# Ensuring Affirming and Culturally Responsive Care For Transgender Patients

A Toolkit for SUD Treatment Providers









This guide is based on the training series Providing Affirming and Culturally Responsive Care to Trans Patients presented between October 2022 and June 2023 to SAPC Network Providers. The Los Angeles County Department of Public Health, Substance Abuse Prevention and Control funded the training series.

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# Introduction

Gaps in and barriers to accessing substance use services for Los Angeles (LA) County transgender patients persist. Often this is due to a lack of appropriate understanding regarding the unique needs of the transgender community.

In efforts to increase equity in access and appropriate engagement in substance use disorder (SUD) services, beginning in December 2022, the Department of Public Health Substance Abuse Prevention and Control (SAPC) Bureau partnered with the California Institute of Behavioral Health Solutions (CIBHS), two SAPC SUD treatment network providers, and three members of the transgender community to initiate a six-part panel discussion and workgroup on Best Practices for Providing Affirming and Culturally Responsive Care to Trans Patients.



This resource guide distills insights from the panelists and is divided into three sections:

**Building a Foundation for Affirming Care:** Offers guidance on inclusive environments, key terminology, and language use.

**Building Bridges for Affirming Care:** Provides tools for transgender patient support, including an inclusive intake form sample, guidance on how to help clients legally change their names and gender markers on their IDs, and case studies.

**Resources:** Training opportunities, educational materials, supplies, and resources supporting affirming care for transgender patients.



We designed this guide to offer practical resources that support the provider network in creating a more welcoming and affirming environment for transgender patients. You can view the guide on your computer, or by downloading or printing it in PDF format.

CIBHS and SAPC would like to thank our panelists: Kathy Watt, Executive Director of Van Ness Recovery House; Nolan Ross Samé-Weil, Director of Development at LA CADA; Desireé Sales, LGBTQ+ Treatment Coordinator at LA CADA; Delilah Tana, SUD Counselor; and Judah Joslyn, Collective Visionary Lead of Trans & Queer Youth Collective (TQYC). Their expertise greatly enriched this initiative.

Disclaimer: The content in this guide provides general consumer information. It is not legal advice or regulatory guidance. This information may include links or references to third-party resources or content. We do not endorse the third party or guarantee the accuracy of this third-party information. There may be other resources that also serve your needs.



Building a Foundation for Affirming Care



Like most individuals with substance use disorders, transgender patients want to be treated with respect and care. However, the stigma surrounding transgender identities can create significant barriers to seeking and engaging in treatment. Fear of being misgendered, placement in non-affirming facilities, or having to use legal names instead of chosen names can all contribute to anxiety and hesitation about entering treatment. Building a foundation for affirming care is crucial to addressing these concerns and creating a safe, supportive environment where transgender patients can focus on their recovery.

This requires adopting inclusive practices across all aspects of care, including:

- Inclusive policies and procedures
- Intake processes
- · Staff training
- Using affirming language
- · Connecting patients to affirming resources in the community

The SAPC Provider Manual, and federal and state regulations, prohibit organizations from denying services based on gender identity. Since it is likely that transgender persons will request services at your facility, it is important to be honest about where you and your staff are in readiness to serve, and to create environments that are safe and inviting for transgender patients.

Here are a few suggestions to get you started.

#### **Train Staff**

- Train entire staff on culturally responsive care for transgender patients. To help solidify the training foundation, ensure that the entire staff is aware of organizational policies and procedures around gender inclusivity. This includes training about healthcare needs, terminology, and respectful interactions for the transgender community.
- Provide training for everyone in your organization so that they are prepared to treat transgender patients and staff with respect and humanness.
- Have open and honest dialogue with staff about their questions, and be free of judgment. Remember that there are no wrong questions.
- Understand that this work takes time and practice. Serving transgender
  patients and creating an affirming environment for this community|
  canrequire a culture shift, so some staff and fellow patients may need
  time to adjust. Acclimating to new language and processes is fine but
  be sure to address disrespectful behavior and correct colleagues who
  make insensitive comments.
- While you cannot deny services based on gender identity, your program
  may not be the right fit for all people. To keep transgender patients
  engaged in treatment, it is key to develop an inclusive referral network
  and ensure a warm hand-off to another provider who can administer
  the services.

# **Show That Your Organization Is a Safe Place**

Small changes matter. You can communicate to patients that your organization is affirming and respectful of their identities by displaying symbols of inclusivity, such as the trans flag or LGBTQ+ pride flag, or by posting non-discrimination policies in waiting areas or service areas. Other ways to show that your organization is affirming to transgender patients include:

- Change organizational forms to include pronouns and chosen names.
- Be aware of nonverbal cues that may make a patient feel unsafe (e.g., facial expression, body language, posture, gestures, etc.).
- Have access or referrals to places where patients can access gender-laffirming clothing and supplies.



## **Use Inclusive Language**

Use inclusive language in all forms of communication with all of your patients. This includes intake forms, written materials, and verbal interactions. Using inclusive language is crucial for creating a safe environment for patients with diverse sexual orientations and gender identities.

Here are a few tips:

Names: Many individuals in the transgender community use a name that differs from the one on their Medi-Cal card or government-issued identification (ID), such as a driver's license. It is good practice to ask patients which name they want staff to use in personal interactions (e.g., What name do you want staff and other residents to call you? or, To make sure that I address you respectfully, what name would you like me to use?). In your intake form, and on all other forms, document both the name on their Medi-Cal card/ID and the name they want you to use.

