Injustice at Every Turn

A Report of the National Transgender Discrimination Survey

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Jody L. Herman, Ph.D.
and Mara Keisling
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About the National Center for Transgender Equality

The National Center for Transgender Equality is a national social justice organization devoted to ending discrimination and violence against transgender people through education and advocacy on national issues of importance to transgender people. By empowering transgender people and our allies to educate and influence policymakers and others, NCTE facilitates a strong and clear voice for transgender equality in our nation’s capital and around the country.

About the National Gay and Lesbian Task Force

The mission of the National Gay and Lesbian Task Force is to build the grassroots power of the lesbian, gay, bisexual and transgender (LGBT) community. We do this by training activists, equipping state and local organizations with the skills needed to organize broad-based campaigns to defeat anti-LGBT referenda and advance pro-LGBT legislation, and building the organizational capacity of our movement. Our Policy Institute, the movement’s premier think tank, provides research and policy analysis to support the struggle for complete equality and to counter right-wing lies. As part of a broader social justice movement, we work to create a nation that respects the diversity of human expression and identity and creates opportunity for all.

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This study was undertaken with the dogged commitment of the National Center for Transgender Equality and the National Gay and Lesbian Task Force to bring the full extent of discrimination against transgender and gender non-conforming people to light. Executive directors Mara Keisling and Rea Carey committed considerable staff and general operating resources to this project over the past three years to create the original survey instrument, collect the data, analyze thousands of responses and, finally, present our findings here.

Key Task Force and NCTE staff, as well as our data analyst, are credited on the masthead of this report but many former staff, pivotal volunteers and visiting fellows put their unflagging effort and best thinking to this enormous task.

We are deeply grateful to Dr. Susan (Sue) Rankin of Pennsylvania State University, a nationally recognized LGBT researcher, for hosting our study through Penn State’s Consortium on Higher Education. This allowed the survey to go through the Institutional Review Board process, to ensure the confidentiality and humane treatment of our survey participants. We are most grateful to M. Somjen Frazer who first as a volunteer and then later as a staff analyst made a crucial contribution in the questionnaire development, data cleaning and variable development phase of the research. Former Task Force Policy Institute staff member Nicholas Ray also did a wonderful job convening and guiding the many staff and volunteers who participated in developing the questionnaire.

A number of Vaid Fellows at the Task Force made crucial contributions to this work in the data cleaning, field work and early analytical stages of this report including Morgan Goode, Amanda Morgan, Robert Valadéz, Stephen Wiseman, Tey Meadow and Chloe Mirzayi. Morgan’s work interfacing with staff at homeless shelters, health clinics and other direct service programs serving transgender and gender non-conforming people greatly increased participation in the study by transgender people often shut out of research projects.

Transgender community leaders made a major contribution to our thinking in developing the survey and field work, including Marsha Botzer, Moonhawk River Stone, M.S., LMHC and Scout, Ph.D. All of these leaders made important suggestions in the development of the questionnaire and our data collection process. We are grateful to Marsha, as the Task Force board chair, and Hawk, a member of the Task Force board, for championing this work institutionally.

Our organizations are especially grateful to the Network for LGBT Health Equity, formerly the Network for LGBT Tobacco Control, for providing $3,000 in funding for health and outreach workers to reach underserved racial and ethnic populations in this endeavor.

Both organizations would also like to thank their foundation funders for their support in making this work possible: Arcus Foundation, Gill Foundation, Open Society Institute, as well as an Anonymous donor. In addition, the Task Force would like to thank additional foundation funders who supported this work, including the David Bohnett Foundation, Evelyn and Walter Haas, Jr. Fund, Ford Foundation, Kicking Assets Fund of the Tides Foundation, and the Wells Fargo Foundation.

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Finally, we thank Steven K. Aurand, who has volunteered at the Task Force for over 20 years, using his expertise in statistics to greatly increase our capacity to work with a very complex data set.

This study has obviously been a labor of love by a community of dedicated advocates, and we are honored to be able to offer the collective fruits of our labor to the community.
EXECUTIVE SUMMARY

This study brings to light what is both patently obvious and far too often dismissed from the human rights agenda. Transgender and gender non-conforming people face injustice at every turn: in childhood homes, in school systems that promise to shelter and educate, in harsh and exclusionary workplaces, at the grocery store, the hotel front desk, in doctors’ offices and emergency rooms, before judges and at the hands of landlords, police officers, health care workers and other service providers.

The National Gay and Lesbian Task Force and the National Center for Transgender Equality are grateful to each of the 6,450 transgender and gender non-conforming study participants who took the time and energy to answer questions about the depth and breadth of injustice in their lives. A diverse set of people, from all 50 states, the District of Columbia, Puerto Rico, Guam and the U.S. Virgin Islands, completed online or paper surveys. This tremendous gift has created the first 360-degree picture of discrimination against transgender and gender non-conforming people in the U.S. and provides critical data points for policymakers, community activists and legal advocates to confront the appalling realities documented here and press the case for equity and justice.

KEY FINDINGS

Hundreds of dramatic findings on the impact of anti-transgender bias are presented in this report. In many cases, a series of bias-related events lead to insurmountable challenges and devastating outcomes for study participants. Several meta-findings are worth noting from the outset:

- Discrimination was pervasive throughout the entire sample, yet the combination of anti-transgender bias and persistent, structural racism was especially devastating. People of color in general fare worse than white participants across the board, with African American transgender respondents faring worse than all others in many areas examined.
- Respondents lived in extreme poverty. Our sample was nearly four times more likely to have a household income of less than $10,000/year compared to the general population.¹
- A staggering 41% of respondents reported attempting suicide compared to 1.6% of the general population,² with rates rising for those who lost a job due to bias (55%), were harassed/bullied in school (51%), had low household income, or were the victim of physical assault (61%) or sexual assault (64%).

[Household Incomes of Respondents chart]
HARASSMENT AND DISCRIMINATION IN EDUCATION

- Those who expressed a transgender identity or gender non-conformity while in grades K-12 reported alarming rates of harassment (78%), physical assault (35%) and sexual violence (12%); harassment was so severe that it led almost one-sixth (15%) to leave a school in K-12 settings or in higher education.

- Respondents who have been harassed and abused by teachers in K-12 settings showed dramatically worse health and other outcomes than those who did not experience such abuse. Peer harassment and abuse also had highly damaging effects.

EMPLOYMENT DISCRIMINATION AND ECONOMIC INSECURITY

- Double the rate of unemployment: Survey respondents experienced unemployment at twice the rate of the general population at the time of the survey, with rates for people of color up to four times the national unemployment rate.

- Widespread mistreatment at work: Ninety percent (90%) of those surveyed reported experiencing harassment, mistreatment or discrimination on the job or took actions like hiding who they are to avoid it.

- Forty-seven percent (47%) said they had experienced an adverse job outcome, such as being fired, not hired or denied a promotion because of being transgender or gender non-conforming.

- Over one-quarter (26%) reported that they had lost a job due to being transgender or gender non-conforming and 50% were harassed.

- Large majorities attempted to avoid discrimination by hiding their gender or gender transition (71%) or delaying their gender transition (57%).

- The vast majority (78%) of those who transitioned from one gender to the other reported that they felt more comfortable at work and their job performance improved, despite high levels of mistreatment.

- Overall, 16% said they had been compelled to work in the underground economy for income (such as doing sex work or selling drugs).

- Respondents who were currently unemployed experienced debilitating negative outcomes, including nearly double the rate of working in the underground economy (such as doing sex work or selling drugs), twice the homelessness, 85% more incarceration, and more negative health outcomes, such as more than double the HIV infection rate and nearly double the rate of current drinking or drug misuse to cope with mistreatment, compared to those who were employed.

- Respondents who had lost a job due to bias also experienced ruinous consequences such as four times the rate of homelessness, 70% more current drinking or misuse of drugs to cope with mistreatment, 85% more incarceration, more than double the rate working in the underground economy, and more than double the HIV infection rate, compared to those who did not lose a job due to bias.
Loss of Job by Race

Unemployment Rates including by Race

HOUSING DISCRIMINATION AND HOMELESSNESS

- Respondents reported various forms of direct housing discrimination — 19% reported having been refused a home or apartment and 11% reported being evicted because of their gender identity/expression.

- One-fifth (19%) reported experiencing homelessness at some point in their lives because they were transgender or gender non-conforming; the majority of those trying to access a homeless shelter were harassed by shelter staff or residents (55%), 29% were turned away altogether, and 22% were sexually assaulted by residents or staff.

- Almost 2% of respondents were currently homeless, which is almost twice the rate of the general population (1%).

- Respondents reported less than half the national rate of home ownership: 32% reported owning their home compared to 67% of the general population.

- Respondents who have experienced homelessness were highly vulnerable to mistreatment in public settings, police abuse and negative health outcomes.
DISCRIMINATION IN PUBLIC ACCOMMODATIONS

- Fifty-three percent (53%) of respondents reported being verbally harassed or disrespected in a place of public accommodation, including hotels, restaurants, buses, airports and government agencies.

- Respondents experienced widespread abuse in the public sector, and were often abused at the hands of “helping” professionals and government officials. One fifth (22%) were denied equal treatment by a government agency or official; 29% reported police harassment or disrespect; and 12% had been denied equal treatment or harassed by judges or court officials.

Experiences of Discrimination and Violence in Public Accommodations

<table>
<thead>
<tr>
<th>Location</th>
<th>Denied Equal Treatment</th>
<th>Harassed or Disrespected</th>
<th>Physically Assaulted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retail Store</td>
<td>32%</td>
<td>37%</td>
<td>3%</td>
</tr>
<tr>
<td>Police Officer</td>
<td>20%</td>
<td>29%</td>
<td>6%</td>
</tr>
<tr>
<td>Doctor’s Office or Hospital</td>
<td>24%</td>
<td>25%</td>
<td>2%</td>
</tr>
<tr>
<td>Hotel or Restaurant</td>
<td>19%</td>
<td>25%</td>
<td>2%</td>
</tr>
<tr>
<td>Government Agency/Official</td>
<td>22%</td>
<td>22%</td>
<td>1%</td>
</tr>
<tr>
<td>Bus, Train, or Taxi</td>
<td>9%</td>
<td>22%</td>
<td>4%</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>13%</td>
<td>16%</td>
<td>1%</td>
</tr>
<tr>
<td>Airplane or Airport Staff/TSA</td>
<td>11%</td>
<td>17%</td>
<td>1%</td>
</tr>
<tr>
<td>Judge or Court Official</td>
<td>12%</td>
<td>12%</td>
<td>1%</td>
</tr>
<tr>
<td>Mental Health Clinic</td>
<td>11%</td>
<td>12%</td>
<td>1%</td>
</tr>
<tr>
<td>Legal Services Clinic</td>
<td>8%</td>
<td>6%</td>
<td>1%</td>
</tr>
<tr>
<td>Ambulance or EMT</td>
<td>5%</td>
<td>7%</td>
<td>1%</td>
</tr>
<tr>
<td>Domestic Violence Shelter/Program</td>
<td>6%</td>
<td>4%</td>
<td>1%</td>
</tr>
<tr>
<td>Rape Crisis Center</td>
<td>5%</td>
<td>4%</td>
<td>1%</td>
</tr>
<tr>
<td>Drug Treatment Program</td>
<td>3%</td>
<td>4%</td>
<td>1%</td>
</tr>
</tbody>
</table>

BARRIERS TO RECEIVING UPDATED ID DOCUMENTS

- Of those who have transitioned gender, only one-fifth (21%) have been able to update all of their IDs and records with their new gender. One-third (33%) of those who had transitioned had updated none of their IDs/records.

- Only 59% reported updating the gender on their driver’s license/state ID, meaning 41% live without ID that matches their gender identity.

- Forty percent (40%) of those who presented ID (when it was required in the ordinary course of life) that did not match their gender identity/expression reported being harassed, 3% reported being attacked or assaulted, and 15% reported being asked to leave.
ABUSE BY POLICE AND IN PRISON

- One-fifth (22%) of respondents who have interacted with police reported harassment by police, with much higher rates reported by people of color.

- Almost half of the respondents (46%) reported being uncomfortable seeking police assistance.

- Physical and sexual assault in jail/prison is a serious problem: 16% of respondents who had been to jail or prison reported being physically assaulted and 15% reported being sexually assaulted.

DISCRIMINATION IN HEALTH CARE AND POOR HEALTH OUTCOMES

- Health outcomes for all categories of respondents show the appalling effects of social and economic marginalization, including much higher rates of HIV infection, smoking, drug and alcohol use and suicide attempts than the general population.

- Refusal of care: 19% of our sample reported being refused medical care due to their transgender or gender non-conforming status, with even higher numbers among people of color in the survey.

