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Bad Medicine

Transgender people face discrimination where they least expect it—the doctor's office

By M. Dru Levasseur, Lambda Legal Transgender Rights Attorney



"I am empowered enough to stand up for myself and speak up," says Bamby Salcedo. "On intake forms, I check transgender, or if there's not a box on the form, I make my own little box."

Imagine walking into a medical office. Usually the first thing you do is fill out a form with your name and gender. What if your answers don't match your appearance? What happens when a receptionist calls out your name in the waiting room in front of other people?

Transgender and gendernonconforming people face significant barriers to adequate health care. Whether the barriers are due to bias, lack of transgender-specific healthcare training, or insurance that excludes transition-related care, the consequences on people's lives can be devastating.

Lambda Legal has fought transphobia in health settings. Most recently, on March 31, 2010, a federal court, ruling on a challenge brought by Lambda Legal and the ACLU, struck down a law passed by the Wisconsin legislature which denied transgender people access to medical care while in state custody.

In addition, Lambda Legal recently published a survey, "When Health Care Isn't Caring," the first to examine barriers to health care among LGBT and HIV communities on a national scale. In almost every category, transgender and gendernonconforming respondents reported the highest rates of discrimination:

- Almost 90 percent of transgender people surveyed felt that there are not enough health professionals adequately trained to care for them.
- 27 percent were refused care.
- 21 percent were subjected to harsh language.

8 percent experienced physically rough or abusive treatment.

The numbers are even more staggering for low-income transgender people and transgender people of color. Many transgender people wait until they are forced to seek emergency medical care, rather than seek out preventive care. Sometimes, delay or denial of care can be life-threatening.

Life on the Margins

The American Medical Association, the American Psychological Association, the American Academy of Family Physicians and the World Professional Association for Transgender Health have all recognized the medical necessity of gender transition and have called upon public and private insurers to cover transition-related care. Yet even with private health insurance or

Medicaid, most transgender people cannot secure coverage of transitionrelated care, and many are forced to forgo treatment because they cannot afford to pay out of pocket. According to a 2009 survey by the National Center for Transgender Equality and the National Gay and Lesbian Task Force, 15 percent of transgender people live on less than \$10,000 a year, and the unemployment rate is twice that of the general population.

Much transition-related care is based on a psychological diagnosis of gender identity disorder, currently undergoing review for the upcoming fifth edition of the "Diagnostic and

Statistical Manual" due out in 2013. Medical and transgender communities are debating whether gender variance is properly categorized as a mental disorder—similar to the way homosexuality once was—or whether it should be changed to a medical diagnosis or removed completely.

As the field of transgender health care evolves, Lambda Legal is on the frontlines to raise awareness of the disparities faced by transgender and gender-nonconforming people. LGBT people and people living with HIV deserve access to dignified, compassionate, and competent care. Our very lives are at stake.

FIND OUT MORE Read the full report on Lambda Legal's health-care survey at www.lambdalegal.org/health-care-report.

NEED A LEGAL REFERRAL? Call the Lambda Legal Help Desk at 866-542-8336 or email us by visiting www.lambdalegal.org/help/online-form.

STORIES FROM THE FRONTLINES

JAY KALLIO, a former medical professional who began his transition from female to male four years ago at the age of 50, discovered a lump in his breast. Terrified because all of the women in his family had died of cancer, he rushed to a New York City cancer center for a mammogram. The radiologist informed him that the mass was highly suspicious and had the characteristics of a very aggressive cancer. Jay waited more than ten days, but the doctor never called with his results. Finally, the radiologist intervened and had the oncologist call. He told Jay, "I don't even know what to call you." He was reluctant to offer Jay the common course of treatment, a double mastectomy, and instead referred Jay to a psychologist. It took Jay 40 minutes recounting his family history with cancer to convince the doctor that Jay's concern was legitimate and not a plot to

manipulate him into providing transition-

After his mastectomy, Jay's results were sent to an oncologist to determine a course of chemotherapy. The oncologist insisted on a copy of Jay's entire medical history before offering any treatment plan, and called Jay's primary physician to verify why Jay was taking testosterone. This delayed the critical therapeutic window of treatment for another month. Jay transferred to yet another facility, where they agreed to treat him even though time had run out on his recommended window of treatment.