**Pronouns:** People use different pronouns to align with their identity. When introducing yourself to a new patient, share your pronouns. This opens the opportunity for the patient to then share theirs. **If you are unsure of a person's pronouns, it is better to ask than assume.** 

- Use the appropriate pronouns based on the patient's self-identification and ensure you and other staff are using gender-neutral or nonbinary pronouns when appropriate. Mistakes happen and that is ok. Apologize, correct the mistake, and continue the interaction. Making a big deal out of a mistake can draw unwanted attention to a patient or can cause them undue stress.
- Avoid assumptions about a patient's sexual orientation or gender identity. Allow patients to self-identify and express their identities in their own words.
- Avoid phrases or questions that make assumptions about a patient's identities, relationships, or experiences that are based on a binary understanding of gender and sexuality (e.g., asking a feminine-presenting patient if they have a boyfriend or a masculine-presenting patient if they have a girlfriend).
- Learn and use updated language when communicating with transgender patients. You can find guidance on updated and outdated language in the next section.

We derived some of the information in this section from Supervisors' Guide to Coaching Staff on Talking about Sexual Orientation and Gender Identity by the National SOGIE Center. Find additional information at https://sogiecenter.org/offerings/data-collection/

# **Language Guidance**

The following information is a resource for behavioral health providers to better understand the most recent language used in the transgender community. We adapted the information from the Center of Excellence on LGBTQ+ Behavioral Health Equity's guide for language related to sexual orientation, gender identity, and expression. Find out more and access more resources at <a href="https://lgbtqequity.org">https://lgbtqequity.org</a>

AFFIRMING LANGUAGE	NONAFFIRMING LANGUAGE	WHY LANGUAGE MATTERS
Transgender	Transexual	An older term still used by some people who have changed or seek to change their bodies through medical interventions.  Many transgender people do not identify as transexual and instead use the word transgender, or trans. It is always best to ask someone how they identify and to use the term they request.
Transgender man or trans man, transgender woman or trans woman, transgender boy or trans boy, transgender girl or trans girl	Transgender male or transgender female	When asking questions about gender, use "man," "boy," "woman," or "girl" over "male" and "female" because male and female are typically used to describe sex assigned at birth.
Using transgender exclusively as an adjective	Using transgender as a verb (transgendered, transgendering) or noun (a transgender)	The term transgender is an <b>adjective</b> and should be used as transgender person, transgender pride flag, transgender community, etc.
A person identifies as transgender. You can also say they identify as a man, woman, or nonbinary	A person <b>used to be</b> man or woman, a person <b>was born</b> a boy or girl	Never say someone "used to be" another gender or "was born" another gender.  Someone's gender identity is valid from the moment they disclose it to you, regardless of whether you previously knew them by a different name or pronouns.
Sexual orientation or gender identity	Lifestyle, choice, or preference	When referring to pronouns or identity, never use the words lifestyle, choice, or preference. It is dismissive of the lived experience of people who identify as LGBTQ+.
Pronouns, correct pronouns, proper pronouns, name, correct name		A person's name and pronouns are their name and pronouns, not simply a preference. Using someone's correct name and pronouns is a simple way to show respect. If you are unsure of someone's pronouns, use gender-neutral pronouns such as they, them, or theirs until they confirm their pronouns.

# **Terminology & Definitions**

The following list includes terms a service provider may encounter when serving the transgender community.

IDENTITY		
CISGENDER	A person whose gender identity aligns with the sex assigned to them at birth.	
TRANSGENDER	A person whose gender identity differs from the sex assigned to them at birth.	
GENDER IDENTITY	A person's internal sense of being a girl/woman/female, boy/man/male, something else, or having no gender. Gender identity is not based on genitalia.	
GENDER EXPRESSION	The outward way an individual expresses their gender. This may include choices in clothing and hairstyle, or speech and mannerisms.	
DEADNAME	A person's birth name with which they no longer identify.	
DEADNAMING	The act of calling a transgender person by an incorrect name, typically the one assigned at birth that they no longer use. This can be perceived as offensive and dismissive of their identity.	
CHOSEN NAME	A name that a person uses in their daily life that is different than the name appearing on their legal documents.	
PRONOUNS	Words used to refer to a person (e.g., he/him/his, she/her/hers, they/them/theirs, ze/zir/zirs and co/cos/coself).	
MISGENDERING	Accidentally or intentionally referring to a transgender person by a pronoun or name that does not reflect their gender identity.	
PHYSICAL BODY AND	PRESENTATION	
SEX ASSIGNED AT BIRTH	The sex a person is assigned based on physical anatomy at birth (male or female).	
TRANSITION	The social, legal, and/or medical process a transgender person may undergo to live in accordance with their gender identity.	
BINDER	A compression garment, typically made from elastic and nylon or spandex, used to flatten chest tissue. A binder may look like a sports bra or tank top.	
PACKING	Wearing garments or prosthetics to create the appearance of male genitalia.	
TUCKING	The practice of tucking the penis and testicles into the body to create a smooth appearance. Some underwear and briefs are designed for this purpose.	
BREAST FORMS / PROSTHETICS	Inserts worn to create the appearance of breasts. Typically made from silicone, breast forms come in various sizes, shapes, skin tones, and weights.	
TOP SURGERY	Surgical procedures to alter chest tissue to a more masculine appearance.	
BOTTOM SURGERY	Surgical procedures to alter the genitalia to look more masculine or feminine.	