- Uninformed doctors: 50% of the sample reported having to teach their medical providers about transgender care.

- High HIV rates: Respondents reported over four times the national average of HIV infection, with rates higher among transgender people of color.

- Postponed care: Survey participants reported that when they were sick or injured, many postponed medical care due to discrimination (28%) or inability to afford it (48%).
FAMILY ACCEPTANCE OF GREAT IMPORTANCE

• Forty-three percent (43%) maintained most of their family bonds, while 57% experienced significant family rejection.

• In the face of extensive institutional discrimination, family acceptance had a protective affect against many threats to well-being including health risks such as HIV infection and suicide. Families were more likely to remain together and provide support for transgender and gender non-conforming family members than stereotypes suggest.

RESILIENCE

Despite all of the harassment, mistreatment, discrimination and violence faced by respondents, study participants also demonstrated determination, resourcefulness and perseverance:

• Although the survey identified major structural barriers to obtaining health care, 76% of transgender respondents have been able to receive hormone therapy, indicating a determination to endure the abuse or search out sensitive medical providers.

• Despite high levels of harassment, bullying and violence in school, many respondents were able to obtain an education by returning to school. Although fewer 18 to 24-year-olds were currently in school compared to the general population, respondents returned to school in large numbers at later ages, with 22% of those aged 25-44 currently in school (compared to 7% of the general population).

• Over three-fourths (78%) reported feeling more comfortable at work and their performance improving after transitioning, despite reporting nearly the same rates of harassment at work as the overall sample.

• Of the 26% who reported losing a job due to bias, 58% reported being currently employed and of the 19% who reported facing housing discrimination in the form of a denial of a home/apartment, 94% reported being currently housed.
CUMULATIVE DISCRIMINATION

Sixty-three percent (63%) of our participants had experienced a serious act of discrimination — events that would have a major impact on a person's quality of life and ability to sustain themselves financially or emotionally. These events included the following:

• Lost job due to bias
• Eviction due to bias
• School bullying/harassment so severe the respondent had to drop out
• Teacher bullying
• Physical assault due to bias
• Sexual assault due to bias
• Homelessness because of gender identity/expression
• Lost relationship with partner or children due to gender identity/expression
• Denial of medical service due to bias
• Incarceration due to gender identity/expression

Almost a quarter (23%) of our respondents experienced a catastrophic level of discrimination — having been impacted by at least three of the above major life-disrupting events due to bias. These compounding acts of discrimination — due to the prejudice of others or lack of protective laws — exponentially increase the difficulty of bouncing back and establishing a stable economic and home life.

CONCLUSION

It is part of social and legal convention in the United States to discriminate against, ridicule, and abuse transgender and gender non-conforming people within foundational institutions such as the family, schools, the workplace and health care settings, every day. Instead of recognizing that the moral failure lies in society's unwillingness to embrace different gender identities and expressions, society blames transgender and gender non-conforming people for bringing the discrimination and violence on themselves.

Nearly every system and institution in the United States, both large and small, from local to national, is implicated by this data. Medical providers and health systems, government agencies, families, businesses and employers, schools and colleges, police departments, jail and prison systems — each of these systems and institutions is failing daily in its obligation to serve transgender and gender non-conforming people, instead subjecting them to mistreatment ranging from commonplace disrespect to outright violence, abuse and the denial of human dignity. The consequences of these widespread injustices are human and real, ranging from unemployment and homelessness to illness and death.

This report is a call to action for all of us, especially for those who pass laws and set policies and practices, whose action or continued inaction will make a significant difference between the current climate of discrimination and violence and a world of freedom and equality. And everyone else, from those who drive buses or teach our children to those who sit on the judicial bench or write prescriptions, must also take up the call for human rights for transgender and gender non-conforming people, and confront this pattern of abuse and injustice.

We must accept nothing less than a complete elimination of this pervasive inhumanity; we must work continuously and strenuously together for justice.
Endnotes


4. See note 3. “Mistreatment” includes harassment and bullying, physical or sexual assault, discrimination, or expulsion from school at any level based on gender identity/expression.

5. Seven percent (7%) was the rounded weighted average unemployment rate for the general population during the six months the survey was in the field, based on which month questionnaires were completed. See seasonally unadjusted monthly unemployment rates for September 2008 through February 2009. U.S. Department of Labor, Bureau of Labor Statistics, “The Employment Situation: September 2008,” (2008): http://www.bls.gov/news.release/archives/empsit_10032008.htm.

6. 1.7% were currently homeless in our sample compared to 1% in the general population. National Coalition for the Homeless, “How Many People Experience Homelessness?” (July 2009): http://www.nationalhomeless.org/factsheets/How_Many.html.


8. The overall sample reported an HIV infection rate of 2.6% compared to .6% in the general population. United Nations Programme on HIV/AIDS (UNAIDS) and World Health Organization (WHO), “2007 AIDS Epidemic Update” (2007): http://data.unaids.org/pub/EPISlides/2007/2007_epiupdate_en.pdf. People of color in the sample reported substantially higher rates: 24.9% of African-Americans, 10.9% of Latino/as, 7.0% of American Indians, and 3.7% of Asian-Americans in the study reported being HIV positive.


10. See note 9.
Introduction

Every day, transgender and gender non-conforming people bear the brunt of social and economic marginalization due to discrimination based on their gender identity or expression. Advocates confront this reality regularly working with transgender people who have lost housing, been fired from jobs, experienced mistreatment and violence, or been unable to access the health care they need. Too often, policymakers, service providers, the media and society at large have dismissed or discounted the needs of transgender and gender non-conforming people, and a lack of hard data on the scope of anti-transgender discrimination has hampered the work to make substantive policy changes to address these needs.

In 2008, The National Center for Transgender Equality and the National Gay and Lesbian Task Force formed a ground-breaking research partnership to address this problem, launching the first comprehensive national transgender discrimination study. The data collected brings into clear focus the pervasiveness and overwhelming collective weight of discrimination that transgender and gender non-conforming people endure.

This report provides information on discrimination in every major area of life — including housing, employment, health and health care, education, public accommodation, family life, criminal justice and government identity documents. In virtually every setting, the data underscores the urgent need for policymakers and community leaders to change their business-as-usual approach and confront the devastating consequences of anti-transgender bias.

Sixty-three percent (63%) of our participants experienced a serious act of discrimination — events that would have a major impact on a person’s quality of life and ability to sustain themselves financially or emotionally. Participants reported that they had faced:

- Loss of job due to bias
- Eviction due to bias
- School bullying/harassment so bad the respondent had to drop out
- Teacher bullying
- Physical assault due to bias
- Sexual assault due to bias
- Homelessness because of gender identity/expression
- Loss of relationship with partner or children due to gender identity/expression
- Denial of medical service due to bias
- Incarceration due to gender identity/expression

Each of these can be devastating and have long-term consequences, as we will see in this report.

Almost a quarter (23%) of our respondents experienced a catastrophic level of discrimination, having been impacted by at least three of the above major life-disrupting events due to bias. Imagine losing your home, your job and your children, or being bullied by a teacher, incarcerated because of your gender identity and sexually assaulted. These compounding acts of discrimination — due to the prejudice of others or unjust laws — exponentially increase the difficulty of bouncing back and re-establishing a stable economic and home life.
While these statistics are often devastating, it is our hope that they motivate people to take action, rather than simply despair. The gravity of these findings compels each of us to confront anti-transgender bias in our communities and rebuild a foundation of health, social and economic security for transgender and gender non-conforming people in our communities. We do believe that the situation is improving and look forward to future studies that will enable us to look at discrimination over time.

All of us — whether we are human resources professionals, nurses or doctors, police officers or judges, insurance company managers, landlords or restaurant managers, clerks or EMTs, teachers or principals, friends or community advocates — must take responsibility for the pervasive civil rights violations and callous disregard for basic humanity recorded and analyzed here. It is through the choices that each of us make, and the institutional policies we reject or uphold that either recreate or confront the outrageous discrimination study participants endure.

We present our findings, having just scratched the surface of this extensive data source. We encourage advocates and researchers to consider our findings with an eye toward much-needed future research. We expect these data to answer many questions about the lives of transgender people and the needs of this community and to provoke additional inquiry in years to come. To this end, we plan to provide the data set to additional researchers to perform deeper or different analysis.

“I was kicked out of my house and out of college when I was 18. I became a street hooker, thief, drug abuser, and drug dealer. When I reflect back, it’s a miracle that I survived. I had so many close calls. I could have been murdered, committed suicide, contracted AIDS, or fatally overdosed.”

Roadmap for this Report

Immediately after this chapter is Methodology, then we provide chapters based on major areas of life:

- Education
- Employment
- Health
- Family Life
- Housing and Homelessness
- Public Accommodations
- Identity Documents
- Police and Incarceration

Following these, we have shorter sections on two subjects: the particular experiences of cross-dressers and the policy priorities as defined by our respondents. We end with a Conclusion chapter.

There are three Appendices: Appendix A is a glossary of terms used in this report, Appendix B contains recommendations for future researchers who seek to do similar studies or ask similar questions of respondents, and Appendix C is the original survey instrument (paper version). We plan to provide the dataset to additional researchers to perform deeper or different analysis.
METHODOLOGY

The National Transgender Discrimination Survey is the most extensive survey of transgender discrimination ever undertaken. Over eight months, a team of community-based advocates, transgender leaders, researchers, lawyers and LGBT policy experts came together to create an original survey instrument. In the end, over 7,500 people responded to the 70-question survey. Over four months, our research team fielded its 70-question online survey through direct contacts with more than 800 transgender-led or transgender-serving community-based organizations in the U.S. We also contacted possible participants through 150 active online community listservs. The vast majority of respondents took the survey online, through a URL established at Pennsylvania State University. Additionally, we distributed 2,000 paper surveys to organizations serving hard-to-reach populations — including rural, homeless, and low-income transgender and gender non-conforming people, conducting phone follow-up for three months. With only $3,000 in funding for outreach provided by the Network for LGBT Health Equity, formerly the Network for LGBT Tobacco Control, we decided to pay stipends to workers in homeless shelters, legal aid clinics, mobile health clinics and other service settings to host “survey parties” to encourage respondents whose economic vulnerability, housing insecurity, or literacy level might pose particular barriers to participation. This effort resulted in the inclusion of approximately 500 paper surveys in the final sample.

Both the paper and online surveys were available in both English and Spanish. For additional information about the questionnaire itself, please see the Survey Instrument chapter.

The final study sample includes 6,456 valid respondents from all 50 states, the District of Columbia, Puerto Rico, Guam and the U.S. Virgin Islands. Our geographic distribution generally mirrors that of the general U.S. population. For more information, see the tables at the end of this chapter or the Portrait chapter.

Our Respondents

At the outset, we had to determine if the population we sought for the survey was transgender people only, or transgender and gender non-conforming people. We ultimately chose to include both.

Both of our organizations define “transgender” broadly to include those who transition from one gender to another (transsexuals), and those who may not, including genderqueer people, cross-dressers, the androgynous, and those whose gender non-conformity is a part of their identity. Because the term “transgender” is understood in various ways that may or may not include these groups of people, we chose to use broader gender non-conforming language to ensure broad participation in the survey.

Furthermore, gender non-conforming people, especially those who are also lesbian, gay or bisexual, found themselves at the heart of the debate over the inclusion of transgender people and “gender identity” in the Employment Non-Discrimination Act in 2007. Information about their experiences of discrimination could better shape debates like these and shed light on the relationship between gender identity/expression and discrimination.

Consequently, we decided to invite the broader range of people to respond to the survey, and then, during cleaning, eliminate those who were neither transgender nor gender non-conforming; this process is described further in the “Cleaning the Data” section.

In the Portrait chapter, and in our discussion of Questions 3 and 4 in Appendix B, we describe more about the results of the choice to survey both transgender and gender non-conforming people (75% of our sample fell into the transgender category), as well as how we developed the categories of “transgender” and “gender non-conforming.” Throughout this report, we attempted to give both transgender and gender non-conforming results separately so that those who are interested in one of the groups could use more specific data.
Developing the Survey Instrument

Over eight months, a team of highly trained social science and health researchers, grassroots and national transgender rights advocates, expert lawyers, statisticians, and LGBT movement leaders worked together to craft this questionnaire. The mix of trained researchers, movement advocates and end-users at the forefront of policy change was powerful.

We based survey questions — their inclusion, their framing, relevant terms, and literacy level — on the experiences of transgender and gender non-conforming people in the room, and others in our lives, our families and our communities. By mining the stories of discrimination we had already encountered as advocates, researchers, family members and grassroots organizers, we helped design an instrument that was relevant and user-friendly, and ultimately yielded the largest sample of transgender experience ever gathered.

