transgender.

## ETHNIC BACKGROUND

The following graph illustrates the ethnic background of Trans Latin@s who participated in this study.



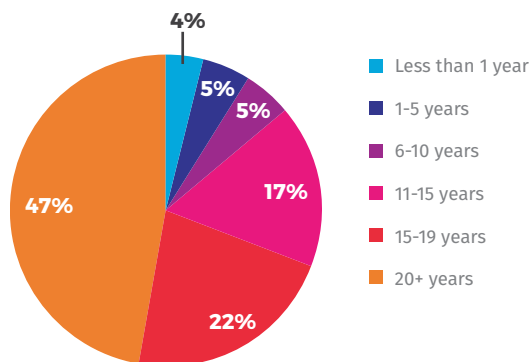
### Ethnic Background Data Analysis

While Mexicans make up the majority of participants, Central Americans from El Salvador, Guatemala, and Honduras represent the second largest group.

# IN THE USA

## YEARS IN THE UNITED STATES

The following graph outlines the length of time that Trans Latin@s have been living in the U.S.

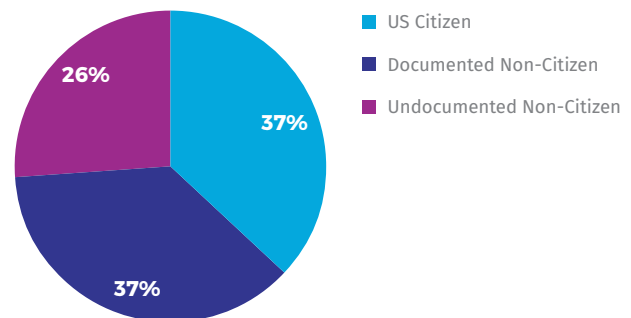


### Years in US Data Analysis

A Total of 77% of participants reported having migrated to the U.S., 47% of those migrated reported living in the U.S. for over 20 years, and 4% percent of those living in the U.S. for less than one year.

## CITIZENSHIP STATUS

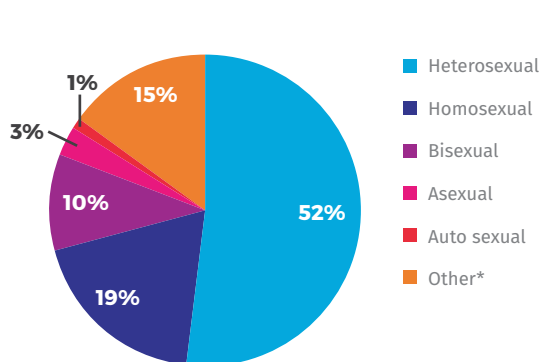
The graph below highlights the citizenship status of Trans Latin@s who participated in this needs assessment.



# SEXUALITY & RELATIONSHIPS

## SEXUAL ORIENTATION

The following graphs highlight sexual orientation and relationship status from participants.

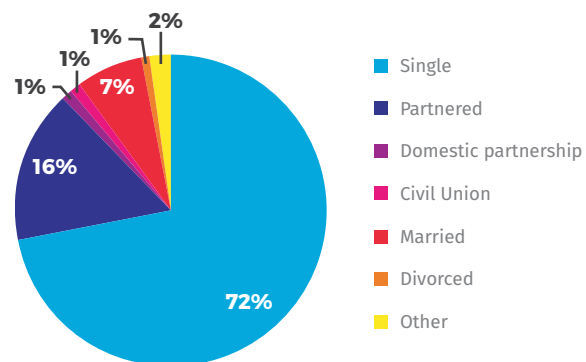


### Sexual Orientation Data Analysis

Of those who answered "Other" for their sexuality, queer, pansexual and Transgender were among the most common responses.

## RELATIONSHIP STATUS

The following graph highlights the relationship status of participants.

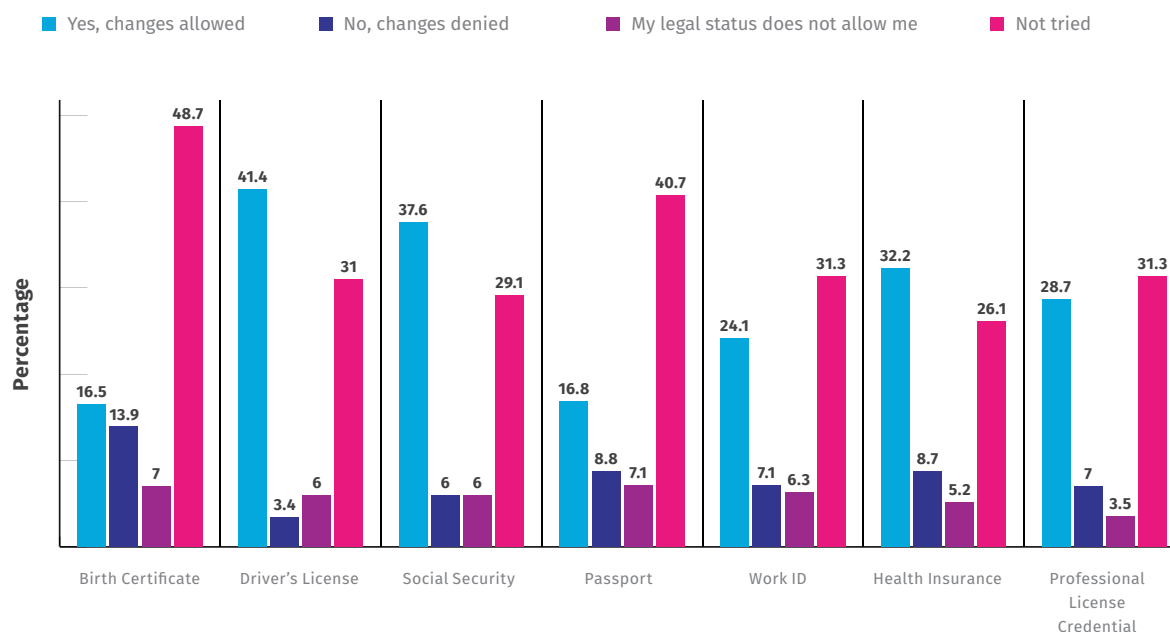


### Relationship Status Data Analysis

Data shows a majority of participants who are single (72%), while 24% are either in a domestic partnership, partnered, civil union or married.

# DOCUMENTS & RECORDS

## HAVE YOU BEEN ABLE TO CHANGE THE DOCUMENTS OR RECORDS TO REFLECT YOUR CURRENT GENDER?



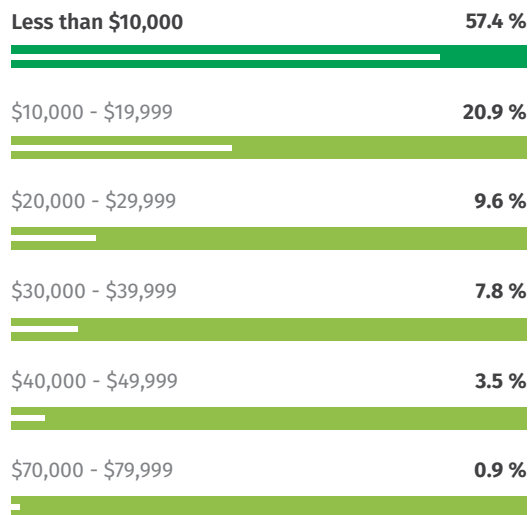
### Documents/Records Gender Change Data Analysis

While many participants have been able to change their documents to reflect the gender they identify with, a great deal of Trans Latin@s have not tried at all. This may be due to the fact that there may be a lack of information on how to access these services/needs. There may be also a lack information and/or services in Spanish. It may have to do with lacking the time to access resources in order to begin processes that are time consuming. Because there is no streamlined process to access gender and name changes on all documents at once, it takes much time and money to make those changes.

# SOCIOECONOMIC STATUS

## INCOME DISTRIBUTION

The following section paints the picture of the social economic status of Trans Latin@s in Southern California.

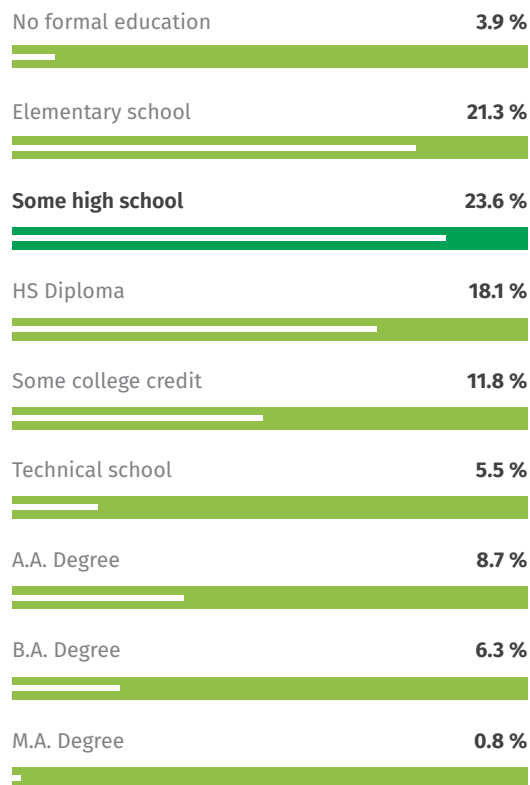


### Income Data Analysis

The **vast majority** of the people who participated in this needs assessment **live under the poverty level** making less than \$10,000.00 per year.