Building Bridges for Affirming Care

# Collecting Sexual Orientation and Gender Identity (SOGI) Information

This section includes a template, checklist, and case studies for providers who are currently serving transgender clients. We selected the following resources to support providers in incorporating affirming practices into their processes and suggest some best practices for responding to scenarios that providers may encounter when serving transgender patients.



#### **SOGI Questions**

At first, asking gender identity questions can feel uncomfortable. It is ok to be uncomfortable when you are learning something new. Remember, even if the question is uncomfortable to you, it may not be for the patient. A question can be an opportunity for connection.

CONSIDER REMEMBER

Asking SOGI questions allows people to be seen and helps to end invisibility in healthcare. These questions also collect important information for providing affirming and responsive care.

If people are not provided a space to safely disclose or express their gender identity, they may think that the environment is unsafe. If you are an LGBTQ+-friendly agency, make that clear so patients know they can share. One way to do this is by providing the opportunity to ask about their gender identity and pronouns.

Some patients may not understand how SOGI questions are related to their SUD treatment. Normalize asking SOGI questions, explain why SOGI questions are relevant for their services, and give examples of how the SOGI information may be used in their care.

For example, a counselor or intake staff might say, "I'm going to ask you some questions that I ask all of my patients as it is important for me to get to know you so I can best help you. Your answers are private, and I will not share this information without your consent."

### **Sample Intake Form**

We developed this guide to assist SUD providers with integrating affirming practices into the intake process. It offers the following:

**Sample Questions:** Examples of questions that can be directly added to existing intake forms.

**Training Tool:** Serves as a training guide and role-playing tool for staff to develop comfort asking patients SOGI questions.

**Terminology**: Increases knowledge and understanding of SOGI terms.

You can add suggested SOGI questions and response options to registration forms and in electronic health records (EHR) fields. These questions and the accompanying terminology will continue to evolve, and changes are to be expected. Organizations may modify response option terms to better fit the local community's lived experiences.

For example, organizations that serve American Indian/Alaska Native populations may wish to include the term Two Spirit for both sexual orientation and gender identity. Two Spirit describes American Indian/Alaska Native people who express their gender identity, spiritual identity, or social role in a traditional, non-Western way.



## **Asking for Names and Pronouns**

Names: Many people use a name different from the one on their Medi-Cal card or government-issued ID. This is especially the case for transgender and gender-diverse people. We strongly recommend asking patients for the name they want healthcare staff to use in personal interactions. To minimize billing issues, healthcare providers also need to collect the names patients use on their insurance records or government-issued ID.

**Pronouns:** Pronouns are the words we use to refer to someone without using that person's name. Using incorrect pronouns can be very hurtful, even when unintentional, so it is important to ask all patients for their pronouns and to consistently use them.

Examples of pronouns are she/her/hers, he/him/his, and they/them/theirs. People may also use pronouns developed specifically for nonbinary gender identities, such as ze/zir/zirs and co/cos/coself. For this reason, we recommend including a write-in option. Following is a suggested method for asking about names and pronouns on forms.

# Sample Name and Pronoun Questions for Intake Forms

While our facility recognizes all gender identities, many insurance companies and legal entities do not. Please be aware that the name and sex listed on your Medi-Cal card must be used for insurance, billing, and correspondence documents. If you do not have Medi-Cal, list what is on your government-issued ID (such as your driver's license).

First and	last name on Medi-Cal card/ID
What na	me would you like our staff to use?
What is t	the sex/gender marker on your medical insurance: Female Male
	e your pronouns? She/Her/Hers
	He/Him/His They/Them/Theirs Please specify:



# **Suggested SOGI Questions**

We are asking the following information to understand whom we are serving and to provide you with more patient-centered care.

Sexual Orientation
(Please select the option that best describes you.)
Do you think of yourself as:
☐ Lesbian or gay
☐ Straight or heterosexual (that is, not lesbian or gay)
□ Bisexual
Queer
□ Pansexual
☐ Don't know
Prefer not to answer
□ Something else:
What is your current gender identity?
(Please select the option that best describes you.)
☐ Female/woman/girl
■ Male/man/boy
☐ Nonbinary, genderqueer, or not exclusively female or male
☐ Transgender female/woman/girl
☐ Transgender male/man/boy
☐ Don't know
☐ Prefer not to answer
□ Another gender:
What sex were you assigned at birth, on your original
birth certificate? (Check one.)
☐ Female
■ Male
☐ Don't know
☐ Prefer not to answer
□ X/Another sex:

# Definitions of Sexual Orientation and Gender Identity (SOGI) Question Categories

SEXUAL ORIENTATION	How people describe their emotional and physical attraction to others.
LESBIAN	Women who are emotionally and physically attracted to other women.
GAY	Men who are mainly emotionally and physically attracted to men, but can also describe women attracted to women.
HETEROSEXUAL (STRAIGHT)	Women who are mainly emotionally and physically attracted to men, and men who are mainly emotionally and physically attracted to women.
BISEXUAL	People who are emotionally and/or physically attracted to people of all genders.
QUEER	People who think of their sexual orientation as outside of societal norms. Some people view the term queer as more fluid and inclusive than traditional categories for sexual orientation.
PANSEXUAL	People who are emotionally and physically attracted to people of all gender identities, or whose attractions are not related to gender identity.
SOMETHING ELSE	A sexual orientation option for people whose sexual orientation is not listed in the response options provided, including people who do not have a sexual orientation.
DON'T KNOW	A sexual orientation option for people who do not know their sexual orientation, are questioning their sexual orientation, or do not understand the meaning of sexual orientation.
PREFER NOT TO ANSWER	A sexual orientation an option for people who do not wish to share their sexual orientation at this time.
GENDER IDENTITY	A person's inner sense of being a female/woman/girl, male/man/boy, something else, or having no gender.
FEMALE / WOMAN GIRL	People assigned female at birth who have a female gender identity.
MALE / MAN / BOY	People assigned male at birth who have a male gender identity.
NONBINARY / QUEER NOT EXCLUSIVELY MALE OR FEMALE	People whose gender identity is beyond the traditional binary of female/woman/girl or male/man/boy.