There were a few places where wording of questions could have been improved, which we realized during the data analysis phase of this project. Please see Appendix B, Survey Instrument—Issues and Analysis, for guidance for future researchers who seek to inquire about similar topics.

Length

The survey contained 70 questions, although often a single “question” was in reality a combination of many questions (for example, Question 4 asks for responses to 15 different terms). Reports from the field varied widely about the time it took to complete the survey. Some reported taking the survey in 20 minutes on a personal computer; while others who accessed the survey through health or homeless services settings and took it with the assistance of outreach workers often took an hour or longer. Before the survey data collection was started, some experts expressed concern that respondents who had a high school diploma or less would be unable to complete such a lengthy questionnaire, but our final sample included 806 respondents at that educational level.

The team believes that the period in which we fielded the survey — about a year after the 2007 removal of gender identity from proposed federal legislation that would have prohibited discrimination based on sexual orientation in the workplace — was a factor in the depth and breadth of our sample. This was a historic moment when gender non-conforming and transgender people felt a particular urgency to tell their stories, and to have their experiences accounted for in the national conversation on workplace discrimination and employment.

Many questions we wanted to ask were deleted in the end so that we could keep the survey at 70 questions. We understood length to be a risk. We were hopeful that our two national organizations maintained a level of credibility in the community that would generate a strong response and that our affiliation with an academic institution, Pennsylvania State University, would also boost completion rates.

Distribution of Online and Paper Surveys

Before starting survey field work, we developed a list of about 800 active, transgender-specific or trans-related organizations and about 150 listserves in the United States. We attempted to reach every one by phone or e-mail, asking the organizations to e-mail their constituents or members directly with the URL for the questionnaire upon release and to run articles and free ads about the survey in their newsletters.

During our first two weeks of field work, study team members called hundreds of colleagues in LGBT organizations to ask for their help in spreading the word about the survey, and encouraging appropriate contacts to take the survey. We made a sustained effort to focus on LGBT people of color, rural and homeless/health service organizations so that our study would not neglect the respondents most often left out of critical research on our communities.

During our six-month data gathering effort, we dedicated a half-time staff person to do direct outreach to rural-focused organizations and listserves and those serving transgender people who access community resources via housing, health and legal programs. In some cases, volunteers, some of whom were given a modest stipend, acted as survey assistants at clinics or small “survey parties” through local programs, delivering and collecting paper surveys. We did not use incentives for respondents to complete the survey, although food was served at some group gatherings.

Our final sample consisted of approximately 6,000 online surveys and 500 paper surveys. More research or analysis would need to be done on the sample to determine whether we may have avoided the typical online bias by collecting paper questionnaires in addition to online data collection.

While we did our best to make the sample as representative as possible of transgender and gender non-conforming people in the U.S., it is not appropriate to generalize the findings in this study to all transgender and gender non-conforming people because it is not a random sample. A truly random sample of transgender
and gender non-conforming people is not currently possible, as government actors that have the resources for random sampling have failed to include questions on transgender identity in their population-based research.

Language and Translation

We attempted to make the language of the survey questionnaire accessible to as many participants as possible by maintaining an appropriately accessible literacy level without compromising the meaning of our questions. For example, we often omitted medical terminology that is not commonly understood while putting technical terms in parentheses for those who were familiar with them.

Often, we also had to choose between words that were clearer versus those that matched the sensitivities of the various communities the survey was intended to speak to. For example, we avoided using the terms “illegal,” “criminal,” and “prostitution” in Question 29 because of implicit value judgments in those terms. Instead we opted for “street economy” and “sex work,” which may have reassured some respondents but puzzled others. We found striking the right balance on language use to be a challenge.

Trained volunteers, including a company providing pro bono services, translated the survey into Spanish; we did not have funding to translate into additional languages. Gendered terms posed a major challenge since they are often linguistically and culturally specific and don’t always translate easily or precisely.

Hosting and Institutional Review

The questionnaire was hosted online by Pennsylvania State University through our partnership with Professor Susan (Sue) Rankin. The technological aspects of administering the online survey were handled by Pennsylvania State University IT professionals and her graduate students, who did an excellent job programming and safeguarding our data. Paper surveys were hand-entered into the system after the online survey closed.

It was important to us that our data go through a university-based Institutional Review Board (IRB) process, which ensures confidentiality and humane treatment of survey participants, so that our data could be published in and cited in peer-reviewed journals. Although this did add extra steps and time to our process, we believe it was well worth it.

Going through institutional review also required that we start the questionnaire with an instruction sheet that told participants their rights and recourses as participants, as well as a variety of other information. The language in the instruction sheet met Pennsylvania State’s standards for IRB instructions and was at a higher literacy level than the remainder of the survey. Accordingly, we worried that this would prove to be an intimidating first hurdle for some respondents. That instruction sheet is available in full in Appendix C: Survey Instrument.

Cleaning the Data

The next step was to clean the data, which is the process of eliminating those questionnaires that did not belong in the sample, as well as recoding written responses into categories when appropriate.

First, we eliminated respondents whose answers indicated that they were not taking the survey in earnest or were answering questions illogically, such as by strongly agreeing with each term in Question 4.

Second, we eliminated from our data set those respondents who indicated through their answers to Questions 1-4 that they were not actually transgender or gender non-conforming. There were a small group of people who were eliminated according to the following rubric: If they were born as one gender (Question 2), and still identified as that gender today (Question 3), we looked to see if they identified with the terms in Question 4. If they did not identify with these terms and reported that people did not know they were gender non-conforming (Question 5) and they did not tell people (Question 6), we removed them from the sample.

Third, throughout the survey there were open-ended questions, often “other, please specify ________,” to which respondents were given the opportunity to write their own answer. Part of our cleaning process involved examining these written responses. In some instances we were able to place more specific responses into the listed answer choices.

Fourth, we dealt with incompletes, duplicates, and those that did not consent. There were 31 duplicates that we removed from the sample. We removed records if the respondent stopped before answering Question 5, and we removed those who did not consent.

Taken together, our cleaning process reduced our sample size from an initial set of 7,521 respondents to 6,456 respondents.
Data Analysis and Presentation of Findings

After being cleaned, these data were analyzed to tabulate the sample’s responses to each question presented in the survey instrument. Answers to individual survey questions were then broken down by various demographic characteristics to explore differences that may exist in the experiences of survey respondents based on such factors as race, income, gender and educational attainment. Further analysis was completed to see how some subgroups differed based on their answers to non-demographic questions, such as questions about drug use, suicide attempts and HIV status.

Not all respondents answered each question presented in the survey, either because they skipped the question or because the question did not apply to them. Tabulations of data were completed for those who completed the question being analyzed, with the further limitation that generally only those respondents for whom the question was applicable were included in the tabulation. For instance, when analyzing respondents’ experiences while in jail or prison, the analysis was limited to those who answered the questions and also reported they had been sent to jail or prison.

Our findings are generally presented in the form of percentages, with frequencies presented where relevant. Throughout this report, we have rounded these percentages to whole numbers. We did not round HIV rates, which are provided in two decimals for more exact comparisons with existing research on the general population, and did not round in a few other places where greater precision was necessary due to small size.

When the respondents were segmented, occasionally the sample size became either too small to report on or too small for reliable analysis. When the $n$ is under 15, we do not report the data and when the $n$ is over 15 but under 30, we report the data enclosed in parentheses and make a note of it.

General population data are provided in the report as a way to roughly gauge how our sample differs from the U.S. population in terms of demographics and a variety of outcomes our survey sought to measure.

We did not employ the use of statistical testing to establish the statistical significance of the differences we found between various respondent subsets or between our sample and the general population. Though our sample was not randomly selected, future researchers may wish to conduct tests with this sample as a way to crudely measure the statistical significance of differences and relationships among subsets in the sample.

Throughout this report, we occasionally use terms such as “correlate,” “significant,” and “compare” that trained researchers might interpret to mean that we ran statistical tests; we did not, as explained above, and are using these terms in the way that a lay person uses such terminology.

Throughout the report, we include quotes from respondents who wrote about their experiences of acceptance and discrimination in response to an open-ended question. We have edited these responses for grammar, spelling, brevity, and clarity, as well as to preserve their confidentiality.
Demographic Composition of the Sample

(Some readers may be more interested in these data as it is presented in the next chapter:
A Portrait of Transgender and Gender Non-Conforming People.)

<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1. Identify as Transgender</td>
<td>Yes</td>
<td>6436</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>6436</td>
<td>100</td>
</tr>
<tr>
<td>Q2. Sex Assigned at Birth</td>
<td>Male</td>
<td>3870</td>
<td>60</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>2566</td>
<td>40</td>
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<tr>
<td></td>
<td>Total</td>
<td>6436</td>
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<tr>
<td>Q3. Primary Gender Identity Today</td>
<td>Male/Man</td>
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<tr>
<td></td>
<td>Female/Woman</td>
<td>2608</td>
<td>41</td>
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<tr>
<td></td>
<td>Part time as one gender,</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>part time as another</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>A gender not listed here,</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>please specify</td>
<td>864</td>
<td>13</td>
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<tr>
<td></td>
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<td>6434</td>
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<tr>
<td>Q4. Identify with the Word Transgender</td>
<td>Not at all</td>
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</tr>
<tr>
<td></td>
<td>Somewhat</td>
<td>1601</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Strongly</td>
<td>4039</td>
<td>65</td>
</tr>
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<td></td>
<td>Total</td>
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<tr>
<td>Q10. Region</td>
<td>New England</td>
<td>540</td>
<td>9</td>
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<tr>
<td>(see Portrait chapter for the composition of</td>
<td>Mid-Atlantic</td>
<td>1314</td>
<td>21</td>
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<tr>
<td>the regions)</td>
<td>South</td>
<td>1120</td>
<td>18</td>
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<tr>
<td></td>
<td>Mid-West</td>
<td>1292</td>
<td>21</td>
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<tr>
<td></td>
<td>West (Not California)</td>
<td>1035</td>
<td>17</td>
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<tr>
<td></td>
<td>California</td>
<td>906</td>
<td>15</td>
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<td></td>
<td>Total</td>
<td>6207</td>
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<td>Q47. Disability</td>
<td>Yes</td>
<td>1972</td>
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<td></td>
<td>No</td>
<td>4401</td>
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<td></td>
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<tr>
<td>Q49. HIV Status</td>
<td>HIV negative</td>
<td>5667</td>
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<tr>
<td></td>
<td>HIV positive</td>
<td>168</td>
<td>3</td>
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<tr>
<td></td>
<td>Don’t know</td>
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<td></td>
<td>Total</td>
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<td>%</td>
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<tr>
<td>-----------------------------------</td>
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</tr>
<tr>
<td>Q11. Race (Multiple Answers Permitted)</td>
<td>White</td>
<td>5372</td>
<td>83</td>
</tr>
<tr>
<td></td>
<td>Latino/a</td>
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<td>6</td>
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<tr>
<td></td>
<td>Black</td>
<td>389</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>American Indian</td>
<td>368</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Asian</td>
<td>213</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Arab or Middle Eastern</td>
<td>45</td>
<td>1</td>
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<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>6404</strong></td>
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</table>