## EDUCATION DISTRIBUTION

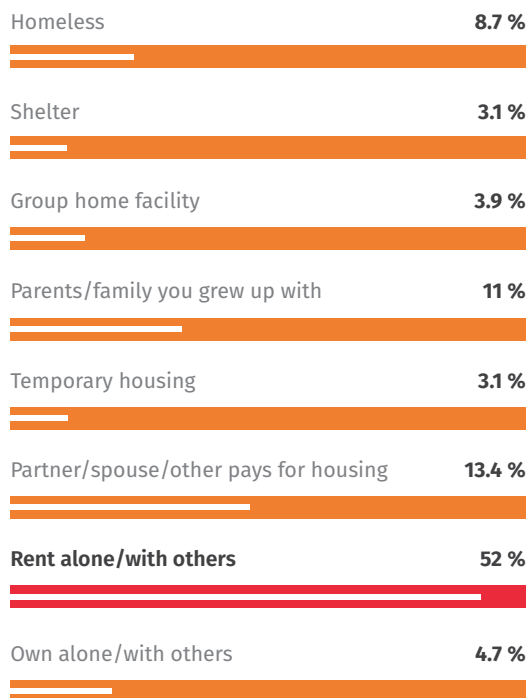
The following graph describes the educational attainment of Trans Latin@s in Southern California.



# HOUSING

## CURRENT HOUSING

The following section paints the picture of the housing situation of Trans Latin@s in Southern California.



*“Because of not having stable housing, I was prostituted, used drugs to deal with stress, and have gone through dehydration.”*

**Housing is one of the basic needs that any individual within our society must have in order to be a stable person.**

**68%**

of participants who do not have stable housing reported that they do not know of a shelter they can go to for help and feel safe as a Trans person.

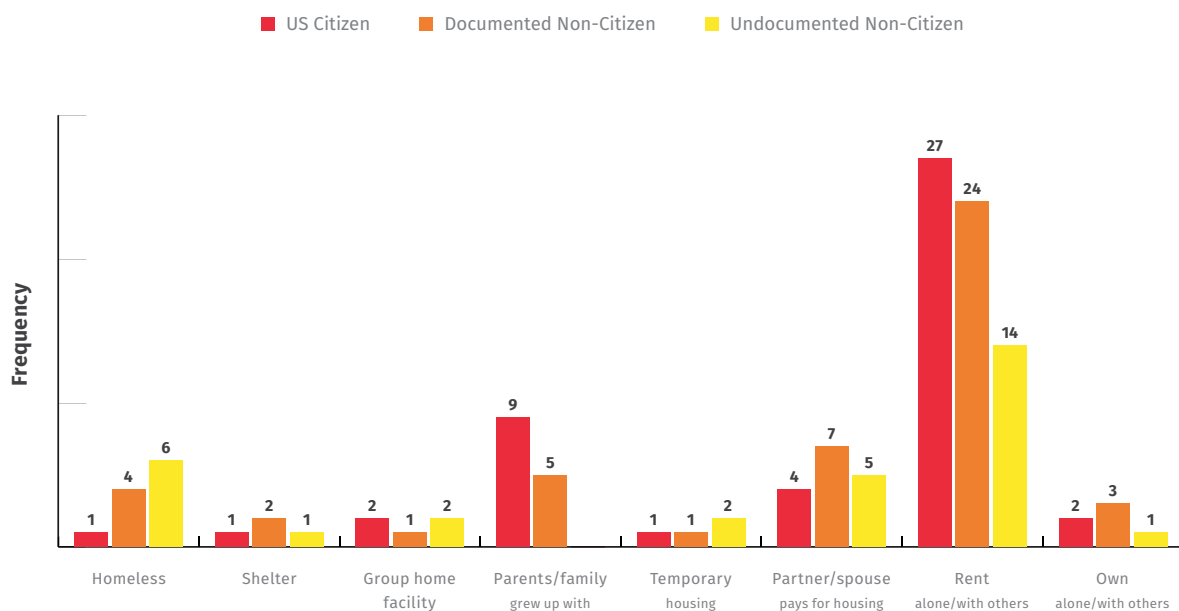
**98%**

of participants acknowledged that housing is important to their overall health and well-being. The leading cause for participants who do not currently have stable housing is because they are unable to access work because of discrimination based on gender identity and/or their citizenship status.

**“THE REASON WHY I AM HOMELESS IS BECAUSE I WAS RECENTLY RELEASED BY ICE (IMMIGRATION) AND THEY DON’T CARE IF I HAVE A PLACE TO LIVE OR FOOD TO EAT.”**

## HOUSING BY CITIZENSHIP STATUS

The graph below displays how citizenship status shapes housing outcomes for Trans Latin@s.



### Housing by Citizenship Status Data Analysis

For all statuses, renting alone or with others is most common among participants. A total of 16 participants, from all statuses, reported being dependent on their partner or spouse for housing. For participants whom are U.S. Citizens or Documented Non-Citizens living with parents or family they grew up with was prevalent. For Undocumented Non-Citizens who are vulnerable to being deported, housing especially of concern.

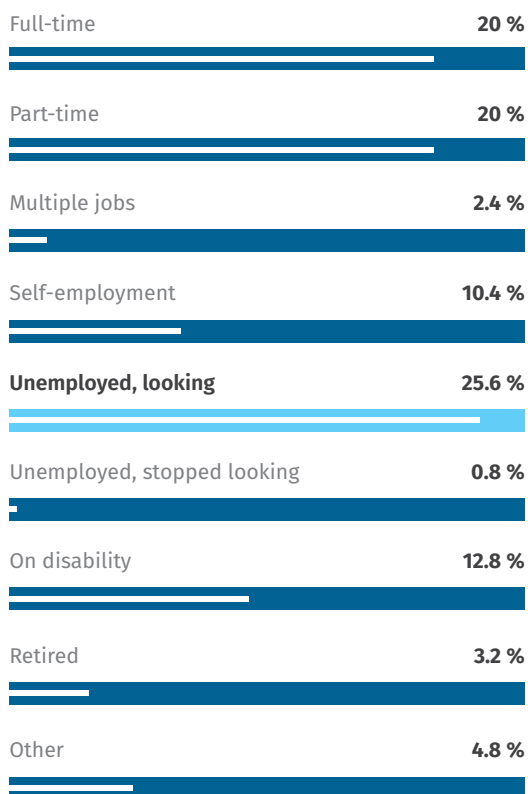
*“I have feared and stressed out about my housing in the past due to fear of being accepted for my Trans identity. Stable housing is important because I need safety and a comfort zone after being out in the world, somewhere where I can be free to be myself.”*



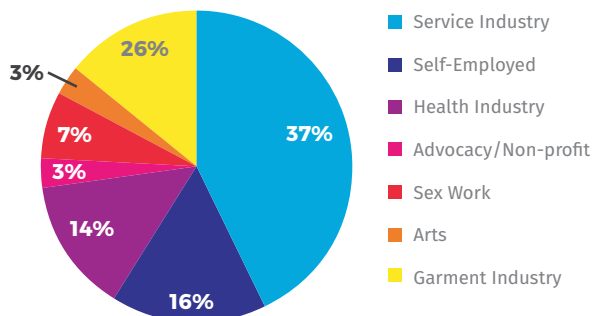
# EMPLOYMENT

## EMPLOYMENT STATUS

This section focuses on highlighting the employment needs of Trans Latin@s in Southern California.



## EMPLOYMENT BY INDUSTRY



### Employment Status Data Analysis

Only 20% of the participants reported having a full time job, and 20% have part time jobs. The largest portion of participants reported being “unemployed, but still looking for opportunities.” There is much need of employment opportunities for Trans Latin@s in Southern California who often face discrimination. Additionally, as one participant notes below, other people whether partner, family member or friend are often dependent on Trans Latin@s income. Trans participants who reported “other” are qualify for Medicaid or General Relief (government assistance) due to their low-income status.

### Employment by Industry Data Analysis

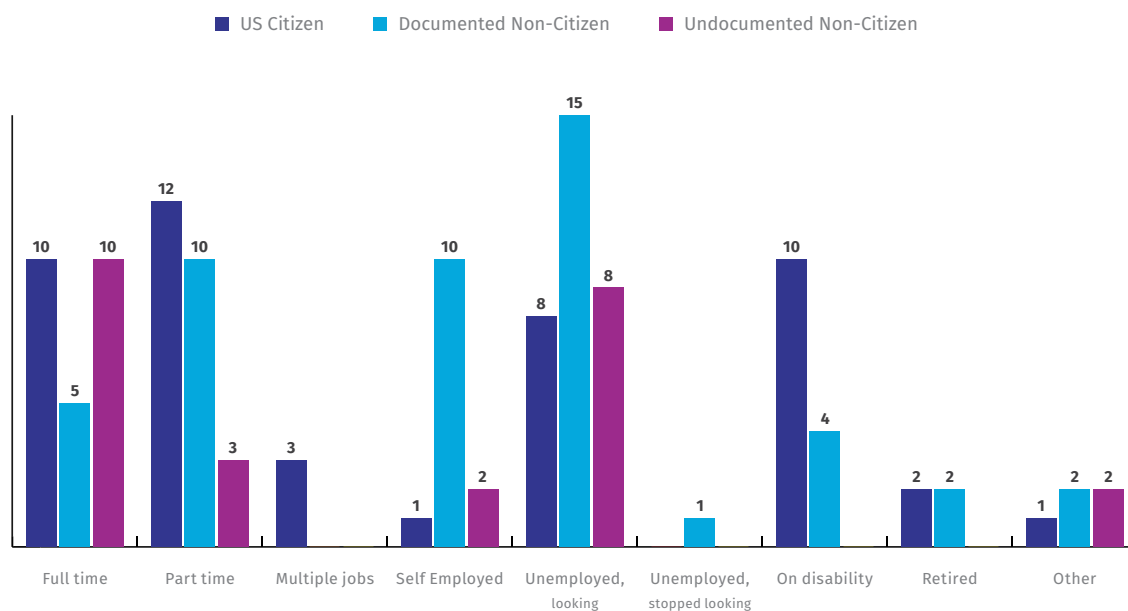
A large portion of participants mentioned working in the service industry included anything from being a stylist in a salon, to house keeping, and being cashier. For the 16% those are self-employed jobs varied from consulting to street vending.