TRANSGENDER FEMALE / WOMAN / GIRL	People assigned male at birth who have a female gender identity.
TRANSGENDER MALE / MAN / BOY	People assigned male at birth who have a male gender identity.
ANOTHER GENDER	A gender identity option for people whose gender identity is not listed in the response options provided, including people who do not have a gender identity.
DON'T KNOW	A gender identity option for people who do not know their gender identity, are questioning their gender identity, or do not understand the meaning of gender identity.
PREFER NOT TO SAY	A gender identity option for people who do not wish to share their gender identity at this time.
SEX ASSIGNED AT BIRTH	The sex assigned to an infant and written on the original birth certificate. Sex assigned at birth can be female, male, or X/another sex.
X /ANOTHER SEX	A sex assignment for people born in jurisdictions that allow a third assigned sex option and whose parents assigned their sex as nonbinary or X on their birth certificate.
DON'T KNOW	A sex assignment option for people who do not know assigned sex at birth or who do not understand the question.
PREFER NOT TO SAY	A sex assignment option for people who do not wish to share their sex assigned at birth at this time.

We adapted this document from <u>A Guide for Collecting Data on Sexual Orientation and Gender Identity by the National LGBTQIA+ Health Education Center.</u>



# Checklist: Legal Name Change and Gender Marker

Planned Parenthood of Pasadena & San Gabriel Valley created the following checklist on the steps to legally change a name or gender marker in Southern California. This process can serve as guidance to assist transgender patients in updating outdated identification to align with their gender identity and name.

#### ☐ Fill out court forms.

(Find copies online at https://transequality.org/documents).

Legal Name Change and Gender Marker forms include:

- 1. Civil Case Cover Sheet (CM-010)
- 2. Civil Case Cover Sheet Addendum and Statement of Location (LACIV 109)
- 3. Petition for Change of Name, Recognition of Change of Gender, and Issuance of New Birth Certificate (NC-200)

- 4. Petition of Name Change (NC-110)
- 5. Criminal History Assessment sheet (LACIV 226)
- 6. Order to Show Cause for Change of Name to Conform to Gender Identity (NC-125/NC-225)
- 7. Decree Changing Name and Order Recognizing Change of Gender and for Issuance of New Birth Certificate (NC-230)
- 8. Fee waiver forms, if necessary (FW-001, FW-003)
- \* Write "In Proper" wherever it says "attorney" if you will be representing yourself and do not need an attorney.
- ☐ Make a copy of all your forms for your records.
- ☐ Be prepared to pay a fee for filing.

The fee is \$435. This fee only covers the cost of filing your petition for legal name and gender marker change.

☐ File your forms with the court clerk at your closest courthouse.

They will go over the forms with you to make sure everything is completed properly.

☐ Go to your court hearing, if necessary.

If no good cause objection is filed within six weeks, the court will grant the request without a hearing.

If there is an objection filed and a hearing is set, you will be sent a notice of the court date. Go to court on your court date and take a copy of the papers you filed, along with the Decree Changing Name and Order Recognizing Change of Gender and for Issuance of New Birth Certificate (Form NC-230) for the judge to sign.

☐ Pick up your decree for changing name and gender from the court and pay for certified copies.

If the judge approves your request for a change of name and gender, the judge will sign the decree.

☐ Get certified copies from the court clerk.

You will need this to change your name on your legal documents, including your birth certificate and other government-issued ID like your driver's license.

Each certified copy costs \$25. We suggest getting 3-5 certified copies of the decree

#### **Case Studies**

The following case studies illustrate real-world scenarios providers might encounter when serving transgender patients. Each case study reviews a scenario, outlining potential challenges, practical solutions, and best practices for effectively navigating the situation.



- 1 | Scenario: Affirming Intake Process
- 2 | Scenario: A Second Start Finding Support in the Treatment Community
- 3 | Scenario: Finding the Right Fit A Warm Hand-Off
- 4 | Scenario: Navigating Disrespect and Creating Safety in Group Therapy

## 1 | Scenario: Affirming Intake Process

A new patient arrives at your facility from the county jail. You immediately notice that they look nervous and stressed. They are still wearing their county-issued clothing and have very few possessions — just a small plastic bag with a few personal items. The person approaches your desk with their head down and hands you some paperwork. You smile, welcome the person in, and introduce yourself. You take a look at the paperwork.

The person's paperwork lists their name as Samantha and their gender as female. You ask them to take a seat and if they would like a snack and some water. Their eyes light up and they shake their head yes.

After the patient has finished and had some time to rest, you start the intake process. During the process, you ask for their ID. You write the name that is listed on their ID and then ask what name they would like staff and the other residents to use. They tell you to call them Lee and tell you that they use he/him pronouns. Lee identifies as a trans man. You document Lee's chosen name, pronouns, and gender identity on the intake form. After completing the intake process and admitting Lee, you ask him if he would like to get cleaned up and change into a fresh set of clothes. Lee says yes and you take him to your resource closet.