Multiple responses were permitted so % add to >100%

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<th>Question</th>
<th>Response</th>
<th>#</th>
<th>%</th>
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<tbody>
<tr>
<td>Q11. Race recoded</td>
<td>American Indian only</td>
<td>75</td>
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<tr>
<td></td>
<td>Asian only</td>
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<td>2</td>
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<tr>
<td></td>
<td>Black only</td>
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<td></td>
<td>Hispanic only</td>
<td>294</td>
<td>5</td>
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<tr>
<td></td>
<td>White only</td>
<td>4872</td>
<td>76</td>
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<td></td>
<td>Multiracial and other</td>
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<td></td>
<td><strong>Total</strong></td>
<td><strong>6404</strong></td>
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<th>Question</th>
<th>Response</th>
<th>#</th>
<th>%</th>
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</thead>
<tbody>
<tr>
<td>Q12. Education</td>
<td>Less than high school</td>
<td>53</td>
<td>1</td>
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<tr>
<td></td>
<td>Some high school</td>
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<td>3</td>
</tr>
<tr>
<td></td>
<td>High school graduate</td>
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<td>8</td>
</tr>
<tr>
<td></td>
<td>Some college &lt;1 year</td>
<td>506</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Technical school</td>
<td>310</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>&gt;1 years of college, no degree</td>
<td>1263</td>
<td>20</td>
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<tr>
<td></td>
<td>Associate degree</td>
<td>506</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Bachelor's degree</td>
<td>1745</td>
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<tr>
<td></td>
<td>Master's degree</td>
<td>859</td>
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<tr>
<td></td>
<td>Professional degree (e.g. MD, JD)</td>
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<tr>
<td></td>
<td>Doctorate degree</td>
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<th>Question</th>
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<th>#</th>
<th>%</th>
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<tbody>
<tr>
<td>Q38. Did You Ever Attend School as a Trans or GNC Person</td>
<td>Yes</td>
<td>3114</td>
<td>49</td>
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<td></td>
<td>No</td>
<td>3262</td>
<td>51</td>
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<th>Question</th>
<th>Response</th>
<th>#</th>
<th>%</th>
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</thead>
<tbody>
<tr>
<td>Q25. Work Status</td>
<td>Full-time</td>
<td>2970</td>
<td>46</td>
</tr>
<tr>
<td></td>
<td>Part-time</td>
<td>1012</td>
<td>16</td>
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<tr>
<td></td>
<td>Multiple Jobs</td>
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<tr>
<td></td>
<td>Self-employed/Owner</td>
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<td>8</td>
</tr>
<tr>
<td></td>
<td>Self-employed/ Contractor</td>
<td>282</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Unemployed/Looking</td>
<td>700</td>
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</tr>
<tr>
<td></td>
<td>Unemployed/Not looking</td>
<td>210</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Disability</td>
<td>502</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Student</td>
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<td>20</td>
</tr>
<tr>
<td></td>
<td>Retired</td>
<td>450</td>
<td>7</td>
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<tr>
<td></td>
<td>Homemaker</td>
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<tr>
<td></td>
<td>Other, specify</td>
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<td>7</td>
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<td></td>
<td><strong>Total</strong></td>
<td><strong>6404</strong></td>
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Multiple responses were permitted so % add to >100%
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Q13. Household Income</strong></td>
<td>Less than $10,000</td>
<td>944</td>
<td>15</td>
</tr>
<tr>
<td></td>
<td>$10,000 to $19,999</td>
<td>754</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>$20,000 to $29,999</td>
<td>731</td>
<td>12</td>
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<tr>
<td></td>
<td>$30,000 to $39,999</td>
<td>712</td>
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<td>$40,000 to $49,999</td>
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<td>9</td>
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<tr>
<td></td>
<td>$50,000 to $59,999</td>
<td>485</td>
<td>8</td>
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<tr>
<td></td>
<td>$60,000 to $69,999</td>
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<td></td>
<td>$70,000 to $79,999</td>
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<td>$80,000 to $89,999</td>
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<td>$90,000 to $99,999</td>
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<td>$100K to $149,999</td>
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<td>$150K to $199,999</td>
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<td></td>
<td>$200K to $250,000</td>
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<td></td>
<td>More than $250,000</td>
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<td></td>
<td><strong>Total</strong></td>
<td><strong>6258</strong></td>
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<tr>
<td><strong>Q16. Relationship Status</strong></td>
<td>Single</td>
<td>2286</td>
<td>36</td>
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<tr>
<td></td>
<td>Partnered</td>
<td>1706</td>
<td>27</td>
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<tr>
<td></td>
<td>Civil union</td>
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<td>1</td>
</tr>
<tr>
<td></td>
<td>Married</td>
<td>1394</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>Separated</td>
<td>185</td>
<td>3</td>
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<tr>
<td></td>
<td>Divorced</td>
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<td>11</td>
</tr>
<tr>
<td></td>
<td>Widowed</td>
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<td>1</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>6427</strong></td>
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<tr>
<td><strong>Q63. Citizenship</strong></td>
<td>U.S. citizen</td>
<td>6106</td>
<td>96</td>
</tr>
<tr>
<td></td>
<td>Documented non-citizen</td>
<td>156</td>
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</tr>
<tr>
<td></td>
<td>Undocumented non-citizen</td>
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<td><strong>Total</strong></td>
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<tr>
<td><strong>Q64. Voter Registration</strong></td>
<td>Registered</td>
<td>5695</td>
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<tr>
<td></td>
<td>Not Registered</td>
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<tr>
<td><strong>Q65. Armed Service</strong></td>
<td>Yes</td>
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<td></td>
<td>No</td>
<td>4983</td>
<td>78</td>
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<tr>
<td></td>
<td>Denied Enlistment</td>
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<td></td>
<td><strong>Total</strong></td>
<td><strong>6377</strong></td>
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</tr>
<tr>
<td><strong>Q66. Sexual Orientation</strong></td>
<td>Gay/Lesbian/Same-gender</td>
<td>1326</td>
<td>21</td>
</tr>
<tr>
<td></td>
<td>Bisexual</td>
<td>1473</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>Queer</td>
<td>1270</td>
<td>20</td>
</tr>
<tr>
<td></td>
<td>Heterosexual</td>
<td>1341</td>
<td>21</td>
</tr>
<tr>
<td></td>
<td>Asexual</td>
<td>260</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Other, specify</td>
<td>698</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>6368</strong></td>
<td>100</td>
</tr>
</tbody>
</table>
In general, we suggest that future researchers not replicate the length of this survey, unless they have the resources to process the results and are sure that respondents will complete the questionnaire.

According to Don Dillman, “The lack of Internet service for 29% of the population and high-speed service for 53% of the population is complicated by differences between those who have and do not have these services. Non-Whites, people 65+ years old, people with lower incomes, and those with less education have lower internet access rates than their counterparts, and, therefore, are more likely to be left out of Internet surveys.” Don Dillman, Jolene Smyth, and Leah Melani Christian, Internet, Mail, and Mixed-Mode Surveys: The Tailored Design Method (New York: Wiley, 2008). Therefore, online samples often have higher educational attainment and higher household income. Our sample had considerably lower household income, which would lead one to speculate that we have avoided this bias. However, our educational attainment is much higher than the general population, which could lead to the opposite conclusion. Even more interestingly, one would expect the sample to demonstrate higher levels than the general population of being in school between 18-24, if it were privileged, yet, as discussed in the Education chapter later, our sample is in school less than the general population in that age range. For more information about online bias, see David Solomon, “Conducting web-based surveys,” Practical Assessment, Research & Evaluation, 7 no.19, (2001): http://PAREonline.net/getvn.asp?v=7&n=19. See also Lee Rainie et al., “The Ever-Shifting Internet Population: A new look at Internet access and the digital divide,” Pew Internet & American Life Project (2003): http://www.pewinternet.org/Reports/2003/The-EverShifting-Internet-Population-A-new-look-at-Internet-access-and-the-digital-divide/02-Who-is-not-online/03-Several-demographic-factors-are-strong-predictors-of-Internet-use.aspx.

We would recommend that future studies budget funding for translation. We also recommend working with members of the transgender community who speak the language you are translating to be sure that the terms used are current and appropriate.

We urge other researchers to follow the IRB process to continue building peer-reviewed research and articles that document the overwhelming problems of discrimination against transgender and gender non-conforming people. However, the additional time and expense involved may make institutional review impractical for some community-based surveys that are not intended for publication in peer-reviewed academic or research journals.

In every case where writing in answers was an option, coding and tabulating the data was extremely time-consuming. For organizations conducting a survey such as this with fewer resources to process results, it may be advantageous to avoid or limit this type of question.
A PORTRAIT OF TRANSGENDER AND GENDER NON-CONFORMING PEOPLE

Our sample provides a new and complex look at transgender and gender non-conforming people and the ways they define themselves. In this chapter, we will explore information about who responded to our survey and present some of the more detailed findings about gender identity and expression. It is our hope that these additional data about our respondents will provide a fuller picture of their lives.

Transgender and gender non-conforming people form a diverse group and, while they shared many common experiences that are outlined in this report, our participants also came from many demographic and sociographic groups. We will begin by exploring some broader demographic characteristics and then focus more specifically on the concepts of gender, gender identity and sexual orientation.

Race

Respondents were given the following options:

- White
- Black or African American
- American Indian or Alaska Native (enrolled or principal tribe)
- Hispanic or Latino/a
- Asian or Pacific Islander
- Arab or Middle Eastern
- Multiracial or mixed race

Throughout the report, when we report data on race, those who checked more than one racial identity are included within the multiracial category. This includes all respondents who identified as Arab/Middle Eastern because all Arab/Middle Eastern respondents in this study also selected a second racial identity option. Accordingly, reports about race, other than about the multiracial category, provide information on those who chose that racial/ethnic identity alone.

Our sample size of American Indian/Alaska Native respondents was the smallest of the final categories. While this group was small, we did include American Indian/Alaska Native separately in all data analyses that involved race.
**Age**

The sample included participants from 18 to 89 years of age. Our sample has a larger percentage of young people than the U.S. population as a whole. Further research is needed to know whether the difference in age between our respondents and the population as a whole is a result of our research methods or reflects differing understandings and social acceptance of gender identity/expression among different generations. We suspect that a combination of the two factors may have been involved. When more studies are undertaken of transgender and gender non-conforming experience, we will be better able to answer this question.

![Age of Respondents](chart)

**Location**

The sample included respondents from all 50 states, the District of Columbia, Puerto Rico, Guam and the U.S. Virgin Islands. Our geographic distribution approximately mirrors that of the general U.S. population. The regional breakdown we used is: New England (ME, NH, VT, MA, RI, CT), Mid-Atlantic (NY, NJ, DE, PA, MD, DC, VA, WV), South (NC, SC, GA, FL, AL, MS, LA, TX, OK, AR, TN, KY) Midwest (OH, MI, IN, IL, WI, MN, IA, MO, KS, NE, SD, ND), West (NM, AZ, CO, WY, UT, NV, MT, ID, WA, OR, AK, HI), California (CA).

![Respondents by Region](chart)
Household Income

Our respondents reported much lower household incomes than the population as a whole, with many living in dire poverty. Fifteen percent (15%) of our respondents reported making under $10,000/year, nearly four times the rate of this household income category for the general population. Twelve percent (12%) said they made between $10,000 and $20,000/year. Fourteen percent (14%) said they made $100,000/year or more, compared to 25% making $100,000/year or more for the general population.

Given that household income does vary between men and women in the United States, it is notable that the current gender of our participants did not impact their income much.

Additional analysis related to household income is contained in the Education and Employment chapters.

Employment Status

When asked about employment (with the option of selecting as many responses as were applicable), respondents noted the following:

Based on these responses, we determined that of all our respondents, 70% were currently employed, 11% were currently unemployed, and 19% were out of the workforce (generally as students, retirees, or homemakers).

When calculating the unemployment rate, the U.S. Department of Labor excludes those who are out of the workforce; applying the same standard to our sample provides a generally comparable unemployment rate of 14%. The weighted unemployment rate for the general population during the time the questionnaires were collected was 7%.

SEX WORK AND WORK IN THE UNDERGROUND ECONOMY

It has been well documented that economic circumstances have caused many transgender people to enter the underground economy for survival, as sex workers or by selling drugs. Yet, despite the stereotypes that a majority do so, the vast majority (84%) of participants have never done so. Sixteen percent (16%) of respondents said they had engaged in sex work, drug sales, or other underground activities for income.

Sex workers made up the largest portion of those who had worked in the underground economy with 11% of all respondents reporting having done sex work for income. Eight percent (8%) engaged in drug sales.

In comparison, the Prostitutes’ Education Network estimates that 1% of women in the U.S. have engaged in sex work.
Educational Attainment

In terms of educational attainment: 4% reported having no high school diploma, 8% have a high school diploma, 40% have attended college without receiving a four-year degree, 27% have attained a college degree, and 20% have gone to graduate school or received a professional degree. In contrast to the other measures of economic security, health, and other indicators we examined in the study, where our respondents often fare much worse than the general population, our sample has a higher level of educational attainment than the general population. Study findings of higher levels of poverty, incarceration, homelessness, and poor health outcomes among respondents speak to the power of anti-transgender bias to “trump” educational attainment. The Education chapter provides additional breakdown and analysis of these figures.

Disability

Thirty percent (30%) of respondents reported having a physical disability or mental health condition that substantially affects a major life activity. By contrast, the overall U.S. population reports a disability at a rate of 20%. However, the way we asked the question about disability may differ from the definition used by the Centers for Disease Control.

Citizenship

Ninety-six percent (96%) of our sample respondents were U.S. citizens. Two percent (2%) were undocumented non-citizens. Two percent (2%) were documented non-citizens.

In the U.S., generally 7.1% of the population are non-citizens and among those, generally 45% are undocumented.
Gender Identity/Expression

IDENTITY

As with any community, language around identity in transgender communities is constantly changing. Class, race, culture, region, education and age all shape the language respondents use to describe their gender identity and expression, as well as individual preferences. We offered participants a variety of choices that we understood to be commonly used, and they chose “Strongly,” “Somewhat,” and “Not at all” for each.