**“EMPLOYMENT IS IMPORTANT TO MY OVERALL HEALTH BECAUSE IT WOULD HELP STABILIZE ME AND GET ME ON MY FEET [AND] AWAY FROM PROSTITUTION AND DRUGS”**

## EMPLOYMENT BY CITIZENSHIP STATUS

The following graph below shows employment based on citizenship status.



## Housing by Citizenship Status Data Analysis

For all statuses, renting alone or with others is most common among participants. A total of 16 participants, from all statuses, reported being dependent on their partner or spouse for housing. For participants whom are U.S. Citizens or Documented Non-Citizens living with parents or family they grew up was prevalent. For Undocumented Non-Citizens who are vulnerable to being deported, housing especially of concern.

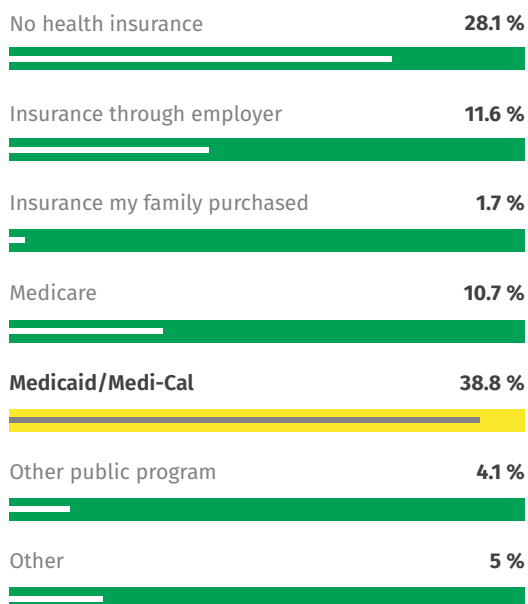
***“I support both myself and my partner financially, employment is necessary to be able to have a home, food, other necessities as well as to take care of my partner who is physically disabled and chronically ill.”***



# MEDICAL CARE

## HEALTH INSURANCE COVERAGE

The following section provides an overview of participant's status when it comes to accessing medical care.

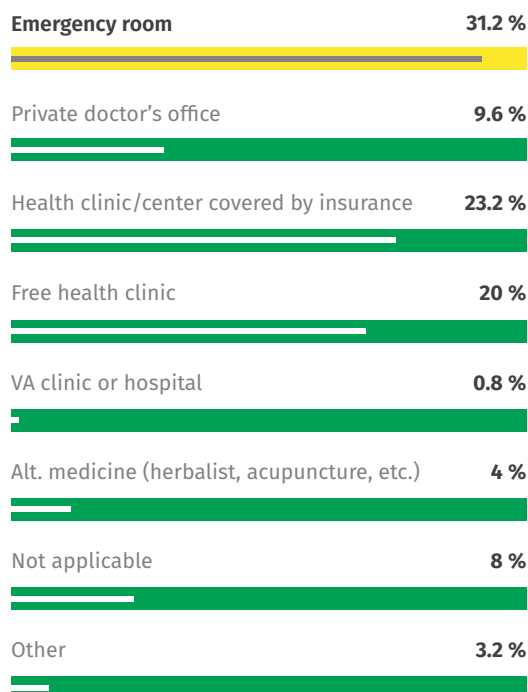


### Health Insurance Coverage Data Analysis

28.1 percent of participants have no health insurance coverage whatsoever. On the other hand, 53.6% of participants are covered by Medicare, Medicaid or other public insurance program, most commonly due to their low-income status. For some it is their low-income status along with being HIV positive that gains them access to health insurance.

## LOCATION FOR MEDICAL CARE

The largest go to place for all Trans Latin@s is the emergency room.

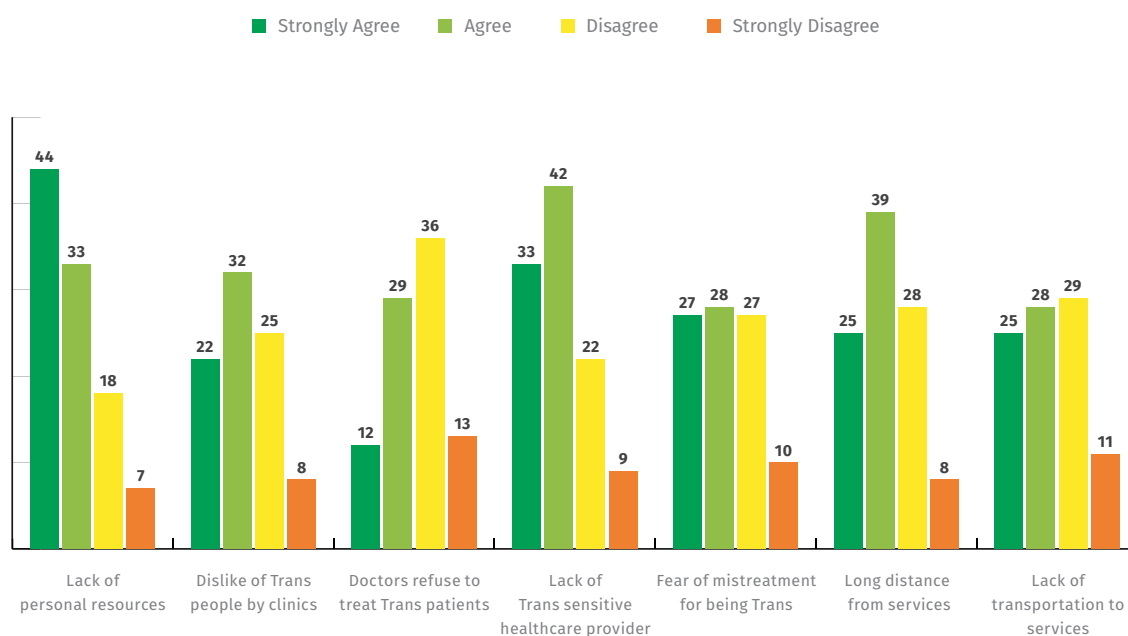


### Location for Medical Care Data Analysis

For those who may not have access to insurance, or face discrimination, the emergency room may be the only answer when pain is no longer the option.

## REASONS WHY MEDICAL CARE IS NOT BEING MET

Participants were asked about the possible reasons why they were not receiving medical health. For Trans Latin@s lack of personal resources and lack of Trans sensitive health care providers, and long distance to services that are among the strongest reasons for why they may not be getting the health care they need.



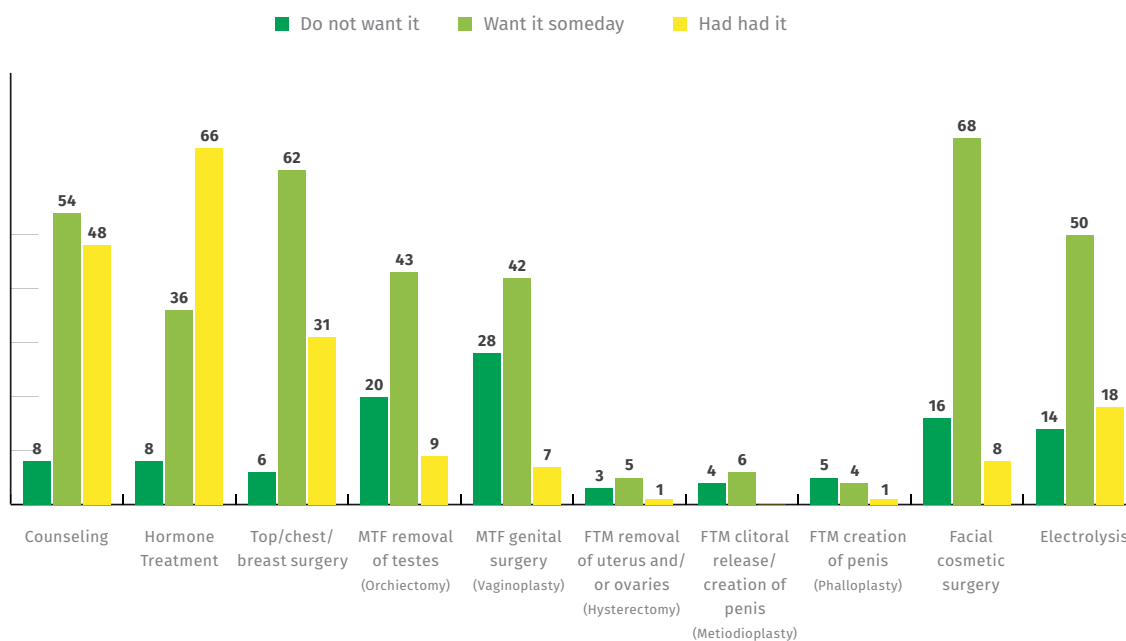
*“Being physically and mentally healthy is important because that way I could function better within society.”*



# MEDICAL CARE (CONTINUED)

## TRANS RELATED CARE

The graph below addresses the Trans related care that participants have either had, want to have someday, or do not want at all.