At the resource closet, using the appropriate pronouns, you introduce Lee to Pam, your resource coordinator, and inform Pam that Lee needs clothing and toiletries. Pam asks Lee what type of clothing he is looking for. Lee mentions that he likes loose-fitting clothes, and Pam points Lee to a section to select a few items. Pam mentions to Lee that some of the residents use binders. She asks Lee if he would like a binder. Lee smiles and agrees. Pam sets out a few toiletries such as deodorant, body wash, a toothbrush, and menstrual care, and tells Lee to grab what he needs. Lee looks relieved and grabs all the items from the table. After Lee grabs the items, Pam shows Lee to his room to settle in.

In the past, patients at the facility have demonstrated negative and sometimes violent responses to transgender patients. As a result, your team has fostered inclusivity of gender-diverse individuals as part of the community rules, including anti-stigma and zero-tolerance policies for both staff and patients.

# **Challenges**

#### **Recent Incarceration**

Leaving jail can be stressful and traumatic. Transgender patients might be apprehensive about starting treatment and disclosing their identity due to potential discrimination or harassment they might have faced in jail.

#### Clothing

Having a lack of gender-affirming clothing can lead to feelings of invalidation. Additionally, only having county-issued clothing can further stigmatize the patient, which can impact feelings of safety and engagement in services.

#### **Paperwork**

Legal documents mismatching a person's chosen name, pronouns, and gender identity can heighten stress when coming into a new environment as patients may not know if the environment is safe and affirming for transgender patients.

#### **Limited Belongings**

Having minimal personal items can be an additional stressor and hinder adjustment to the new environment.

#### **Solutions**

#### **Warm Welcome**

Create a welcoming environment by offering patients a seat, water, and a snack, and acknowledging visible stress. It is nice to make a person feel seen and welcome before jumping into business. This often reduces stress and can make the patient more comfortable interacting with you and your staff.

#### **Respectful Communication**

Use neutral language until the patient clarifies their chosen name and pronouns. It is better to ask what a person would like to be called and what their pronouns are than to assume.

#### **Gender-Affirming Resources**

Being aware of the need for and providing access to gender-affirming clothing, toiletries, and other items (e.g., binders, breast inserts, razors for shaving, feminine products, etc.). When possible, offering guidance on how to use products that people in the transgender community may use is a way to demonstrate to patients that the environment is affirming and respectful of their identities.

#### **Team Members Trained in Affirming Care**

Having policies in place and regularly training staff at all levels of the organization on how to respectfully engage with people from diverse gender backgrounds ensures that the environment is welcoming no matter which staff the patient interacts with. Being in an affirming environment is beneficial for healing trauma and can positively impact a person's recovery.

#### **Resources Needed**

- Gender-affirming clothing and toiletries support a person in feeling affirmed in their identity.
- LGBTQ+ or trans-positive support groups within and outside the facility can help the patient build positive connections and community that affirm who they are while supporting their recovery.
- Legal resources for name change can help the patient if they desire them. It is often difficult for patients to navigate systems. Having legal resources to assist them can be a big help in reducing barriers.

#### **Best Practices**

#### **Prioritize Safety and Comfort**

Ensure the intake process is private and free from distractions. Offer refreshments and acknowledge a patient's potential anxieties.

#### **Active Listening**

Focus on verbal and nonverbal cues, demonstrating genuine interest and understanding.

#### **Clarity and Transparency**

Explain all processes and procedures clearly and simply, outlining confidentiality protocols.

#### **Celebrate Identity**

Use inclusive language and consistently acknowledge a patient's chosen name and pronouns, even if different from legal documents.

#### **Ongoing Support**

Schedule regular check-ins with patients to monitor progress, address concerns, and ensure continued access to resources and support. Checking in with a patient who is transitioning is important as they may need additional support when changes in their body occur.

# 2 | Scenario: A Second Start — Finding Support in the Treatment Community

A month ago we received a referral to our facility for Gabbie, a transgender woman. She came to us after being incarcerated and sought to make her peers her audience for all sorts of behavior that was not conducive to recovery. Many times, transgender patients who have been homeless or done sex work to survive do not have role models for positively interacting with other people in recovery.

While Gabbie was at our facility, our treatment team met with her on several occasions through counseling sessions to discuss her background and behavior, and provide her with tools and guidance on how to appropriately interact with her fellow residents. We also discussed how the use of her body to seek validation causes difficulty to the treatment community and others' efforts toward recovery.

Despite us offering alternative tools and suggestions for behavior change, Gabbie didn't want to change and ended up having sex with another resident. Though this situation is not unique, the policies in our small treatment setting just don't have room for this behavior — especially when we have offered alternative tools and suggestions have been offered. The treatment team decided that, after a month of treatment and non-compliance with the rules, referring Gabbie to another program we often collaborate with for our LGBTQ+ residents was the best course of action. We offered alternative treatment providers to both residents involved. The gentleman found a program and we delivered him there for a warm hand-off and the understanding that he still had his sobriety and just needed another setting to have a clean slate.

We transferred Gabbie to the program we work with for our transgender patients. We arranged a warm hand-off to this program where we knew Gabbie would be supported in moving forward with her recovery. Gabbie seeks recovery and has maintained her sobriety, so we felt very hopeful with this referral, as we have had similar situations work out very well. In the past, we have also been the ones accepting a patient from the program where we referred Gabbie.