<table>
<thead>
<tr>
<th>Term</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transgender</td>
<td>55%</td>
</tr>
<tr>
<td>MTF (male to female)</td>
<td>46%</td>
</tr>
<tr>
<td>Transsexual</td>
<td>46%</td>
</tr>
<tr>
<td>Gender non-conforming or</td>
<td>32%</td>
</tr>
<tr>
<td>FTM (female to male)</td>
<td>26%</td>
</tr>
<tr>
<td>Genderqueer</td>
<td>22%</td>
</tr>
<tr>
<td>Two-spirit</td>
<td>15%</td>
</tr>
<tr>
<td>Cross-dresser</td>
<td>15%</td>
</tr>
<tr>
<td>Androgynous</td>
<td>14%</td>
</tr>
<tr>
<td>Third gender</td>
<td>10%</td>
</tr>
<tr>
<td>Feminine male</td>
<td>10%</td>
</tr>
<tr>
<td>Masculine female or butch</td>
<td>8%</td>
</tr>
<tr>
<td>Intersex</td>
<td>6%</td>
</tr>
<tr>
<td>Drag performer (King/Queen)</td>
<td>3%</td>
</tr>
<tr>
<td>AG or Aggressive</td>
<td>2%</td>
</tr>
<tr>
<td>Other</td>
<td>17%</td>
</tr>
</tbody>
</table>

Note: respondents could select all terms that applied so percentages do not add to 100%. Definitions of these terms are provided in Appendix A.

Over 500 respondents wrote in a range of additional gender identities including: “transdyke,” “mahuwahine,” “FTX,” “boi,” “questioning,” “stud,” “both-neither,” “princess” and “bender,” among others. This remarkable descriptive variety speaks to the dynamic, evolving diversity of gender expression within transgender and gender non-conforming communities.

analytic gender identity/expression categories

Gender identity and expression are complex and layered characteristics, with almost as many variations as there are individuals. However, for the purposes of this study, the researchers created aggregate categories presented here so that we might have useful “containers” in which to organize and analyze respondents’ experiences of anti-transgender bias and its impacts.

Based on the terms that people identified with, as well as their sex assigned at birth and current gender identity, we created several gender identity/expression categories that, though limited, provide a framework from which to analyze strengths, resiliencies and exposure to prejudice and abuse.

We identified two groups of transgender respondents: those who are male-to-female (MTF) and those who are female-to-male (FTM), also referred to as transgender women and transgender men respectively. These respondents generally identified strongly with the terms transgender, transsexual, MTF or FTM. Fully 75% of all respondents fell into one of the transgender categories, with 47% of the sample identifying as MTF and 28% as FTM. For more information on how we formed these categories, consult Appendix B: Survey Instrument — Issues and Analysis.

We also created a “gender non-conforming” category. Fourteen percent (14%) of the sample identified as gender non-conforming, which generally included those who strongly identified as genderqueer, two-spirit, and third gender, among others. Three percent (3%) of the sample self-reported identifying as gender non-conforming along a male-to-female spectrum of gender identity/expression and 9% of the sample described themselves as gender non-conforming along a female-to-male spectrum of gender identity/expression. Of the gender non-conforming people in the sample, therefore, 78% identify on the female-to-male spectrum, with 22% on the male-to-female spectrum.

Additionally, we created two cross-dresser categories, generally including those that identified strongly with the term cross-dresser. Eleven percent (11%) of our sample identified as male-to-female cross-dressers, while another 3% identified as female-to-male cross-dressers. The existence of those who are best described as female-to-male cross-dressers is notable. The experiences of cross-dressers, when remarkably different than that of the rest of the sample, are noted throughout this report. However, we also provided a separate chapter that provides results about male-born cross-dressers because of their unique experience.
Although both of our organizations firmly define “transgender” to include gender non-conforming people and cross-dressers, to better understand and report on the experiences of different types of transgender people, we needed these analytic categories. Therefore, in this report, when we refer to transgender respondents, we do not include cross-dressers and gender non-conforming respondents.

### Analytic Gender Identity/Expression Categories

- **MTF Transgender** (47%)
- **FTM Transgender** (28%)
- **Cross-dresser female to male** (3%)
- **Cross-dresser, male-to-female** (11%)
- **Male-assigned-at-birth Gender Non-Conforming** (9%)
- **Female-assigned-at-birth Gender Non-Conforming** (3%)

### Assignment at Birth and Current Identity

Sixty percent (60%) of respondents were assigned male at birth, while 40% were assigned female. We gave respondents a choice of indicating whether their current gender identity was male, female or if they lived a part-time or gender non-conforming identity. Twenty-nine percent (29%) of respondents said their current gender identity was male. Forty-two percent (42%) said they were currently female. Twenty-nine percent (29%) said they identified as something other than male or female, or that they identified/lived part time as one gender and part-time as another.

Out of those who are transgender, 63% were assigned male at birth and 37% were assigned female. Out of those who are gender non-conforming, 22% were assigned male and 78% were assigned female.

### Gender Identity/Expression and Current Age

The most dramatic demographic differences in gender identity/expression were among age groups. Our older respondents are much more likely to have been assigned male at birth and to be living as women, while younger respondents are more likely to have been assigned female at birth and living as male. In addition, gender non-conforming respondents were also in the younger age categories.
Transition

Transition is a process that some — but certainly not all — transgender and gender non-conforming people undertake to live in a gender different from the one they were assigned at birth. For some, the journey traveled from birth sex to current gender may involve primarily a social change but no medical component; for others, medical procedures are an essential step toward embodying their gender.

For many gender non-conforming people, transition as a framework has no meaning in expressing their gender — there may be no transition process at all, but rather a recognition of a gender identity that defies convention or conventional categories. For yet other gender non-conforming people, transition is a meaningful concept that applies to their journey from birth sex to their current identity, which may not be male or female. Respondents in our sample were asked questions that helped us identify whether they had embarked on a transition process or if they desired to do so in the future. This was important to us and, hopefully, to future researchers in considering the role of transition in (among other things) transgender health, economic security, experience of bias and family life.

FULL-TIME STATUS AND TRANSITION

Fifty-five percent (55%) of our sample reported that they lived full-time in a gender different from their birth sex. We considered a respondent to have transitioned if that person reported living full time in a different gender than that assigned at birth.

Twenty-seven percent (27%) said they were not living full-time in their desired gender yet but wanted to someday. Eighteen percent (18%) said they did not want to live full time in a gender other than that assigned at birth.

MEDICAL TRANSITION

Two terms that we used to define the medical aspects of transition are “medical transition” and “surgical transition.” Medical transition includes respondents who have had any type of surgery or hormonal treatment. Surgical transition identifies only those respondents who have had some type of transition-related surgical procedure.

Sixty-one percent (61%) of our respondents reported having medically transitioned, while 33% said that they had surgically transitioned. The percentage of respondents who we label “medically transitioned” is higher than the percent of those who we consider “transitioned” because a sizable percent of those who have had hormone therapy are not yet living full-time. Detailed information about specific treatments and procedures is contained in the Health chapter.

It is important to keep in mind that almost all transition-related care is paid for out of pocket, without any insurance reimbursement. Thus, appropriate medical treatment is highly dependent on an individual’s ability to pay for it. The desire to medically transition and the ability to afford to do so are entirely different and should not be conflated or confused.

AGE OF TRANSITION

For those who had transitioned, we calculated the age that they transitioned (when they began to live full time in a gender different than their sex at birth). Most transitioned between the ages of 18 and 44.

Generally, transgender men in our sample transitioned at earlier ages than transgender women.
Gender Identity and the Public Sphere

**VISUAL NON-CONFORMITY**

At the outset of our study, the research team hypothesized (based on anecdotal experience) that those respondents whom others visually identify as not conforming to society’s expectations of gender might be at higher risk for discrimination and violence. Thus, we determined whether respondents believed their gender presentation matched their gender identity by asking whether: “People can tell I’m transgender even if I don’t tell them.” The term we developed for the study participants who are perceived by strangers or in casual circumstances to be transgender or gender non-conforming is *visual non-conformers*. This is a similar to the concept of “passing,” a more colloquial term used by some to describe the same perception.

Throughout the report, we will note the significance of visual non-conformity as a risk factor in eliciting anti-transgender bias and its attendant social and economic burdens.

We also collapsed these categories further for our analysis. We also collapsed these categories further for our analysis.
Outness

Along with visual conformity, the research team wondered about “outness” in the lives of the respondents. Our question was: does being open that one is transgender or expressing gender non-conformity have any positive or protective effect (i.e. in the workplace, at the doctor’s office, or in social situations) or does it simply increase risk for discrimination? In LGBT communities, the process of coming out is widely seen as a path to self-empowerment and public understanding. A number of studies among lesbian, gay and bisexual people have shown positive effects of being out on social and economic outcomes. However, the specific impact of outness on transgender people has not been examined.

Multiple questions on levels of outness helped us establish two basic categories, “generally out” and “generally not out,” in order to ascertain whether outness has a positive or negative effect in the lives of transgender and gender non-conforming respondents.

Outness in specific contexts, such as the workplace, with family members, and in seeking medical care is reported on in the relevant chapters.

Sexuality and Relationships

Sexual Orientation

The sexual orientation of the sample demonstrates a diverse spectrum of sexual orientations among transgender and gender non-conforming people. Among respondents, 23% reported a lesbian or gay sexual orientation (or attraction to the same gender); 24% identified as bisexual; 23% reported a queer orientation; 23% reported a heterosexual or opposite-gender sexual orientation, 4% describe themselves as asexual and 2% wrote in other answers.

The wide distribution of responses speaks to the complexity of sexual orientation for those whose gender identity/expression may have changed over the course of their lives.

Those who assume all transgender people are straight after transition are as incorrect as those who assume them all to be gay, lesbian or bisexual.

The common assumption that gender identity and sexual orientation form the basis for two distinct communities obscures the reality, documented here, that the majority of transgender people — at least in our sample — are lesbian, gay, bisexual or queer-identified. While debate in the LGBT community often draws clear lines of demarcation between the LGB and the T, our findings suggest that there is considerable overlap.
Relationship Status

Our sample was split evenly among those who reported being currently in a relationship and those who reported being single, separated, divorced or widowed.

Thirty-six percent (36%) of survey respondents said they were single. Twenty-seven percent (27%) said they were partnered. Twenty-three percent (23%) indicated they were in a civil union or were married. Three percent (3%) said they were separated. Eleven percent (11%) said they were divorced. One percent (1%) said they were widowed. In the general population, 51% are married. Note that many respondents may not have the ability to legally marry depending on the gender of their partner.
Civic Participation

VOTER REGISTRATION

Our sample had high rates of voter registration. Eight-nine percent (89%) of respondents said they were registered to vote while 11% said they were not. The U.S. Census reports that in the 2008 election cycle, the closest Presidential election year to our survey, 71% of the voting-eligible population was registered to vote.19

MILITARY SERVICE

Our sample was very highly engaged in military service to the nation. Twenty percent (20%) of respondents said they are or had been a member of the armed forces. Seventy-eight percent (78%) said they had not, while 2% said they were denied entry. According to the American Community Survey for the same year as this survey, 10% of the adult United States population had served in the military.20

Endnotes

1 U.S. Census Bureau, “American Community Survey (ACS): 1-year Public Use Microdata Sample: 2009 (2010): http://factfinder.census.gov/home/en/acs_pums_2009_1yrhtml. The ACS has more age categories than our survey instrument; for the purposes of analysis, the ACS categories have been combined here to match our survey categories to enable comparisons and limited to the adult U.S. population (age 18 and over).


6 Note that in the report we use two definitions of “unemployed.” Here, we have approximated the definition the U.S. Department of Labor uses, in which “unemployed and stopped looking” are considered to be outside of the workforce, and thus not part of the equation when calculating the unemployment rate. However, when measuring discrimination and harassment against people who are “unemployed,” those who chose “unemployed and stopped looking” are included.


A relatively new Hawaiian term for transgender women of Hawaiian and Polynesian ancestry. *Mahu* denotes someone who is homosexual, intersex, or has a cross-gendered identity, while *wahine* means both woman and feminine.

FTX generally refers to females assigned at birth who no longer identify as female, but also not male.

The percentage of respondents whom we categorize as “medically transitioned” is higher than the percent of those who we consider “transitioned” because a sizable proportion of those who have had hormone therapy are not living full-time yet.

This perception is often based on a person’s physical features, the sound of their voice, mannerisms and other stereotypes of how men/women are supposed to appear and present.

“Always” and “most of the time” were categorized as visual conforming, “sometimes” and “occasionally” became somewhat visually conforming, and “never” became visual non-conforming.