### Trans Related Care Data Analysis

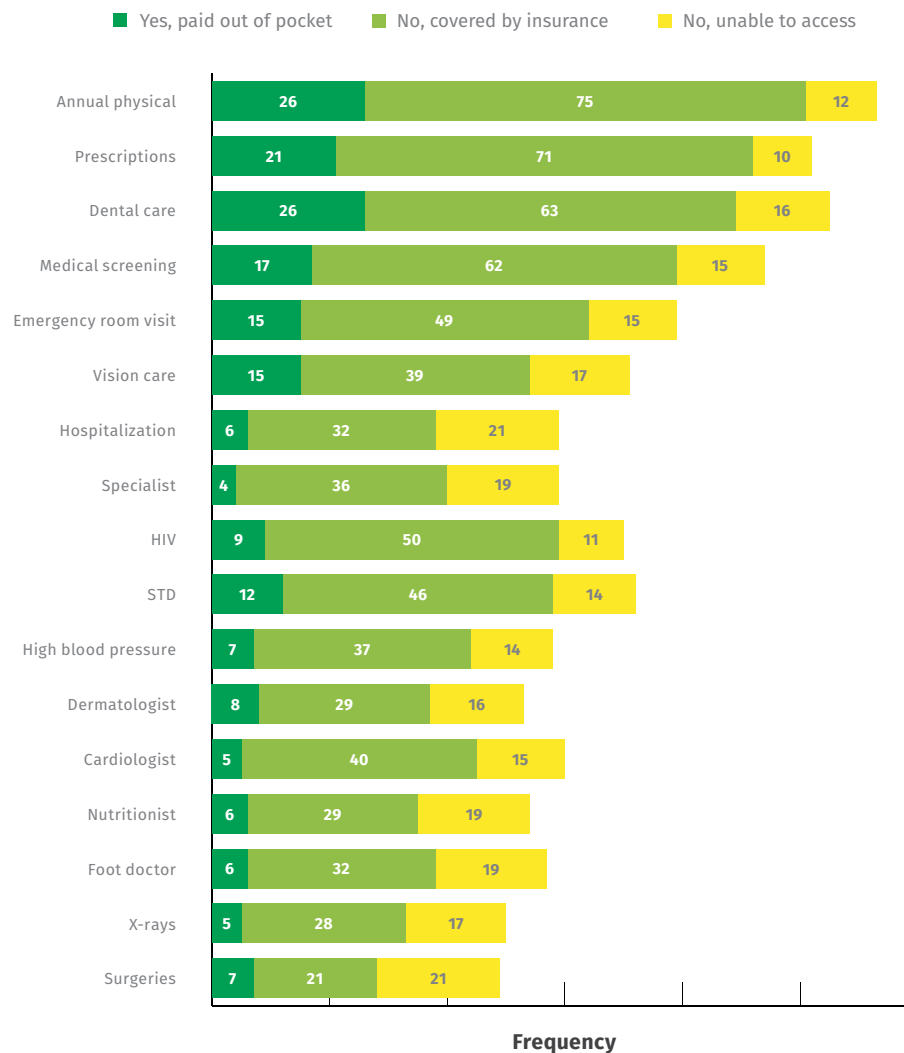
About 15% of participants mentioned having to pay for Trans related care out of pocket. Often times this included hormones and top surgery. For those who paid out of pocket, participants mentioned that the money they used came from their savings, financial help from family or friend or doing sex work. Some participants reported getting hormones from friends who were already on hormones and others discussed crossing the border in Mexico gain access to Trans Related care.



*“Feeling aligned with oneself physically has a large impact mentally and socially for us to thrive.”*

## SERVICES ACCESSED IN THE LAST 12 MONTHS

The graph below shows the services that participants have accessed in the past 12 months.



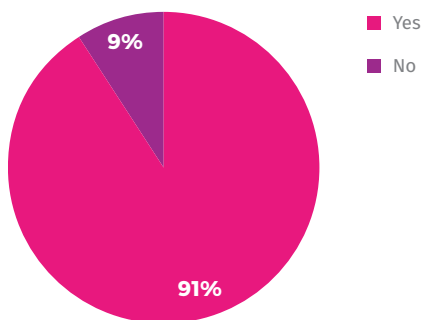
### Services Accessed (12 Months) Data Analysis

As mentioned above many participants have access to health care through Medi-Cal or Medicaid. A large amount of other participants have access to other forms of public health programs because of their HIV status. A total of 39 participants reported being HIV positive and receiving health insurance through Medi-Cal or another public program. For participants, who are not HIV positive or are not citizens, it may be very difficult to get the medical care you need.

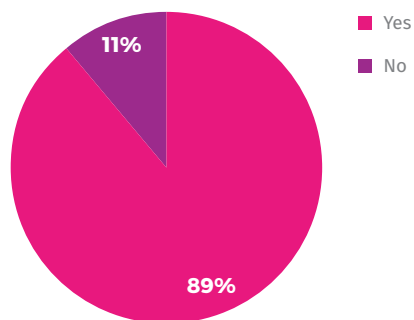
# SEXUAL HEALTH

## DO YOU USE PROTECTION WHEN ENGAGING IN SEXUAL ACTIVITY?

This section captures a snapshot of the sexual health of Trans Latin@s.



## DO YOU KNOW WHERE TO LEARN ABOUT SAFE SEX PRACTICES?



### Safe Sex Data Analysis

Participants were asked if they practice safe sex when they engage in sexuality activity, including penetration and oral, and over **90% of participants** reported that they do **use protection**.

92% of participants said that they feel knowledgeable about practicing safe sex.

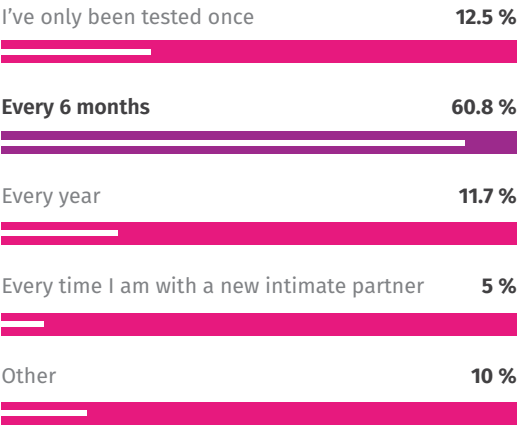
89% of participants know where to learn about safe sex.



*"By using protection I am respecting myself and my body."*

### HIV & STD TESTING FREQUENCY

Participants were asked how often they get tested for HIV and STDs.



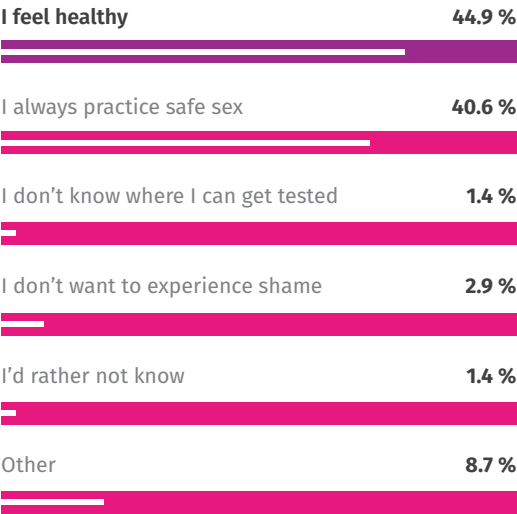
#### Testing Frequency Data Analysis

A majority of participants reported that they get tested every six months.

For those who reported other, most commonly they were tested every three months.

### REASON FOR NOT GETTING TESTED FOR HIV

Participants were asked about possible reasons for why they may not be going to get tested for HIV.



#### Reason for Not Getting Tested Data Analysis

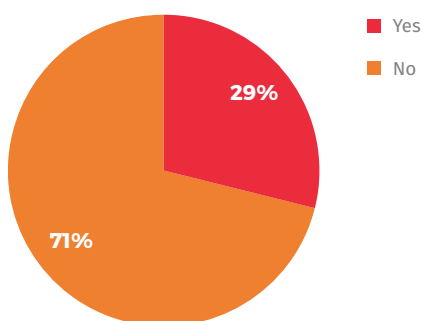
Majority of participants reported that they either felt healthy (44%) or they always practice safe sex (40.6%) so there would be no need to get tested.

A much smaller percentage mentioned not knowing where to get tested (1.4%), feeling shame (2.9%) and not wanting to know (1.4%).

# MENTAL HEALTH

## GENDER RELATED DIAGNOSIS

The section below is a snapshot of how Trans Latin@s fare when it comes to their mental health.



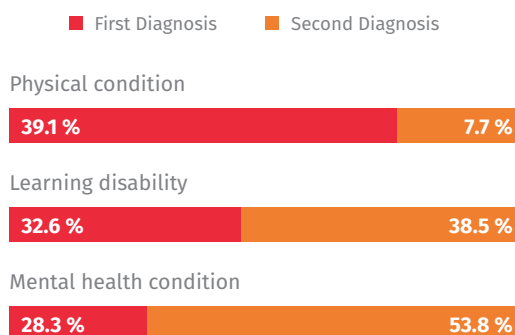
### Mental Health Diagnosis Data Analysis

Mental health is important for our emotional, psychological and over all well-being. Getting the mental health care needs that Trans Latin@s need may be challenging to access due to their lack of health insurance, Trans sensitive care providers and groups, and financial resources.