Having a strong referral system helped make Gabbie's transition to the other facility smooth. Our main goal is to always make sure that our residents have the support they need to continue their recovery journey in a supportive environment.

## **Challenges**

#### Lack of Positive Role Models

Many transgender patients often experience alienation from their families and lack positive support systems. Due to this, some transgender patients may have limited exposure to appropriate social interaction, leading to a reliance on unhealthy behavior for validation.

#### **Difficulties in Adapting**

Transitioning from survival mode on the streets to a structured recovery environment can be challenging. New residents may need time to adjust to a new way of behaving and interacting with others in recovery. It is important for the provider to be understanding and try multiple engagement methods with the patient. Although some residents may be difficult, referring out is not the first option and we never discharge a patient without making a warm hand-off to supportive services.

#### **Unique Needs of Transgender Patients**

General treatment approaches might not fully address the specific needs and experiences of transgender patients. Receiving training on the needs of the transgender community and having knowledge about transgender culture are important aspects of quality care.

#### **Limited Resources**

Some small treatment settings have limited capacity to cater to the specific needs of transgender patients. Having a robust list of trans-positive resources, groups, and supportive services is important in supporting transgender patients in their recovery.

#### **Solutions and Resources**

#### **Specialized Treatment Programs**

Programs designed to affirm transgender individuals have a good understanding of transgender experiences and the challenges the transgender community faces. These facilities are skilled at providing tailored treatment approaches that address the specific needs and challenges faced by the transgender community.

#### **Peer Support**

Interaction with other transgender individuals who can serve as role models and provide a sense of community can support transgender residents in their recovery.

#### **Trauma-Informed Care**

Addressing potential underlying trauma of patients can be beneficial to understanding what may be contributing to their behavior. This information can be used to develop a personalized treatment plan that addresses specific needs related to a patient's SUD treatment and recovery.

#### **Individualized Therapy**

This type of therapy provides support in developing healthy coping mechanisms and addressing the root causes of behavior.



#### **Best Practices**

#### Addressing the Underlying Cause

While a patient's behavior may be inappropriate, focusing solely on compliance might not address the root cause of the issue. Exploring the reasons behind a person's behavior can lead to a more sustainable solution.

#### **Ongoing Education**

The treatment team should continuously educate themselves on the specific needs and challenges faced by the transgender community.

#### **Inclusive Environment**

Create a safe and affirming space where transgender individuals feel respected and valued.

#### **Gender-Affirming Resources**

Offering gender-affirming clothing and toiletries promotes a supportive environment for individuals to feel affirmed in their identity. Residents can keep whatever they were given during their stay when finishing treatment or transferring to another affirming facility.

#### **Clear Communication**

Openly discuss expectations and boundaries while being understanding of the unique challenges faced by transgender individuals.

#### Collaboration

If necessary, work with other organizations specializing in transgender care to ensure a smooth referral process and access to appropriate resources.

# 3 | Scenario: Finding the Right Fit — A Warm Hand-Off

Thirty-two-year-old Joey walks into your office for their intake appointment. You are a well-respected SUD treatment facility known primarily for its work with men. Joey has been struggling with heroin addiction for several years and finally decided to seek help.

John, the intake counselor, greets Joey with a warm smile. Joey presents as a woman and after reviewing the referral paperwork, John notices that while the appointment and Medi-Cal card identified the patient as male and named Joey, the chosen name listed is "Sarah." John asks, "Hi, it says here that your chosen name is Sarah. Is it ok if I use Sarah instead of Joey?" After Sarah answers yes, John asks, "Do you feel comfortable sharing your pronouns?" John avoids making assumptions and creates a space for Sarah to self-identify.

Relieved by John's approach, Sarah replies, "She/her, thanks for asking." John acknowledges Sarah with a nod. As the intake progresses, John asks about Sarah's living situation and support system. John tells Sarah that he wants to ensure that she feels secure and supported during her recovery and asks if she would be comfortable at an all-male facility or if she would be interested in a treatment center that is more trans-positive and gender-affirming.

Sarah hesitates and then shares that she wasn't aware there were options like that. She adds that finding a good program felt overwhelming. John reassures her, and shares that many people don't know about these facilities. Your agency has built a resource list for LGBTQ+ patients.

John pulls out his resource list and identifies a local agency that has a transgender-affirming SUD program. John discusses the option to connect Sarah with the program and provides Sarah with a list of transgender-affirming 12-step groups in the area.

Sarah says that she would feel more comfortable at a facility that caters to transgender patients as she doesn't identify as male and wasn't sure if she would feel safe in an all-male facility. John facilitates a warm hand-off by directly contacting the new facility. He introduces Sarah to the intake counselor there, explains the situation, and agrees upon an appointment date with Sarah. John ensures Sarah has his contact information and offers follow-up support to ease the transition.

#### **Challenges**

#### **Limited Awareness**

Like many transgender individuals, Sarah may not be aware of the existence of trans-positive treatment programs.

#### **Fear of Discrimination**

Sarah might hesitate to disclose her transgender identity due to fear of judgment or discrimination within a traditionally male-oriented facility.

#### **Safety Concerns**

An all-male (or all-female) environment might raise safety concerns for Sarah, impacting her comfort level and potentially hindering recovery.

#### **Treatment Discrepancies**

Treatment approaches and support groups might not be tailored to address the specific needs and experiences of transgender individuals.