BAMBY SALCEDO, a transgender woman who coordinates the transgender youth harm-reduction project at Children's Hospital LA Division of Adolescent Medicine, says of medical reception staff, "Sometimes they're shocked to see someone like me trying to access services." Once when she had to go to the emergency room, she said people who got there after her were assessed and helped before her. "I firmly believe it was due to who I am."

She notes that in the Latino community, "Culturally, people try to take care of

themselves however they can through homemade remedies or traditional herbal medicine from the botanicas. In trans communities, it's sort of the same; many people get their hormones outside of medical settings. Only in extreme cases do we go to the doctor to seek medical care. Many of us don't have insurance. Or we don't want to deal with the crap that we as a community can go through." Salcedo says she's an exception in her communities. "I am empowered enough to stand up for myself and speak up. On intake forms, I check transgender, or if there's not a box on the form, I make my own little box." Now she sees a doctor at a community-based clinic where she feels very comfortable. "It's not transgender-specific clinic, but they do provide transgender health services. I learned about it in 1998 from a friend who worked there, and I've been going ever since."

Salcedo says she is advocating for more information about the interaction between hormonal treatment and HIV medication in transgender communities. "I'm really advocating for research on this," she says, "but obviously, our community is not a priority to many people."

PRESCRIPTIONS

What can I do if I'm discriminated against in a health-care setting?

Tell someone! Report the mistreatment to a staff member or file a complaint. You can also report it to your state medical licensing board. Finally, call Lambda Legal at 866-542-8336 or email us by visiting www.lambdalegal. org/help/online-form. Our Transgender Rights Project is working hard to combat discrimination in health care settings.

How do I find a transgender-friendly health-care provider who can meet my medical needs?

Several LGBT health clinics maintain a list of transgender-sensitive health-care providers. Many support groups and political organizations keep a local transgender provider directory. Contact Lambda Legal for a referral to your local LGBT community group.

What can medical providers do to change the landscape for transgender health?

Attend a seminar on transgender health. Invite a transgender speaker to do an in-person training at your office, clinic or hospital to make sure that everyone—from the security guard at the door to the head physician—understands how to be respectful to transgender patients. Review your forms to make sure that they are transgender-inclusive. Add a policy that prohibits discrimination in your workplace on the basis of gender identity and gender expression, and make sure it is enforced. Make your office and waiting room more welcoming to gender diversity by having visible transgender posters or stickers. If you have the capacity, hire a liaison to your transgender patients to make sure their needs are being met. Create a volunteer transgender community panel that can meet to provide feedback and work to make your workplace a national model for transgender-sensitive medical care.



A CLOSER LOOK:

FRANCISCO DUENAS

Proyecto Igualdad, established in 2004, is Lambda Legal's outreach project to the Latino community. Brandon Aultman speaks to its coordinator, based in the Western Regional Office in Los Angeles.

Describe your role as Proyecto Igualdad Coordinator at Lambda Legal.

My role is equal parts ambassador, educator and advocate. I oversee the creation and distribution of Lambda Legal's Spanish language content, including publications, our website and online communications. I also constantly build relationships and represent Lambda Legal within the Latino community. I'll edit a know-your-rights publication in Spanish one minute, meet with a Latino community leader and share our educational resources for LGBT Latinos the next.

How do you increase community awareness of Lambda Legal?

As Americans the idea of a legal defense organization seems to be embedded in us. Most Latinos have never heard of Lambda Legal. I usually tell folks, "We're the largest and oldest of the groups that sue when LGBT people or people living with HIV are discriminated against." They totally get it! With Latino lawyers, depending on the part of the country I am in, I will describe Lambda Legal as "the gay MALDEF" (Mexican American Legal Defense and Education Fund) or "the gay PRLDEF" (Puerto Rican Legal Defense and Education Fund.) Once again, it clicks!

How are you continuing to make the case for equality?

In Los Angeles, I have been working with the Latino Equality Alliance, a new coalition among Latino and LGBT organizations designed to facilitate collaboration and coordinate advocacy for LGBT Latinos. Across the country, we continue to have a presence at Latino LGBT pride celebrations and at Latino conferences, and I meet with community and national groups to build coalitions for equality.

Is there any Francisco trivia that your Lambda Lega colleagues might be surprised to learn about you?

I have been honored to officiate three weddings for friends and family, including what might have been the first legally sanctioned gay wedding in East Los Angeles, a historically Latino community. Oh, and I almost made it onto Teen Jeopardy.