Only 35 participants (28.7%) have been diagnosed with a gender related mental health issue. 87 participants (71.3%) mentioned that they have not been diagnosed with a gender related mental health issue.

## MENTAL/PHYSICAL DISABILITY

Participants were asked if they had any non-gender related diagnosis, including mental health condition, physical disability, or learning disability.



### Mental/Physical Disability Data Analysis

A total of 31% reported that they did have another diagnoses. Some participants have multiple diagnoses; the graph below shows percentage of first diagnoses, and second diagnoses for participants.



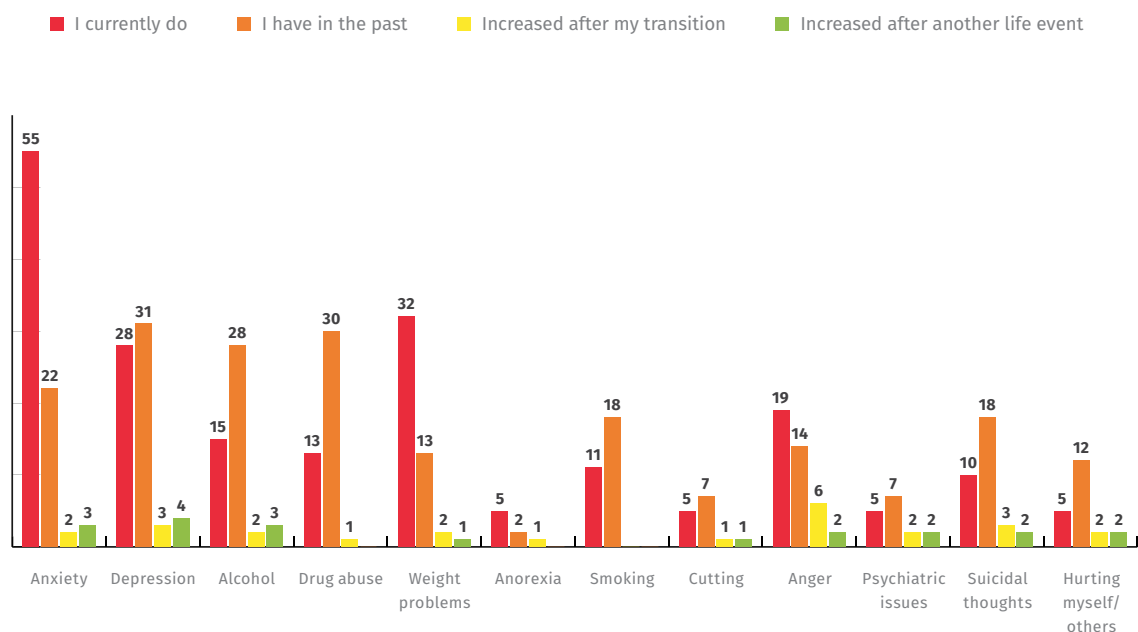
*"It's important for me to have access to mental health, because I have depression, anxiety and many other things. Therapy and medication help me a great deal."*



**“HAVING ACCESS TO MENTAL HEALTH HELPS ME TO SEE, UNDERSTAND, AND ACCEPT THE DIFFERENT SITUATIONS AND ADVERSITIES IN MY LIFE. IT HELPS ME TO FIND AND REACH A PLACE OF BALANCE AND PEACE.”**

## WHAT DO YOU STRUGGLE WITH?

Participants were asked if they were struggling with any of the following.



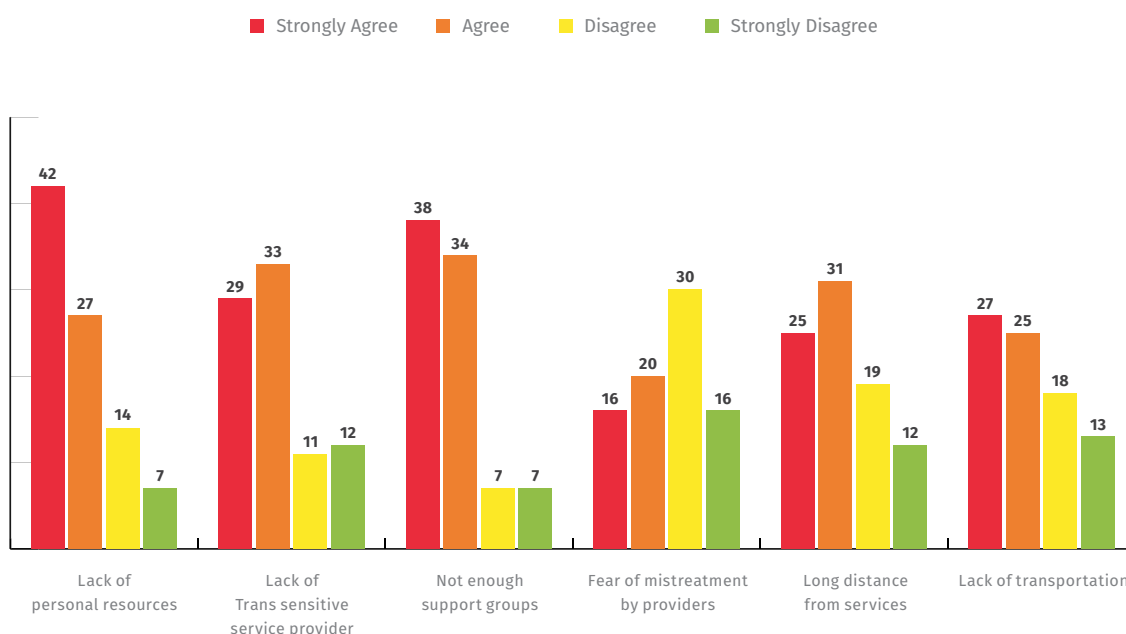
### Struggles Data Analysis

A total of 42% participants reported that they currently struggling with anxiety. Overall, 49% of participants are reported receiving assistance for their current struggle listed below, while 51% are not getting the care they need.

# MENTAL HEALTH (CONTINUED)

## REASONS WHY MENTAL HEALTH NEEDS ARE NOT BEING MET

Participants were asked about reasons for why they may not be getting the mental health care they need.



### Mental Health Reasons Data Analysis

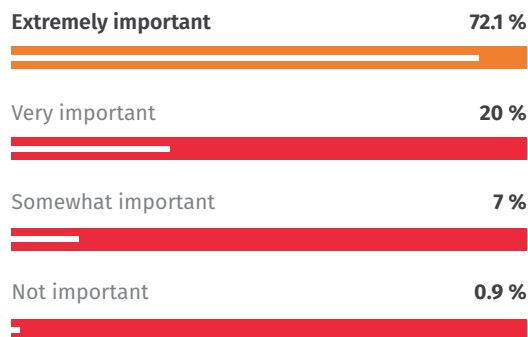
Lack of personal resources, not enough support groups available, and long distances to services stand out as the main reasons for why Trans Latin@s are not receiving the mental health care they need.



*"It's important for me to have access to mental health, because I have depression, anxiety and many other things. Therapy and medication help me a great deal."*

## IMPORTANCE OF MENTAL HEALTH

Mental healthcare is either extremely important (72.1%) or very important (20%) the Trans Latin@ community.



## DO YOU HAVE A SUPPORT SYSTEM?

We asked participants if they had a social support system, including friends, family, other Trans friends, etc that they could rely on.

■ Yes ■ No

Number of respondents



**“ACCESS TO MENTAL HEALTH SERVICES HELPS ME COPE WITH MY STRESS AND ANY DEPRESSION, DYSPHORIA, AND BAD THOUGHTS I MIGHT HAVE.”**

### Support System Data Analysis

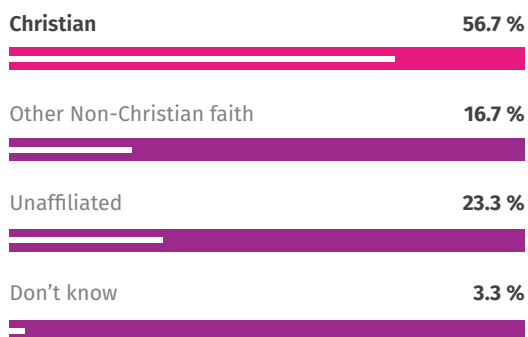
For the **82% of participants** that indicated they **had someone in their life they felt supported by**, most often it was a family member, partner, friends, Trans support group, another Trans friend(s), and/or co-workers.

or many participants reported that having a support system helps with their mental health. Often times support goes beyond emotional mental well-being, and support from friends and family entail providing a place to stay and food to eat.

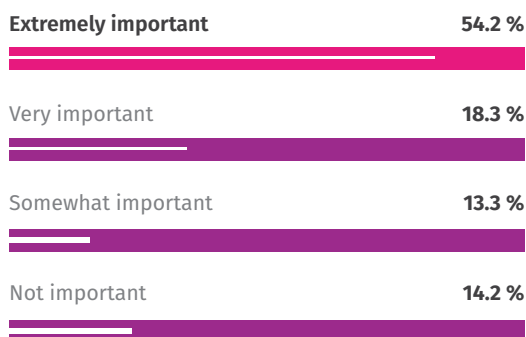
# SPIRITUAL SERVICES

## SPIRITUAL AFFILIATION

The section addresses the role of spirituality in Trans Latin@s lives.