#### **Solutions**

#### **Intake Training**

Train intake staff to review paperwork and pick up cues when interacting with patients, including best practices for inclusive language, respectful inquiry about gender identity, and awareness of trans-specific resources.

#### **Warm Hand-Off**

Develop a network of referral partnerships with transgender-affirming treatment centers to facilitate smooth transitions if a patient referred to you prefers a facility that specifically serves transgender or the broader LGBTQ+ communities.

#### **Continuing Support**

To ensure a connection, offer ongoing support to patients navigating referrals, even after the hand-off.

#### **Resources Needed**

#### **LGBTQ+ Resource Directory**

Maintain a comprehensive directory of local LGBTQ+ organizations, support groups, and treatment facilities.

#### **Cultural Competency Training**

Provide staff with training on cultural competency in working with transgender individuals, including understanding the unique challenges they face in recovery.

#### **Best Practices**

#### **Inclusive Language**

Use a person's chosen name and pronouns.

#### **Open Communication**

Create a safe space for patients to disclose their gender identity.

#### **Respectful Inquiry**

Ask questions in a way that promotes self-identification.

#### **Resource Navigation**

Be familiar with and provide access to transgender-affirming resources.

#### **Warm Hand-Off**

When preferred by the patient, facilitate a smooth transition to a more suitable program. Any gender-affirming supplies or clothing provided to the patient during their stay should go with them to the next facility.

#### **Continuing Support**

Offer ongoing support throughout the referral process.

# 4 | Navigating Disrespect and Creating Safety in Group Therapy

Lily, a 22-year-old transgender woman, sits nervously in a group therapy session at Second Chance, an SUD treatment agency. It's her first day, and she wants to make a good impression. Lily takes a deep breath and introduces herself, "Hi everyone, I'm Lily. I'm here because I've been struggling with alcohol addiction for a while now. I love music and painting, and I'm hoping to get back on my feet."

As the group progresses, another member, Mark, frequently uses masculine pronouns (he/him) when referring to Lily. Even after Lily politely corrects him, stating, "Excuse me, it's actually she/her," Mark continues with the incorrect pronouns and uses derogatory slurs directed towards transgender individuals. Lily visibly tenses, and the group dynamic becomes strained and uncomfortable.

The group facilitator, Chloe, notices the shift in the room. Using a calm and assertive tone, she intervenes, "Mark, I appreciate you sharing, but I noticed Lily correcting you on her pronouns. It's important for all of us to respect one another's identities. Using the correct pronouns is a basic courtesy." Chloe reminds everyone of the importance of using the correct pronouns. She ensures Lily feels safe to continue participating and then guides the group back to the original topic.

After the group, Chloe checks in with Lily privately to see how she's feeling and offers support. Chloe also meets with Mark individually to address his behavior. She explores the reasons behind his comments, provides information on appropriate terminology when referring to transgender persons, and sets clear expectations for respectful behavior in the group. Chloe uses the incident as a teachable moment in the next session to discuss respecting diverse identities and the importance of inclusive language.

#### **Challenges**

#### **Limited Awareness**

Treatment group members may not be familiar with transgender terminology or best practices for respectful interaction.

#### **Discrimination and Bigs**

Some group members may hold negative biases or prejudices towards transgender individuals.

#### **Emotional Triggers**

Disrespectful behavior can trigger emotional distress and feelings of being unsafe for the transgender patient, leadingto premature termination of treatment.

#### **Solutions**

#### **Inclusive Training**

Train group facilitators and staff on cultural responsiveness to ensure they can effectively navigate situations involving transgender patients. This may include understanding transgender identities and best practices for pronoun usage. Provide training for all patients on respecting diverse identities and using inclusive language.

#### **Group Norms**

Establish clear group norms that prioritize respect and inclusivity for all members. Review group norms at the beginning of each session and remind group participants of the norms when they are not followed.

#### **Safe Space Creation**

Foster a safe space where open dialogue and respectful communication are encouraged by modeling acceptable behavior and addressing disrespectful behavior when it occurs.

#### **Resources Needed**

#### **Transgender Training Materials**

Develop or utilize existing training materials on transgender cultural competency for staff and group facilitators

#### **Support Groups**

Maintain a directory of local LGBTQ+ and/or transgender support groups where patients can connect with others who share their experiences.

#### **Visual Aids**

Post informational materials about gender identity and pronoun usage in common areas as a reminder and educational resource.

#### **Best Practices**

#### Address Disrespectful Behavior Promptly and Directly

Use a calm and assertive tone that emphasizes the importance of respecting everyone's identity. Focus on the impact of the behavior, not the intent.

#### **Private Follow-Up**

Check in with Lily to acknowledge her feelings and offer support. Follow up with Mark to discuss his behavior. Provide additional resources and educational material if necessary.

#### **Normalize Pronoun Sharing**

Encourage all participants to share their pronouns when introducing themselves. This normalizes the practice and helps avoid assumptions.

#### **De-Escalation Techniques**

Train facilitators in de-escalation techniques for managing tense situations

#### **Zero-Tolerance Policy**

Establish a clear zero-tolerance policy for discrimination or harassment.



Helpful Resources and Links

## **Clothing, Supplies and Services**

This section offers resources and <u>links</u> to organizations connecting transgender patients to affirming clothing, supplies and services, including free and low-cost options.

#### **ORGANIZATIONS**

#### SERVICES OFFERED

#### Trans + Queer Youth Collective (TQYC)

TQYC is a non-profit service provider focused on uplifting transgender and queer youth through virtual and in-person programming.