EDUCATION

Education is a fundamental human right. It can expand our horizons, help us learn about ourselves and our world and build foundational skills for our working lives. In the United States, there is a strong connection between one’s level of educational attainment and income. In addition, individuals who have higher education levels are less likely to be dependent on public safety-net programs, to be incarcerated, or to experience extreme poverty. They are also more likely to have positive health outcomes, such as lower rates of smoking, and high rates of civic participation.¹

Unfortunately, not all students have the opportunity to pursue education in a safe environment. Our data shows that transgender and gender non-conforming people are currently unable to access equal educational opportunities because of harassment, discrimination and even violence. Our data also shows the way this discrimination impacts educational attainment, which in turn affects other outcomes such as income, incarceration, health and suicidality, over respondents’ life spans.

“People are suffering in my school, there are so many trans kids that just can’t come out because they are afraid.”

“I find these constant whispers, this constant staring, it terrifies me in the same way all the high school bullies did. When they followed me and screamed at me and threw my things around the room.”
KEY FINDINGS IN EDUCATION

What emerges clearly from the following data is that in education, as in other areas of life, survey participants faced high levels of harassment and violence. For participants in the study, this mistreatment is highly correlated with lower levels of educational attainment, lower income and a variety of other negative outcomes from homelessness to suicide.

• Those who expressed a transgender identity or gender non-conformity while in grades K-12 reported alarming rates of harassment (78%), physical assault (35%) and sexual violence (12%).

• The harassment was so severe that it led nearly one-sixth (15%) to leave school in grades K-12 or in higher education settings.

• Six percent (6%) of respondents were expelled in grades K-12 for their gender identity/expressions.

• Teachers and staff members, whose job in part includes ensuring student safety, were too often the perpetrators of harassment and violence in K-12. Thirty-one percent (31%) of the sample reported harassment by teachers or staff, 5% reported physical assault by teachers or staff and 3% reported sexual assault by teachers or staff.

• Negative experiences at school varied by gender and race. Students of color experienced higher rates of harassment and violence across the board. In terms of gender, MTF students reported higher rates of violence, while FTM and gender non-conforming students reported higher rates of harassment and bullying.

• Nineteen percent (19%) of respondents expressing a transgender identity or gender non-conformity in higher education reported being denied access to gender-appropriate housing. Five percent (5%) were denied campus housing altogether. Eleven percent (11%) lost or could not get financial aid or scholarships because of gender identity/expression.

• Despite mistreatment in school, respondents reported considerably higher rates of educational attainment than the general population, with 47% receiving a college or graduate degree, compared with only 27% of the general population. These high levels of achievement appear to be largely due to respondents returning to school later in life.

• Educational attainment did not provide respondents the protection against poverty that is common in the United States. At each level of educational attainment, our respondents had considerably lower incomes than the general population. Our sample was 4-5 times more likely to have a household income of less than $10,000/year at each educational category, including college graduates.

• Experiences of mistreatment in school correlated with lower income levels. Those who reported mistreatment in school were 50% less likely to earn $50,000/year than the general population.

• Those respondents who said they were physically assaulted at school due to gender identity/expression were twice as likely to have done sex work and other work in the underground economy and were 50% more likely to be incarcerated.

• For those who had to leave school due to harassment, nearly half (48%) reported having experienced homelessness.

• Those who were mistreated in school had higher rates of drug and alcohol abuse and smoking to cope with the mistreatment. For those who were physically assaulted or had to leave school due to harassment, rates of misuse of alcohol and drugs doubled.

• Respondents who reported having to leave school due to harassment were HIV-positive at a rate of 5.14%, more than eight times the HIV rate of the general population, 0.6%.

• More than half (51%) of respondents who were harassed, physically or sexually assaulted, or expelled because of their gender identity/expression reported having attempted suicide. Of those who were physically assaulted by teachers/staff or students, 64% reported having attempted suicide. And three-quarters (76%) of those who were assaulted by teachers or staff reported having attempted suicide.
Expressing a Transgender Identity or Gender Non-Conformity at School

We asked respondents a series of questions to explore their experience of the educational system when they “attended school as a transgender/gender non-conforming person.” Participants who answered these questions may have done so because they openly identified as transgender or gender non-conforming at school or in some other way expressed gender non-conformity. We did not ask whether they expressed a transgender identity or gender non-conforming presentation at school; so when we report results based on gender identity/expression, those who identify as transgender today may have expressed gender non-conformity at school but not a transgender identity.

Forty-nine percent (49%) of study participants reported engaging in educational pursuits as a transgender/gender non-conforming person at any level, with 29% reporting such attendance in K-12 educational settings, and 40% reporting a transgender or gender non-conforming presentation or identity in college, technical school or graduate school.

Among study participants, people of color were more likely to report expressing a transgender identity or gender non-conformity at school (Black 52%, Latino/a 57%, Asian 59%, American Indian 56%, Multiracial 63%), than whites (46%). Transgender and gender non-conforming people from New England (56%), California (57%), and other West Coast respondents (excluding CA) (53%), answered affirmatively more often than those from other regions of the country.

Notably, lower current household income was strongly associated with expressing a transgender identity or gender non-conformity in school. Those who most frequently expressed a transgender identity or gender non-conformity at school were those in the lowest income categories.

Respondents who identify as transgender today reported expressing transgender identities or gender non-conformity at school at a frequency of 50% while those who are gender non-conforming today reported 68%. Female-to-male respondents who identify as transgender today expressed transgender identities or gender non-conformity at school at particularly high rates (72%), compared to only 37% of male-to-female transgender respondents.

“I am afraid in school and I am slowly coming out. I came out to one of my teachers and I have never felt so good in my life.”

“Not being out at school has sheltered me from many of the challenges other transgender/gender non-conforming people face.”
Experiences of Harassment and Discrimination at School

Fully 61% of respondents who expressed a transgender identity or gender non-conformity at school reported considerable abuse because of their identity/expression. From elementary through graduate school, the survey showed high levels of harassment and bullying, physical assault, sexual assault, and expulsion from school.

The following data reports on the experiences of those respondents who expressed a transgender identity or gender non-conformity in school. Throughout, we report on negative experiences that respondents attributed to bias based on their transgender identity or gender non-conformity.

Fifty-nine percent (59%) of respondents said they were harassed or bullied in school at any level. Twenty-three percent (23%) said they were physically assaulted in school at any level. Eight percent (8%) were sexually assaulted at school at any level. Five percent (5%) were expelled at any level.

Race and geography compounded these effects. Multiracial respondents reported these abuses at 71%. Those living in the South reported 65%.

Respondents who identity as female-to-male transgender people today reported a higher rate of these abuses (65%) than male-to-female respondents (53%) and those who identify as gender non-conforming experienced abuse at a higher frequency (70%) than transgender-identified respondents (59%).

Respondents in all educational settings also reported denial of access to essential gender-appropriate facilities, such as bathrooms (26%) and housing (19%).

“I am not allowed to use the facilities I would like and have been denied requests for unisex bathrooms.”
K-12 Settings

Kindergarten through twelfth grade is a formative period, both educationally and socially. Alarmingly, our study showed both physical and emotional damage done to students in these grades. In this section, we first examine experiences of harassment and assault in general. Later we look more closely at harassment and assault committed by other students versus that committed by teachers. Within each of these sets, we will further subdivide our findings by 1) harassment and bullying, 2) physical assault, and 3) sexual assault. Throughout we will report on these experiences through the lenses of race, gender identity, and region.

MISTREATMENT IN K-12 SCHOOLS

Seventy-eight percent (78%) of the 1,876 respondents who expressed a transgender identity or gender non-conformity in grades K-12 reported harassment by students, teachers or staff. Many of the students experienced violence in the form of physical assault by either a peer or teacher/staff member (35%) or sexual assault (12%). Six percent (6%) reported expulsion due to their gender identity/expression.

Harassment

There were regional variations; students in the South noted higher levels of harassment and violence. Gender identity/expression was also clearly a factor; those who are transgender men today reported a considerably higher frequency of harassment and bullying than those who are transgender women today. Gender non-conforming students citing harassment at higher rates than their transgender counterparts.

Physical Assault

Multiracial students (45%) reported a higher incidence of physical assault than students of other races, and those in the South (40%) and West (40%) reported higher incidences than those in other regions. Male-to-female transgender participants experienced higher rates of assault (43%) than female-to-male respondents (34%).

Sexual Assault

American Indian (24%), multiracial (18%), Asian (17%) and Black (15%) respondents experienced sexual assault at higher rates than students of other races. MTF respondents experienced sexual assault more often (15%) than their FTM peers (10%).

“Shortly after I came out in high school, I began receiving threats in my locker. The usual sort of idiocy: ‘Damn dyke, no one wants you here’ or ‘Fucking fag.’”
EDUCATION

Harassment and Assault in K-12 Settings by Gender Identity/Expression

Harassment and Assault by Students in K-12 Settings by Race

Harassment and Assault by Students in K-12 Settings by Region

Harassment and Assault by Students in K-12 Settings by Gender Identity/Expression

HARASSMENT AND ASSAULT BY OTHER STUDENTS IN K-12

Examining harassment perpetrated by other students in the K-12 setting, respondents reported high levels of harassment and bullying (76%) and physical assault (35%).

Multiracial students reported the highest levels of harassment and bullying (83%) and physical assault (45%); American Indian students showed particularly high levels of sexual assault (21%). Respondents who are female-to-male transgender today reported higher rates of harassment and bullying (82%) while MTFs reported higher rates of physical (42%) and sexual assault (14%).

Harassment and Assault in K-12 Settings by Students

Harassment and Assault by Students in K-12 Settings by Gender Identity/Expression
HARASSMENT AND ASSAULT BY TEACHERS AND STAFF IN K-12

Mistreatment by teachers and staff in K-12 was also severe and had an even greater negative impact than mistreatment by peers. Respondents experienced considerable abuse, including harassment and bullying (31%), physical assault (5%) and sexual assault (3%) at the hands of teachers and staff. Students and their parents have every right to expect that teachers and staff will keep children safe, and not endanger the students through violence or harassmen. This trust was violated for far too many.

Latino/a and multiracial respondents reported the highest levels of harassment and bullying by their teachers, at 35% and 42% respectively. Multiracial and American Indian students experienced the highest levels of physical assault by teachers and staff at 6%. African American students experienced much higher rates of sexual assult by teachers (7%) relative to their peers of any race.

Respondents who today identify as female-to-male transgender people experienced teacher harassment and bullying by teachers and staff at higher rates (35%) than male-to-female transgender study participants (30%), but MTFs were at nearly double the risk for physical (7%) and sexual (3%) assault than their FTM peers (4% physical, 2% sexual).

“My sister has faced more outright discrimination for her support of me than I have. I transitioned in her last year in high school, the students verbally harassed her regularly to the point that she considered dropping out and just getting her GED. Teachers would also verbally harass her, saying things like “You will go to hell for your support of that abomination” and generally treating her unequally compared to other students.”

Harassment and Assault by Teachers/Staff in K-12 Settings by Race

Harassment and Assault by Teachers/Staff in K-12 Settings by Gender Identity/Expression

Harassment and Assault by Teachers/Staff in K-12 Settings by Region
College, Graduate School, Professional School and Technical School

In examining higher education specifically, those attending college, graduate school, professional school or technical school reported high rates of abuse by students, teachers and staff, including harassment and bullying (35%) as well as physical (5%) and sexual assault (3%). Two percent (2%) reported expulsion due to their gender identity/expression. At this level, the variation in frequency of harassment and assault did not vary considerably among racial groups, between regions, or by gender identity/expression.

Those students identifying as transgender or expressing gender non-conformity while attending college, graduate school or technical school also reported other barriers to full participation including denial of campus housing (5%) denial of gender-appropriate housing (20%), and deanship of appropriate bathroom facilities.

Educational Attainment

Despite the mistreatment that respondents have faced, they reported high levels of educational attainment. Almost half of our sample had a college degree (27%) or a graduate degree (20%); this compares to a combined total of 27% of the general population with these degrees. This above average educational attainment appears to be related to many older students returning to school after facing job loss or other difficulties; we explore this further in the section, “School Attendance by Age.”

“I have chosen to attend college online to avoid harassment.”

“I am in a Ph.D. program and have been censured by the faculty for coming out as a trans woman. I have been denied classes and otherwise harassed by some teachers. One male psychologist verbally attacked me in class and used transphobic and misogynist language.”

“I am not able to pass as male to the students who live in the same residence hall that I do because I have a female roommate, which automatically shows to them that I [was born] female as well.”
Female-to-male respondents reported higher levels of educational attainment than their male-to-female peers. Fifty-two percent (52%) of transgender men had college or graduate degrees compared to 41% of transgender women. Gender non-conforming people reported college and graduate degree attainment at 60%. In the general population, men and women have the same rate of holding a college or graduate degree.7

Black and Latino/a respondents were the least likely to obtain a high school diploma.