## HOW IMPORTANT ARE SPIRITUAL SERVICES TO YOU?



### Spiritual Data Analysis

Spiritual services prove to be something that is very important for the Trans Latin@ community and it is often tied to their overall health and well being.

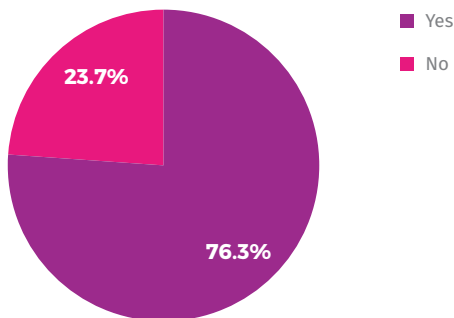
The majority of Trans Latin@s report being affiliated to a Christian faith, while 23.3 are unaffiliated to any religious institution.

A total of 16.7% of participants reported practicing something other than Christianity, including Santeria, Native American practices, Buddhism and Judaism.

Close to 73% of participants reported that spiritual services are either extremely important or very important to them. Accordingly, 66.4% of participants mentioned that they do not need to hide who they are because of their religion.

Lastly, 68.2% participants feel welcome and accepted by their religion.

### IS SPIRITUALITY IMPORTANT TO YOUR OVERALL HEALTH?



#### Importance of Spirituality Data Analysis

When asked if spirituality is important to your overall health, a total of 90 participants (76.3%) responded that spirituality was important to their overall health and well being.

**“MY BUDDHIST PRACTICE HAS EXTREMELY HELPED ME AND PULLED ME OUT OF MY DEPRESSION AND HAS LESSENERD MY ANXIETY. IT HAS GIVEN ME THE CONFIDENCE AND ABILITY TO LOVE MYSELF.”**

***“...[My church] gives me hope... I get all the support in this Church. I’m blessed with God and having people that care NOW...just the hugs we get, the conversations that picks me up and keeps me moving...So I’m okay.”***

# RECOMMENDATIONS



## HOUSING

**HOUSING IS AN ESSENTIAL NEED FOR ANYONE TO BE ABLE TO HAVE A DECENT LIFE. EMERGENCY HOUSING THAT LEADS TO STABLE PERMANENT HOUSING IS SOMETHING THAT IS VERY MUCH NEEDED FOR TRANS LATIN@S. ACCESS TO STABLE AND PERMANENT HOUSING WILL ALLOW TRANS LATIN@S TO BE HEALTHY INDIVIDUALS, THEREFORE ENSURING A HIGHER QUALITY OF LIFE. THE FOLLOWING ARE OUR RECOMMENDATIONS FOR HOUSING:**

- » We recommend that legislators and policy makers fund an emergency shelter in key area(s). An emergency shelter will support Trans Latin@s in Southern California to start a path toward a healthy way of living. Having an emergency shelter will support Trans Latin@s in finding a safe place to deal with whatever they may be going through. Safe and secure housing for Trans Latin@s will reduce stress related to being homeless. It can eliminate other potential health risks such as the involvement in the sex trade for survival, and lessen the incidents of HIV and STDs among Trans Latin@s.
- » Intentionally invest and develop transitional housing programs that will support Trans Latin@s to attain stability. A transitional housing program can provide the opportunity for Trans Latin@s to learn technical skills that will support them to get jobs and long term stability. These transitional housing programs should be of one to two years maximum depending on the needs of the individual. Transitional housing programs are a path for a permanent housing opportunities and programs and must be available for Trans Latin@s in key areas in Southern California.
- » Government and service providing agencies, government elected officials and policy makers, must intentionally invest in permanent and affordable housing opportunities for Trans Latin@s residing in Southern California. Local Latin@, social justice, housing rights, immigrant and Trans organizing groups, must continue to organize and demand permanent housing opportunities to be met for Trans Latin@s in Southern California. In order for housing disparities to be addressed, organizing groups, agencies (both government and service providing) must work together to ensure Trans Latin@s become healthy through permanent housing.



## EMPLOYMENT

**EMPLOYMENT IS ONE OF THE BASIC NECESSITIES FOR PEOPLE TO HAVE A WAY TO SUSTAIN AND TO THEMSELVES AND ACQUIRE BASIC NEEDS. FOR TRANS LATIN@S, HAVING EMPLOYMENT OPPORTUNITIES IS VERY CHALLENGING BECAUSE OF THE CONTINUOUS DISCRIMINATION THEY FACE AS A COMMUNITY. THESE RECOMMENDATIONS ARE POSSIBLE WAYS TO ADDRESS THE EMPLOYMENT DISPARITIES AMONG TRANS LATIN@S IN SOUTHERN CALIFORNIA:**

- » The State of California Workforce Development Board must fund Trans led organizations and programs in Southern California to work with workforce development agencies to provide training and capacity building on Trans culture and inclusivity.
- » Local Workforce development agencies must obtain training on Trans sensitivity and inclusivity in the workplace. Local Workforce development boards have the ability to fund and contract with local Trans led groups and organizations to be able to do these trainings.
- » The California State Workforce Development Board must mandate all workforce development centers and government agencies that they fund, (city and county) to take a minimum of eight (8) hours of Trans cultural sensitivity trainings to be able to understand issues related to Trans individuals. These trainings must be taken at least once a year and must receive some type of acknowledgment documenting that they had received this training. This should be part of their annual review and agency requirements to be able to obtain funding from the State of California Workforce Development Board.
- » Workforce development centers and nonprofit organizations must develop programs that support Trans Latin@s in attaining employment. These agencies must develop relationships with different industries to be able to have an array of employment options for Trans Latin@s in Southern California
- » The California Workforce Development Board must allocate funding to work with Trans led groups and organizations to develop the work force and technical abilities in Trans Latin@ communities to gain skills and obtain jobs in different industry sectors.



**MEDICAL  
HEALTH**

**MEDICAL HEALTH PERTAINS TO ONE'S OVERALL PHYSICAL HEALTH. HISTORICALLY, TRANS PEOPLE HAVE BEEN PATHOLOGIZED IN THE MEDICAL ESTABLISHMENT. AS A RESULT, TRANS PEOPLE HAVE OFTEN BEEN DISCRIMINATED AGAINST WHEN TRYING TO ACCESS BASIC MEDICAL NEEDS. THESE ARE OUR RECOMMENDATIONS RELATED TO THE MEDICAL HEALTH FOR TRANS LATIN@S:**

- » An individual's gender may not "align" with the patient's genitalia, we ask that medical practitioners and staff respect the dignity of each patient, and ask patients to identify their preferred gender identity.
- » Develop and pass legislation that supports Trans Latin@s to cover expenses when accessing emergency rooms, clinics or hospitals.
- » Intentionally allocate funding streams to provide training to doctors and staff on Trans health to be able to provide culturally competent healthcare to Trans Latin@s and their needs. We highly recommend that at least one person who is knowledgeable about Trans health care and is bilingual be scheduled to work at any given shift.
- » Create and develop a statewide standard training curriculum to be used to train in medical schools, emergency rooms, and in hospitals about Trans Latin@s health.
- » Educate and train Trans Latin@s in Southern California about their rights when it comes to medical care so that Trans Latin@s can empower themselves on how to advocate for themselves on their rights in the medical establishment.
- » Develop programs related to sexual health for Trans Latin@s that can be integrated into their HIV prevention programs.
- » Create programs in clinics or medical services that provide transportation services to Trans Latin@s in Southern California so that they can have better accessibility to basic medical services.
- » Develop programs that will support Trans Latin@s with dental health care and hygiene.
- » Develop programs and services that could provide medicinal alternatives for Trans Latin@s in Southern California.

**SEXUAL  
HEALTH**

**SEXUAL HEALTH IS AN IMPORTANT COMPONENT OF A PERSON'S QUALITY OF LIFE. IT IS SHAPED BY MANY FACTORS THAT INCLUDE PHYSICAL, SOCIAL AND MENTAL WELL-BEING. FOR TRANS LATIN@S SEXUAL HEALTH CAN BE PUT AT RISK DUE TO TRYING CIRCUMSTANCES .**

- » Sexual health care providers should be trained on cultural competence and non-discrimination. Clinics and sexual health providers should be trained in Trans appropriate care and inclusivity.
- » Providers should create gender inclusive services to Trans individuals.
- » An individual's gender may not "align" with the patient's genitalia, we ask that sexual health care providers and staff respect the dignity of each patient, and ask patients to identify their preferred gender identity.
- » Intentionally allocate funding streams to provide training to sexual health care providers to provide culturally competent healthcare to Trans Latin@s and their sexual health needs. We highly recommend that at least one person who is knowledgeable about Trans sexual health and is bilingual be scheduled to work at any given shift.