Resources, virtual and in-person programming for transgender youth.

Access to gender-affirming clothes and supplies. Fill out the **Gender Affirming Supplies Request Form** to request affirming clothes and supplies from TQYC. TQYC is only able to fulfill requests for youth 6th-12th grade and young adults 17-24 years old.

#### M·A·C Cares

Since M·A·C was founded, we have stood for something simple: All Ages, All Races, All Genders. Our purpose goes beyond the products we develop to the communities we serve and the planet we live in. Join us in our ambition to drive impact, promote acceptance, and inspire change toward a better future.

M•A•C will donate beauty supplies to organizations that call 1-800-588-0070 on their behalf.

#### **Strands for Trans**

Haircuts are historically gendered: Salons for women. Barbershops for men. This leaves the transgender community feeling uncomfortable, unwelcome, and unsure. Strands For Trans is bringing gays, straights, women, men, anyone, together to create more trans-friendly barbershops and hair salons. Join in and let's help this community feel welcome.

Strands for Trans provides wigs to those in need. They also provide a registry of trans-friendly barbershops and hair salons around the country.

#### **TransLatin@ Coalition (TLC)**

Since M·A·C was founded, we have stood for TLC was founded in 2009 by a group of Transgender and Gender nonconforming and Intersex (TGI) immigrant women in Los Angeles, California, as a grassroots response to address the specific needs of TGI Latin@ immigrants who live in the United States. In 2015, TLC identified the urgent need to provide direct services to empower TGI people in response to structural, institutional, and interpersonal violence, and the Center for Violence Prevention and Transgender Wellness was born.

- Drop-in Center for daily food distribution, clothing, English as a Second Language (ESL) classes, and a computer lab
- Economic & Workforce Development
- HOPE Transition Housing Services
- Legal Services
- Re-entry assistance to those released from jails, prisons, and immigration detention centers
- Violence Prevention
- PrEP/PEP Training

## **Training and Educational Resources**

This section offers additional training resources and <u>links</u> for providers serving or preparing to serve the transgender community. You can find definitions, role plays, additional training material, best practices, and guides to explore.

#### **RESOURCES**

#### **National LGBTQIA+ Health Education Center**

This Center is designed to support the implementation of change strategies within mental health and substance use disorder treatment systems to address disparities impacting the LGBTQIA+ community.

#### **Role Plays/Demonstration Videos:**

#### Sexual Orientation and Gender Identity (SOGI) Data Collection

These videos demonstrate best practices in sexual orientation and gender identity data collection. They address common questions and issues that arise for frontline and clinical staff when asking patients about their sexual orientation and gender identity.

#### Name and Gender Change Information: National Center for Transgender Equality

One-stop hub for name and gender change information. Find out how to update your name and gender on state and federal IDs and records.

#### **Pronouns and Why They Matter**

Resources on personal pronouns.

# <u>Video: Learning About Sexual Orientation, Gender Identity & Expression (SOGIE)</u>

Video reviewing basic terminology that is important to know when working with people who have diverse sexual orientations or gender identities. This terminology includes sex assigned at birth, gender identity, gender expression, and sexual orientation.

#### **General Definitions**

Lists of terms related to the LGBTQ+ community.

#### **National SOGIE Center**

The Center serves as a centralized site for accessing resources on providing culturally responsive care to children, youth, and young adults with diverse sexual orientations, gender identity, and expression.

#### **RESOURCES** (continued)

#### **National SOGIE Center Data Collection**

SOGIE Data Collection Resources and Guides

#### <u>Supporting the Behavioral Health Workforce to Implement Best Practices</u> <u>for LGBTQ+ People</u>

Steps providers can take to create an LGBTQ+ affirming environment.

#### **Gender-Affirming Pediatric Care Toolkit**

This toolkit is a curated list of resources created by the National LGBTQIA+ Health Education Center to aid medical and behavioral health providers who are either starting on their journey in gender-affirming care for transgender (TGD) youth or are looking to refresh or further their learning and understanding of creating safe, supportive, affirming healthcare experiences for TGD children and adolescents.

#### <u>Learning Resources — Transgender Health</u>

Learning modules, publications, videos, webinars, and toolkits for transgender care.

# **SAPC Network Providers Who Serve Transgender Patients\***

AGENCY	SPA	POPULATION SERVED	LEVEL OF CARE
BAART Sun Valley	2	LBGTQ+	ОТР
IMPACT	3	Transgender Patients	Outpatient Residential (3.1, 3.5)
L.A. CADA	4	LBGTQ+	ОТР
Nuestra Casa (L.A. CADA)	4	Transmen Transwomen	Outpatient Intensive Outpatient Residential (3.1, 3.5) Transition Age Youth
Van Ness Recovery House	4	LBGTQ+	Residential (3.1, 3.5)
Children's Hospital LA	4	Trans Youth 12 to 25	Outpatient
CLARE MATRIX	5	Transmen Transwomen	Outpatient Residential (3.1, 3.5), Withdraw Management
Angel Step Too (SCADP)	7	Transwomen	Residential
(SCADP)	7	LBGTQ+	Outpatient Intensive Outpatient, Residential (3.1, 3.5) Withdraw Management
Inland Valley Recovery Services	7	LBGTQ+	Residential (3.1, 3.5)
Roots Through Recovery	8	Transgender Adults	Outpatient Intensive Outpatient

<sup>\*</sup>This list is not exhaustive. It represents SAPC network providers who attended the training series and confirmed that they serve the transgender community.