**FORCED TO LEAVE SCHOOL**

In addition to the previously discussed problem of expulsion due to bias, we found many study participants experienced other barriers to attendance so severe that they were also forced to leave school (in grades K-12 or in higher education). Fifteen percent (15%) reported having to leave school “because the harassment was so bad.” Fifteen percent (15%) reported leaving school due to financial reasons related to transition. Eleven percent (11%) said they lost or could not get financial aid or scholarships because they were transgender or gender non-conforming.

American Indian, Black, Latino/a and multiracial respondents reported these difficulties at higher rates than students of other races, and transgender women respondents experienced these barriers at higher rates than transgender men.
“Prior to being out at school, I received about $18,000 in financial aid, several awards, and scholarships. The year that I decided to be “out” on my applications, I received one scholarship out of 18 that I applied for despite having a 4.0 and an excellent application package.”

“I was kicked out of school by my principal because he hated who I was; I was also harassed by students and even called a slut by one of my Special Ed teachers because she didn’t like the way I dressed. I was sent to a correctional facility for boys because I used to act out when I was very young, not having the guidance I wish I had. There at the correctional facility, I was harassed, attacked, spit on, verbally abused by other youth and staff, and sexually abused.”

Because of these findings related to the percentage of people in school at different ages, we do not believe online bias is the only reason our sample has such high educational attainment figures. Had these attainment figures been due solely to online bias, we would have expected a higher rate of students in the 18-24 age category exceeding that (or at least matching that) of the general population. Thus, we believe that transgender people reported higher rates of formal education than the general population largely due to returning to school at later ages (ages 25 and above).

“Regarding employment status, I lost my job of 10 years as a result of transition. I was unemployed for several months, then underemployed in a temp job. Eventually, I returned to school to get an Associate’s degree in nursing which I paid for with home equity loans, and became a registered nurse.”

“I am an older re-entry student at a university in California. I was surprised and pleased to find that among my younger friends (who are typically college-aged), gender and sexuality seems almost to be a non-issue. This gives me great hope for the future.”

SCHOOL ATTENDANCE BY AGE

The age breakdown of those who reported that they were currently in school was very different than the general population. For 18-24 year olds in the general population, 45% were currently in school. However, in our sample, only 37% were in school. For older age categories, our respondents were in school at rates two to three times higher than the general population. For 25-44 year olds, 7% of the general population was in school, whereas 22% of our sample were in school. For 45-54 year olds, the general population figure was 2% compared to 5% of our respondents.

This pattern indicates that many transgender and gender non-conforming people are experiencing interruptions in their education compared to the general population. It also shows a pattern for some of returning to school later in life to finish or acquire diplomas or degrees, perhaps as an attempt to increase employment opportunities in the face of discrimination.
FINANCIAL BARRIERS TO EDUCATIONAL ATTAINMENT

As previously mentioned, 15% of the sample reported leaving school for financial reasons related to transition. Respondents who left school for financial reasons experienced lower levels of educational attainment overall. This is most notable in the percentage of respondents who reported their highest education level was some college. Sixty-one percent (61%) of those who had to leave school due to financial reasons related to transition started college but did not finish it. This contrasts with the rest of our sample (who did not leave school for financial reasons) for which 39% started but did not finish college. This is also reflected in the percentages of people who achieved college and graduate degrees. A combined 30% of people who left school for financial reasons ultimately received a college (19%) or graduate degree (11%) as opposed to a combined total of 49% of those who did not have to leave school for financial reasons.

We also found that mistreatment in school correlated with lower levels of educational attainment. Those who had to leave school due to harassment were less likely to graduate from high school, college or graduate school. Forty-nine percent (49%) of those who did not have to leave school due to harassment went on to receive a college or graduate degree, whereas 30% of those who did have to leave school achieved the same (either returning to school later or switching to a new school in order to graduate). Those who had to leave school due to harassment were twice as likely (9%) to not graduate from high school as opposed to those who did not (4%).

MISTREATMENT, EDUCATIONAL ATTAINMENT, AND INCOME

In our sample, mistreatment in school, educational attainment and present household income of our respondents were connected. We found that negative experiences in school were tied to income disparities later in life. Sixty-seven percent (67%) of those making under $10,000 per year at the time of the survey had been harassed, physically assaulted, sexually assaulted or expelled from school. Comparatively, a smaller number (55%) of those with high incomes, making $100,000 per year or more, experienced this mistreatment.

We also compared current income for those who reported no problems in school (either because they did not experience bias or because they did not express a transgender identity or gender non-conformity at school) with those who did experience mistreatment at school. Forty-six percent (46%) of those who reported no mistreatment at school reported making over $50,000/year at the time of the survey; whereas 30% of those who experienced mistreatment in school were in the same income range. Fifty-eight percent (58%) of the general population makes $50,000/year or more, meaning our respondents who were mistreated in school are about half as likely to be in that range than the general population.12
EDUCATIONAL ATTAINMENT AND INCOME COMPARED TO THE GENERAL POPULATION

Below we compare the income of our respondents to that of the general U.S. population at four levels of educational attainment: no high school diploma, only high school diploma, some college and college degree or higher.

Shockingly, our sample is 4-5 times more likely than the general population to have a household income of less than $10,000/year at each level. For example, 8% of those who achieved a bachelor’s degree or higher in our sample still made less than $10,000/year as compared to only 2% of the general population, and 42% of our respondents who did not have a high school diploma made less than $10,000/year as compared with 9% of the general population without a high school diploma.

Our respondents were 2-3 times less likely than the general population to be making $100,000/year or more at the same levels of educational attainment. For example, 5% of our respondents who had a high school diploma make $100,000/year or more as compared to 15% of the general population, and 20% of our respondents who had a college degree make $100,000 or more as compared to 46% of the general population.
Making the Connections: Experiences in School, Economic Security, and Health

In this section, we examine the connections between negative experiences in school and employment access, incarceration, homelessness and health outcomes.

MISTREATMENT IN SCHOOL AND ACCESS TO EMPLOYMENT

We found that being mistreated in school aligned with various negative outcomes later in life.

We found that those who were mistreated in school were more likely than others to report doing sex work or other work in the underground economy such as drug sales. For example, 32% of those who were physically assaulted at school also reported doing sex work or other work in the underground economy as compared to 14% of those who were not assaulted. Thirty-nine percent (39%) of those who had to leave school “because the harassment was so bad” reported doing sex work or other work in the underground economy.

Having to leave school because harassment was intolerable was also associated with unemployment. Nineteen percent (19%) of those who had to leave school because of harassment reported being unemployed as compared with 11% of those who did not.

We also found that being physically attacked in school was linked to later actions in the workplace that were presumably taken to avoid further discrimination. Those who were physically attacked in school were considerably more likely to stay in a job they would prefer to leave (64%) compared to those who were not (42%). Similarly, 47% of those who were physically assaulted in school “did not seek a promotion or raise” in order to avoid discrimination as opposed to 27% of those who were not. Thus, it appears that appropriate treatment in school impacts later job success.

MISTREATMENT IN SCHOOL AND INCARCERATION

We found an association between being assaulted at school and being incarcerated. Fifteen percent (15%) of our sample reported having been incarcerated at some point in their lives, but 22% of those who were physically assaulted in school were incarcerated at some point in their lives. Further, 24% of those who were sexually assaulted in school were incarcerated at some point in their lives.

MISTREATMENT IN SCHOOL AND HOMELESSNESS

There was an alarming relationship between mistreatment in school and whether respondents reported having ever experienced homelessness. For those who were verbally harassed, physically or sexually assaulted, or expelled because they were transgender or gender non-conforming, 25% reported having experienced homelessness as compared to 14% of those who did not experience this mistreatment at school. For the subset who were physically assaulted at school, 38% reported having experienced homelessness, and for those who had to leave school due to harassment, nearly half (48%) were currently or formerly homeless.

MISTREATMENT IN SCHOOL AND HEALTH

We examined four health indicators — smoking, drug and alcohol abuse, HIV rates, and suicide attempts — as they related to mistreatment in school. In all cases, those who experienced mistreatment in school had worse outcomes.

Smoking

Thirty-seven percent (37%) of those who were physically assaulted at school reported being current daily or occasional smokers compared to 29% of those who were not. Forty-five percent (45%) of those who had to leave school due to harassment reported being current daily or occasional smokers.

Drugs and Alcohol

Thirty-five percent (35%) of those who were verbally harassed, physically or sexually assaulted, or expelled because they were transgender or gender non-conforming, reported using drugs or alcohol to cope with mistreatment they faced for being transgender or gender non-conforming. This compared to 21% of those who did not face these forms of mistreatment in school. This number rose to 44% for those who were physically assaulted and 48% of those who had to leave school due to harassment.
HIV

Respondents who reported having to leave school due to harassment were HIV-positive at a rate of 5.14%, compared to 1.87% of respondents who did not. This rate, 5.14%, is more than eight times the HIV rate of the general population, 0.6%.17

Suicide

Fifty-one percent (51%) of those who were verbally harassed, physically or sexually assaulted, or expelled because they were transgender or gender non-conforming reported having attempted suicide.

Of those who were physically assaulted, 64% attempted suicide, and of those who were sexually assaulted 68% attempted suicide. Of those who had to leave school because of harassment, 68% reported having attempted suicide.

Notably, suicide attempt rates rose dramatically when teachers were the reported perpetrators: 59% for those harassed or bullied by teachers in K-12 or higher education, 76% among those who were physically assaulted by teachers and 69% among those who were sexually assaulted by teachers.
CONCLUSIONS FOR EDUCATION

Harassment and discrimination against transgender and gender non-conforming students is severe and pervasive in school. In grades K-12, over three-quarters of students reported experiencing harassment or assault. Almost one-third were harassed by their teachers. In higher education, students are too often denied gender-appropriate housing or housing altogether and experienced bias in financial aid and scholarship opportunities.

Given these devastating circumstances, the number of those who stayed in school, or returned despite mistreatment, demonstrates a remarkable resiliency and commitment to obtaining an education. The level of educational attainment in this sample is notable given the extreme levels of discrimination and abuse in educational settings reported.

The fact that so many are going back to school later in life likely speaks both to persistence as well as the desperate economic state people find themselves in because of severe employment discrimination. Respondents appear to be experiencing a revolving door of between the classroom and the job market driven by educational and workplace abuses.

Clearly, despite these high levels of educational attainment, our respondents are not fully benefitting from their efforts as reflected by current household income. Whereas most who obtain high school diplomas, college degrees, or professional degrees see a corresponding increase in income, our sample too often does not.

People of color were especially vulnerable to lower educational attainment and lower income, which may be in part due to the fact that people of color were more likely to report having expressed their gender identity or gender non-conformity at school and because of the compounding effects of racism.

In terms of gender, MTF students reported higher rates of violence, while FTM and gender non-conforming students reported higher rates of harassment and bullying. We speculate that the difference here is that MTF students were under-reporting verbal harassment that occurred when they were also experiencing violence.

We found that mistreatment in school had a lasting effect on our respondents’ lives and correlated with a number of negative outcomes including higher rates of sex work, incarceration, homelessness, smoking, drug and alcohol abuse, HIV and attempted suicide.

All of the experiences documented here as well as the related negative outcomes later in life speak to an urgent need for reform of the nation’s education system and an end to the abuse of transgender and gender non-conforming students. Like all other students, transgender and gender non-conforming people have a right to equal opportunity in school, free from harassment and violence.

“Overall, my experience at school was night and day different when they didn’t know I am trans.”