**MENTAL  
HEALTH**

**MENTAL HEALTH IS ONE OF THE ISSUES THAT AFFECT MANY PEOPLE. THE CALIFORNIA HEALTH CARE FOUNDATION STATES THAT AT LEAST 1 IN 20 INDIVIDUALS IN CALIFORNIA SUFFER FROM MENTAL HEALTH ILLNESS . ALTHOUGH THERE IS NO SPECIFIC INFORMATION ABOUT TRANS INDIVIDUALS IN CALIFORNIA AND ISSUES RELATED TO THEIR MENTAL HEALTH NEEDS, WE ARE PROVIDING RECOMMENDATIONS FOR CONSIDERATION BASED ON THE RESULTS OF THIS REPORT. THESE ARE OUR RECOMMENDATIONS:**

- » We recommend that legislators and policy makers intentionally allocate funding to pursue research on the mental health needs and issues related to Trans individuals in the state of California.
- » Anxiety is one of the issues that affect Trans Latin@s in Southern California. We recommend that local mental health departments work with local Trans led groups and organizations to provide mental health services and counseling to Trans Latin@s.
- » Look at alternatives programming that will support Trans Latin@s in lowering their levels of anxiety. Such as art programs like painting, theater, spoken word, etc.
- » Creation of programs around smoking cessation targeting Trans Latin@s in Southern California. Programs should include culturally competent Trans Latin@ counseling sessions and providing strategies for reducing smoking habits.
- » We recommend the creation of support groups that are Trans led by Trans led organizations so that members of the Trans Latin@ community can see themselves reflected. We need to develop Trans Latin@s leaders so that they can lead the proposed support groups. This is crucial because Trans Latin@s stated that having peer support is very important to them.
- » Trans Latin@s need to have mental health services that are easily accessible to get to. Mental health services must be Trans competent and sensitive. Having easy access to mental health services would add to the support network that Trans Latin@s have.

<sup>5</sup> California Health Care Foundation: <http://www.chcf.org/publications/2013/07/data-viz-mental-health>



#### SPIRITUAL HEALTH

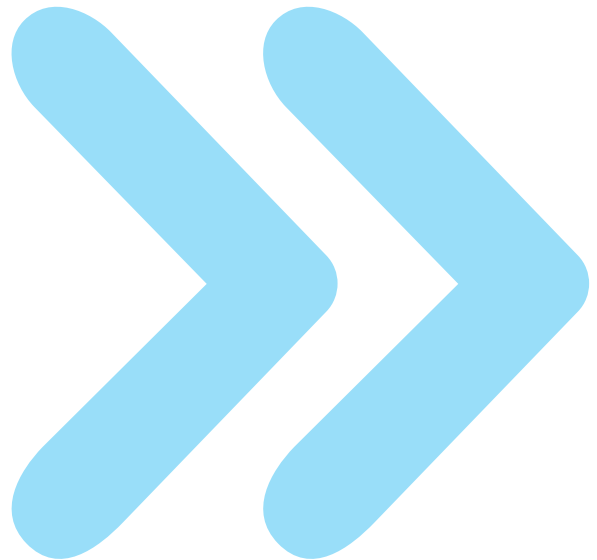
**“RELATED TO SPIRITUALITY IS THE POWER OF HOPE AND POSITIVE THINKING.”<sup>6</sup> IN THIS REPORT, SPIRITUAL SERVICES WERE EXTREMELY IMPORTANT TO TRANS LATIN@S. SPIRITUALITY IS OFTEN ASSOCIATED WITH HEALING AND EMPOWERING INDIVIDUALS WHO EXPERIENCE TRAUMA. THESE ARE SOME OF OUR RECOMMENDATIONS:**

- » Create and develop programs that have a spiritual component to them. Integrating spiritual components into social services and health care settings will support Trans Latin@s to see themselves represented in a different way.
- » Trans Latin@s must be well informed about the spiritual services that exist and where they are welcome, such as LGBTQ specific churches, as well as other denominations. While a good percentage of Trans Latin@s feel welcome in their place of worship, many stated that they do not feel welcome.
- » We recommend that service providers work together with LGBTQ spiritual leaders in the Southern California area to bridge their services to Trans Latin@s who feel marginalized or isolated from spirituality.

<sup>6</sup> Puchalski, Christina M. (2001) “The Role of Spirituality in Health Care.” Proceedings (Baylor University. Medical Center) 14.4: 352–357. Print.

# FUTURE RESEARCH

- » We recommend that organizations and institutions of higher learning continue to provide support for additional research projects in order to access a wider range of Trans Latin@ participants. It is important to assess additional needs and perspectives of this diverse community so that service providers and policy makers get a better understanding of the needs of this community. Our hope is that members of the community can access much needed resources in order to improve their quality of life and health.
- » We recommend that scholars conduct further research in areas such as family acceptance, HIV incidence and prevalence, matters that contribute to depression and suicide, the impact of sex work on the lives of TransLatin@s, the role of sexual health and pleasure in the lives of Trans Latin@s, reproductive health, as well as look to experiences of Latin@ transmen.



# SURVEY

## APPENDIX

## TRANS LATIN@S IN SOUTHERN CALIFORNIA: SURVEY PROTOCOL

- [illegible]

11. To the best of your ability, please estimate the following ages. If it does not apply to you, or you have no desire to transition, mark "N/A." for not applicable.

	Age in Years	N/A
a. Age you first recognized you were different in terms of your gender.		<input type="checkbox"/>
b. Age you began to live part time as a transgender/gender non-conforming person		<input type="checkbox"/>
c. Age you began to live full time as a transgender/gender non-conforming person.		<input type="checkbox"/>
d. Age that you first got any kind of transgender-related medical treatment.		<input type="checkbox"/>

12. For each of the following documents, please check whether or not you have been able (allowed) to change the documents or records to reflect your current gender. Mark "N/A" if you have no desire to change the gender on the document list.

	Yes, changes allowed	No, changes denied	My legal status does not allow me	Not tried	N/A
Birth certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drivers License and/or state issues non-driver ID	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social security records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Passport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work ID	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Military discharge papers (DD 214 or DD 215)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health Insurance Records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional licenses or credentials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. What is the highest level of education you have completed (either in the U.S. or country of origin)?

- ☐ No formal education  
☐ Elementary School  
☐ Some high school  
☐ High school graduate –HS Diploma or equivalent (GED)  
☐ Some college credit  
☐ Technical school degree (such as cosmetology, computer technician, or mechanic)  
☐ Bachelor's Degree  
☐ Associate's Degree (AA, AS)  
☐ Master's Degree (MA, MS, ME, Med, MSW, MBA)  
☐ Professional Degree (Md, DDS, DVM, JD)  
☐ Doctorate Degree (PhD, EdD)  
☐ Other: \_\_\_\_\_

14. What is your **individual** income (before taxes)?

- ☐ Less than \$10,000  
☐ \$10,000 to \$19,999  
☐ \$20,000 to \$29,999  
☐ \$30,000 to \$39,999  
☐ \$40,000 to \$49,999  
☐ \$50,000 to \$59,999  
☐ \$60,000 to \$69,999  
☐ \$70,000 to \$79,999  
☐ More than \$80,000

15. How many individuals currently rely/depend on your income? (Mark all that apply)

- ☐ My child/children, if so how many: \_\_\_\_\_  
☐ My parent(s), if so, how many: \_\_\_\_\_  
☐ My sibling(s), if so, how many: \_\_\_\_\_  
☐ Other relatives under 18, if so how many: \_\_\_\_\_  
☐ Other relatives over 18, if so how many: \_\_\_\_\_  
☐ Friend(s), if so how many: \_\_\_\_\_  
☐ Spouse/Partner

- ☐ Other: \_\_\_\_\_
16. What is your sexual orientation?
- ☐ Heterosexual
- ☐ Homosexual
- ☐ Bisexual
- ☐ Asexual
- ☐ Auto sexual
- ☐ Other: \_\_\_\_\_
17. What is your relationship status?
- ☐ Single
- ☐ Partnered
- ☐ Domestic Partnership
- ☐ Civil Union
- ☐ Married
- ☐ Separated
- ☐ Divorced
- ☐ Widowed
- ☐ Other: \_\_\_\_\_
18. What is your current living situation?
- ☐ Homeless (This includes if you are sleeping on a friends couch)
- ☐ Living in a shelter
- ☐ Living in a group home facility
- ☐ Living in a nursing/adult care facility
- ☐ Living on campus/university
- ☐ Living with parents or family you grew up with
- ☐ Staying with friends or family temporarily
- ☐ Living with a partner, spouse or other person who pays for housing
- ☐ Living in house/apartment/condo | RENT alone or with other
- ☐ Living in house/apartment/condo | OWN alone or with others
19. If you are currently homeless, do you know where there is a shelter where you feel you will be respected for who you are and will sleep at peace tonight?
- ☐ Yes
- ☐ No
- If yes, please tell us the name of this place
20. Have you been homeless in the past 12 months? (being homeless means sleeping at a friend's couch, or temporarily staying at someone's house that is not your permanent place of living)
- ☐ Yes
- ☐ No
21. If you have experienced homelessness in the past 12 months, please briefly tell us what caused you to be homeless: Please explain below
22. If you are or have experienced homelessness, what do you need order to secure stable housing? Please explain below
23. Do you believe that having stable housing is important to your health?
- ☐ Yes
- ☐ No
- Please explain why **it is** important or why **is not** important.
24. What is your current employment status? (Mark all that apply)
- ☐ Full-time
- ☐ Part-time
- ☐ More than one job
- ☐ Self-employed, own your business
- ☐ Unemployed but looking
- ☐ Unemployed and stopped looking
- ☐ On disability
- ☐ Retired
- ☐ Other, please specify: \_\_\_\_\_
25. If you are currently employed please describe your work or vocation:
26. If you do not have what is typically called employment, please describe how you sustain yourself.
27. Do you have employment that provides you with health care insurance



- ☐ Yes  
☐ No

28. If you do have health insurance through your employer, does your insurance and/or doctor provide trans-related care and coverage?

- ☐ Yes  
☐ No

29. If yes, please explain what your insurance covers under trans related care.

30. Do you believe that having permanent employment is important to your overall health?

- ☐ Yes  
☐ No

Please explain why you think having employment **is important** to your health or why is **not important** to your health.

31. Please describe what would be the ideal job that you would like to have in the next three years.

32. What type of health insurance do you have? If you have more than one type of coverage, check the one that you usually use to cover doctor and/or hospital bills.

- ☐ I have NO health insurance coverage  
☐ Insurance through a current or former employer (employee health plan, COBRA, retiree benefits)  
☐ Insurance through someone else's employer (spouse, partner, parents, etc.)  
☐ Insurance you or someone in your family purchased  
☐ Medicare  
☐ Medicaid/Medi-Cal  
☐ Military health care/Champus/Veterans/Tri-Care  
☐ Student insurance through college or university  
☐ Other public (such as state or county level health plan, etc.)  
☐ Other, please specify: \_\_\_\_\_

33. Are currently enrolled in health insurance through Covered California?

- ☐ Yes,  
☐ No

If no, why not?

34. What kind of place do you go to most often when you are sick or need advice about your health?

- ☐ Emergency room  
☐ Private Doctor's office  
☐ Health clinic or health center that my insurance pays for  
☐ Free health clinic  
☐ V.A. (veteran's) clinic or hospital  
☐ Alternative medicine provider (acupuncture, herbalist), specify: \_\_\_\_\_  
☐ Not applicable, I do not use any health care providers  
☐ Other: \_\_\_\_\_

35. The following are a list of possible reasons why you may not get the health care you need. Based on your own situation, please rate your agreement or disagreement.

	Strongly agree	Agree	Disagree	Strongly disagree	N/A
a. Lack of personal resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Clinics having fear about Trans people or dislike of Trans people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Lack of health professionals adequately trained to deliver healthcare to Trans people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Long distances to Trans sensitive medical care facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Doctors and other healthcare workers who refuse to provide services to Trans people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Fear that if medical personnel find out I'm Trans, they will treat me different	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Lack of transportation to get to the services I need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

36. Please mark below the overall medical services that you have had access to in the past 12 months.

	Yes, I paid out of pocket	Yes, my insurance covers	No, Was unable to access	Do not know what this is
Annual Physical Exam				
Routine Prescriptions				
Dental Care				
Routine Medical Screening				
Emergency Room Visits				
Vision Care				
Routine Hospitalization				
Specialist Care				
Gynecological Care				
HIV Care				
High blood pressure				
Cardiologist				
STD testing				
Dermatologist				
Nutritionist				
Foot doctor				
X-Rays				
Surgeries (what type: write in below)				
Endocrinologist				

Other (please specify): \_\_\_\_\_

37. Please mark below if you received or want to receive health care related to being transgender/ gender non-conforming. If you have no desire to do so, please mark not applicable.

	Do not want it	Want it someday	Have had it	Not applicable
Counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hormone Treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Top/chest/breast surgery (chest reduction, enlargement, or reconstruction)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Male-to-female removal of the testes (orchiectomy,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Male-to-female genital surgery (vaginoplasty; removal of penis and creation of a vagina, labia, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Female-to-male hysterectomy (removal of the uterus and/of ovaries)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Female-to-male genital surgery (clitoral release/metodioplasty/creation of testes)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Female-to-male phalloplasty (creation of penis)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facial cosmetic surgery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrolysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

38. If you have marked had any of the procedures done in Question 37, please tell us how you have/ or are you accessing those services:

39. Do you believe that having access to the procedures listed above (Question 37) are important for your overall wellbeing?

☐ Yes

☐ No

a. Please explain why yes **it is important** or why not, is **not important**?

40. Do you believe that having access to a doctor on a regular basis is important to your health?

☐ Yes

☐ No

a. Please explain why yes **it is important** or why not, is **not important**?

41. How important is it to you to have a regular doctor that supports your health goals?

☐ Extremely Important

☐ Very Important

☐ Somewhat important

☐ Not important at all, I can be healthy even if I don't have a regular doctor

42. Do you use protection when engaging in sexual activity (penetration/oral)?

☐ Yes

☐ No

a. Why or why not

43. Do you feel knowledgeable about practicing safe sex?

☐ Yes

☐ No

44. Do you know where to learn about safe sex practices?

☐ Yes

☐ No

45. Have you ever been tested for HIV and STDs?

☐ Yes

☐ No

46. If yes, how often do you get tested for HIV and STDs?

☐ I've only been tested once

☐ Every six months

☐ Every year

☐ Every time I am with a new intimate partner

☐ Other: \_\_\_\_\_

a. If yes, where do you go get tested for HIV and STDs?

47. Have you not been tested for HIV because of any of the following reasons (mark all that apply.)

☐ I feel healthy

☐ I always practice safe sex

☐ I don't know where I can get tested

☐ I don't want to experience shame

☐ I'd rather not know my status

☐ Other: \_\_\_\_\_

48. What is your HIV status?

☐ HIV positive

☐ HIV negative

☐ Don't know

49. If you are HIV positive, are you currently receiving treatment?

☐ Yes

☐ No

50. If you are receiving treatment, is it covered by your insurance?

☐ Yes

☐ No

51. If you don't have insurance, how are you obtaining HIV treatment/prescriptions?

52. Have you ever received a gender-related mental health diagnosis?

☐ No

☐ Yes. My diagnosis is: \_\_\_\_\_

53. Not including a gender-related mental health diagnosis, do you have a disability (physical, learning, mental health) that substantially affects a major life activity?

☐ Yes

☐ NO

54. If yes, what is your disability? (Mark all that apply.)

☐ Physical condition

☐ Learning disability

☐ Mental health condition

55. Have you ever been a victim of domestic violence or intimate partner violence because of being transgender?

☐ Yes

☐ No

56. Do you struggle with any of the following to cope?

	I currently do	I have in the past	This increased after my transition	This increased after another life event (job loss, death, etc)	Not applicable
Anxiety					
Clinical or severe depression					
Alcohol abuse					
Drug abuse					
Weight problems					
Anorexia					
Auto-immune problems					
Smoking					
Cutting					
Anger					
Psychiatric issues					
Thoughts of Suicide					
Hurting myself or others					
Other:					

57. For those boxes that you marked and you are currently struggling with, are you getting any assistance/ help?

☐ Yes  
☐ No

58. If not, would you like to get a referral?

☐ Yes  
☐ No

59. The following are a list of possible reasons why you may not get the mental health care you need. Based on your own situation, please rate your agreement or disagreement.

	Strongly agree	Agree	Disagree	Strongly disagree	N/A
a. Lack of personal resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Long distances to Trans sensitive mental health care facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Fear that if mental health professionals find out I'm Trans, they will treat me different	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Lack of psychologists, social workers, and mental health counselors who can help Trans individuals with mental health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Not enough psychological support groups for trans people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Lack of transportation to get to the services I need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

60. Please let us know of any barriers that may keep you from accessing mental health help and support.

61. Do you currently have a social supportive system (including friends, family, other trans friends, etc.)?

☐ Yes  
☐ No

a. If yes, please explain who is your social support system, if not please explain why you do not have a social support system currently

b. How does the social supportive system you have in place impact your overall wellness?

62. Do you believe that having access to Mental Health services on a regular basis is important to your health?

☐ Yes  
☐ No

Please explain why yes, it **is important** or why you think is **not important**

63. How important is to you to have regular Mental Health services that supports you to be a healthy individual

☐ Extremely Important

- ☐ Very Important
- ☐ Somewhat important
- ☐ Not important at all, I can be healthy even if I don't have a regular mental health services

64. I partake in the following spiritual practices:

- ☐ prayer
- ☐ faith healing
- ☐ homeopathy
- ☐ magnetic therapy
- ☐ numerology
- ☐ astrology/horoscopes
- ☐ gem-stone/crystals
- ☐ Palmistry
- ☐ Tarot

65. My religious affiliation is (Mark all that apply)

- ☐ Christian
  - ☐ Protestant
  - ☐ Evangelical
  - ☐ Mainline
  - ☐ Catholic
  - ☐ Orthodox Christian
  - ☐ Mormon
  - ☐ Jehovah's Witness
  - ☐ Other Christian faith, please specify \_\_\_\_\_
- ☐ Other Non-Christian Faiths
  - ☐ Santeria
  - ☐ Native American religions/practices
  - ☐ Buddhist
  - ☐ Jewish
  - ☐ Hindu
  - ☐ Muslim
  - ☐ Other non-Christian faith, please specify: \_\_\_\_\_
- ☐ Unaffiliated
  - ☐ Atheist
  - ☐ Agnostic
  - ☐ Nothing in particular (believe in a higher power)
- ☐ Don't know

66. Do you feel welcome and accepted by your religion and/ or place of worship?

- ☐ Yes
- ☐ No

67. Do you feel that you have to hide who you are because of your religion?

- ☐ Yes
- ☐ No

68. How important is to you to have regular spiritual/religious services?

- ☐ Extremely Important
- ☐ Very Important
- ☐ Somewhat important
- ☐ Not important at all, I can be healthy even if I don't have regular spiritual/religious services

69. Do you believe that having access to spiritual/religious services on a regular basis is important to your health?

- ☐ Yes
- ☐ No

Please explain why yes or why not:

70. Anything else you'd like to tell us about your needs as a Latina/o trans/transgender person?



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