“In school I was harassed and bullied for being different. I was forced to wear dresses to school until 8th grade when the dress code was changed.”
RECOMMENDATIONS FOR EDUCATION

• Provide a safe learning environment for transgender and gender non-conforming students
  • Enact and enforce anti-harassment policies that cover gender identity/expression as well as race and other personal characteristics within educational settings at all levels and provide training so that faculty, staff and students are aware of and comply with the policies.
  • Actively and promptly investigate all complaints of harassment or violence perpetrated by students, faculty or staff and ensure that appropriate disciplinary actions are taken. Have a zero-tolerance policy for violence and harassment initiated by faculty and staff members.
  • Pass and ensure compliance with all local, state and federal laws relating to harassment, discrimination and assault.
• Create a supportive environment for transgender and gender non-conforming students
  • Develop curricular and extra-curricular programming to create a school environment that affirms transgender and gender non-conforming people and students, including but not limited to inclusive Gay-Straight Alliances.
  • Ensure that transgender and gender non-conforming students of color are fully included and supported in these efforts.
• Help transgender and gender non-conforming students remain in school
  • Develop policies to ensure that transgender and gender non-conforming students are not expelled because of their gender identity or expression or because of something triggered by their gender identity or expression (such as a physical alteration when the student was simply acting in self-defense).
  • Intervene with transgender and gender non-conforming students who are at high risk of dropping out, especially students of color who face additional risk factors.
• Ensure that higher education is accessible to transgender and gender non-conforming students
  • Ensure that financial aid and scholarship opportunities are open to and non-discriminatory toward transgender and gender non-conforming applicants.
  • Enact policies to ensure transgender and gender non-conforming students have access to gender-appropriate housing and facilities.
  • Develop trans-inclusive support systems for older students returning to school.
• Bridge the gap between education and employment
  • Ensure that campus resources such as career counseling and job placement services are accessible to transgender students and are able to provide culturally competent resources that help students become employed in their fields.
  • Provide meaningful internship opportunities for those students to make career contacts and to show the contribution that they can make to the workplace.
  • Ensure GED programs, vocational training programs, and other workforce development programs are accessible to transgender and gender non-conforming people.
Endnotes


2 HIV rates have not been rounded due to better comparison to national rates.

3 In a similar survey reaching LGBT students in 2007, the Gay, Lesbian, and Straight Education Network found that 86.2% of respondents reported being verbally harassed in the last year — 44.1% said they were physically harassed, and 22.1% reported physical assault. The transgender-specific break out from that sample reported much higher rates, including verbal harassment because of sexual orientation at 87%, physical harassment because of sexual orientation at 55%, physical harassment due to gender expression at 53%, physical assault due to sexual orientation at 28%, and physical assault due to gender expression at 26%. Gay, Lesbian, and Straight Education Network, “2007 National School Climate Survey” (2008): http://www.glsen.org/binary-data/GLSEN_ATTACHMENTSS/file/000/001/1290-1.pdf; Gay, Lesbian, and Straight Education Network, “Harsh Realities” (2009): http://www.glsen.org/binary-data/GLSEN_ATTACHMENTSS/file/000/001/1290-1.pdf.

4 Physical and sexual assault figures have not been rounded due to their small size.


8 Ibid.

9 Ibid.

10 Some numbers have not been rounded due to their size.

11 According to Don Dillman, “The lack of Internet service for 29% of the population and high-speed service for 53% of the population is complicated by differences between those who have and do not have these services. Non-Whites, people 65+ years old, people with lower incomes, and those with less education have lower internet access rates than their counterparts, and, therefore, are more likely to be left out of Internet surveys.” Don Dillman, Jolene Smyth, and Leah Melani Christian, Internet, Mail, and Mixed-Mode Surveys: The Tailored Design Method (New York: Wiley, 2008). Therefore, online samples often have higher educational attainment and higher household income. Our sample had considerably lower household income, which would lead one to speculate that we have avoided this bias. However, our educational attainment is much higher than the general population, which could lead to the opposite conclusion. Even more interestingly, one would expect the sample to demonstrate higher levels than the general population of being in school between 18-24, if it were privileged, yet, as discussed in the Education chapter later, our sample is in school less than the general population in that age range. For more information about online bias, see David Solomon, “Conducting web-based surveys,” Practical Assessment, Research & Evaluation, 7 no.19, (2001): http://PAREonline.net/getvn.asp?v=7&n=19. See also Lee Rainie et al., “The Ever-Shifting Internet Population: A new look at Internet access and the digital divide,” Pew Internet & American Life Project (2003): http://www.pewinternet.org/Reports/2003/The-Ever-Shifting-Internet-Population-A-new-look-at-Internet-access-and-the-digital-divide/02-Who-is-not-online/03-Several-demographic-factors-are-strong-predictors-of-Internet-use.aspx.


13 Ibid.

14 Ibid.

15 Given that overall, our respondents have only nearly four times the rate of having a household income lower than $10,000 per year reported elsewhere, a reader might be confused that these data (that states for each educational attainment level, respondents have 4-5 times the rate of being in the lowest income category) is incorrect. It is correct. The reason our overall rate of those with $10,000 per year or less is only nearly four times larger than the general population is that our sample has a large number of who are in the lowest income category and yet have the highest educational attainment (24% of those making $10,000 or lower in our sample had a bachelor's degree or higher). The highest educational category has the lowest percentage of people in our sample receiving $10,000 annually or less, so the large presence of highly educated people in the sample's lowest income category drags the overall percentage down closer to the general population percentage in that income category.


17 HIV rates have not been rounded for better comparison to national rates.
Employment is fundamental to people’s ability to support themselves and their families. Paid work is not only essential to livelihood; it also contributes greatly to a sense of dignity and accomplishment over a lifetime. The Universal Declaration of Human Rights asserts the rights of individuals to work at the job of their choice, receiving equal pay for equal work, without discrimination. Yet far too often, transgender people are denied these basic human rights.

There are also serious social consequences associated with unemployment and underemployment. The loss of a job and unemployment are linked to depression and other mental health challenges. Given the high rates of unemployment seen in our sample and the high rates of suicide attempts noted in the Health chapter of this document, employment issues are of particular concern to transgender and gender non-conforming people.

Field work for this study was done from September 2008 through February 2009, with a large majority completing questionnaires during September. Accordingly, the employment statistics here largely precede the widespread layoffs and double digit unemployment that the nation as a whole experienced as the economy moved into a major recession. The data that follow show that due to discrimination, study participants were experiencing very high rates of unemployment and extremely poor employment conditions. Given that respondents were faring worse than the nation as a whole before the recession led to large-scale layoffs, the data suggests that in the current crisis, transgender and gender non-conforming people are likely facing even higher unemployment than their gender-conforming peers.

The data show not only the rampant discrimination against transgender and gender non-conforming people, but also show that large numbers have turned to the underground economy for income, such as sex work or drug sales, in order to survive. Throughout this chapter, we refer to this as “underground employment.”
KEY FINDINGS IN EMPLOYMENT

- **Double the rate of unemployment:** Survey respondents experienced unemployment at twice the rate of the general population, with rates for people of color up to four times the national unemployment rate.

- **Near universal harassment on the job:** Ninety percent (90%) of those surveyed reported experiencing harassment or mistreatment on the job or took actions to avoid it.

- **Considerable loss of jobs and careers:** Forty-seven percent (47%) said they had experienced an adverse job outcome, such as being fired, not hired or denied a promotion because of being transgender/gender non-conforming; 26% of respondents said that they had lost a job due to being transgender or gender non-conforming.

- **Race multiplies the effect of discrimination:** For Black, Latino/a, American Indian and multiracial respondents, discrimination in the workplace was even more pervasive, sometimes resulting in up to twice or three times the rates of various negative outcomes.

- **Living in dire poverty:** Fifteen percent (15%) of our respondents reported a household income under $10,000/year, nearly four times the rate of this category for the general population. **Those who lost a job due to bias lived at this level of poverty at six times the rate of the general population.** More information about income can be found in the Portrait and Education chapters.

- **Rampant under-employment:** Forty-four percent (44%) reported experiencing under-employment.

- **Large majorities attempted to avoid discrimination** by hiding their gender or gender transition (71%) or delaying their gender transition (57%).

- **The vast majority (78%) of those who transitioned from one gender to the other reported** that they felt more comfortable at work and **their job performance improved.**

- **Eighty-six percent (86%) of those who have not lost a job due to bias reported that they were able to access restrooms at work appropriate for their gender identity, meaning that 14% of those who kept their jobs were denied access.**

- **People who had lost a job due to bias or were currently unemployed reported much higher involvement in underground employment such as sex work or drug sales, had much higher levels of incarceration and homelessness, and negative health outcomes.**

- Sixteen percent (16%) said they had been compelled to engage in underground employment for income. **Eleven percent (11%) turned to sex work.**

- **Many respondents demonstrated resilience:** Of the 26% who reported losing a job due to bias, 58% reported being currently employed.
Outness at Work

We asked about outness at work in two different ways, only examining those who were currently employed. First, we asked respondents whether they tell work colleagues they are transgender or gender non-conforming. Second, we asked whether or not people at work knew that the respondent was transgender or gender non-conforming.

In the first measure, 38% reported that they tell work colleagues that they are transgender or gender non-conforming. In the second measure, whether or not people at work knew that the respondent was transgender or gender non-conforming, we found that over one third (35%) reported that “most” or “all” coworkers knew they were transgender or gender non-conforming. Another third (37%) said “some” or “a few” coworkers knew, and 28% said no one knew.

Among those who had transitioned, we see slightly elevated rates of coworkers being aware of their transgender or gender non-conforming status. Half (50%) reported “most” or “all” coworkers knew, 34% said “some” or “a few” knew, and 16% said no one knew.

“The only positive benefit of being on Disability is that I do not have to worry about employment discrimination.”

“For years, I lived ‘in the closet’ in order to support myself in my career.”
Employment Discrimination

Forty-seven percent (47%) of survey respondents said they had experienced an adverse job action—they did not get a job, were denied a promotion or were fired—because they are transgender or gender non-conforming.

“I went from making 40K, to nothing; I can barely get a part time job at a fast food restaurant.”

Male-to-female transgender respondents reported job loss due to bias at a frequency of 36% while female-to-male transgender respondents reported 19%. Twenty-nine percent (29%) of transgender respondents experienced job loss due to bias while gender non-conforming participants reported 15%.

JOB LOSS DUE TO DISCRIMINATION

An alarming number of the people surveyed, 26%, reported losing their jobs directly due to their gender identity/expression. Particularly hard hit were those who were Black (32%), multiracial (36%), and American Indian (36%).

Respondents who reported having lost a job due to bias reported being currently unemployed (26%), many times the general population rate at the time of the survey (7%), which suggests that they have been unable to find new employment after a discriminatory termination. Twenty-eight percent (28%) of those who have lost a job due to bias have also reported work in the underground economy. Those who were living in the South were more likely to have lost a job due to bias (30%) than those living in other regions of the country. Undocumented non-citizens (39%) reported lost jobs due to bias more often than U.S. citizens (26%). Those with no high school diploma (37%) and those with only a high school diploma (33%) also experienced particularly high rates of job loss due to bias.

“I was highly regarded at my new workplace until one of my old co-workers came in for an interview there and saw me. During his interview he told them all about me. He didn’t get the job, but I soon lost mine.”
DISCRIMINATION IN HIRING

Forty-four percent (44%) of survey respondents reported they did not get a job they applied for because of being transgender or gender non-conforming. Eighty-one percent (81%) of those who had lost their job due to bias also reported discrimination in hiring as did 71% of those currently unemployed. Also particularly hard hit were multiracial respondents (56%), American Indians (55%) and those making under $10,000/year (60%).

Sixty-one percent (61%) of those who reported doing sex work, drug sales or other underground work also say that they had experienced discrimination in hiring in the traditional workforce.

Male-to-female respondents experienced discrimination in hiring at 55%, compared to 40% of female-to-male respondents. Gender non-conforming respondents experienced this form of discrimination at 32%.

“\textit{It was absolutely impossible to find any work at all during transition. I was unemployed for four years. I went from comfortably upper middle class to the brink of destitution; I have spent all my retirement savings.}”

DENIED PROMOTION

Twenty-three percent (23%) of respondents reported that they were denied a promotion because of being transgender or gender non-conforming. Thirty-three percent (33%) of those with no high school diploma reported denial of a promotion due to bias along with 31% of those who made under $10,000/year. Also hard hit were Latino/a (29%), multiracial (31%) and American Indian (31%) respondents.

Twenty-nine percent (29%) of male-to-female respondents reported denial of promotion due to bias, while female-to-male respondents reported an 18% rate. Twenty percent (20%) of gender non-conforming respondents reported denial of promotions due to bias.
Under-employment

We asked respondents whether they were currently or previously under-employed due to their gender identity/expression; that is “working in the field I should not be in or a position for which I am over-qualified.”

Forty-four percent (44%) of our respondents reported that they considered themselves under-employed. Seventy-seven percent (77%) of those who lost a job due to bias also reported experiencing under-employment at some point as well. Sixty-four percent (64%) of those currently unemployed also reported under-employment. Those who made less than $10,000/year reported current or previous under-employment at a rate of 56%. Also highly impacted were multiracial respondents (56%).

“I was a very respected lawyer before all of this, but lost my practice and clients, and have not been able to attract any new clients or get referrals or even get a job in my field for the past 8 years. Very frustrating because I don’t feel any less intelligent or less qualified, but others, both the public and lawyers, perceive me that way.”
Workplace Abuse — A Near-Universal Experience

Harassment and mistreatment at work is a near universal experience for transgender and gender non-conforming people and its manifestations and consequences are many. Not only do many face mistreatment and discrimination directly from coworkers and supervisors; others feel distressed and intimidated when they see others discriminated against, and decide they must hide who they are or give up certain career aspirations in order to stay protected.

Ninety percent (90%) of respondents said they had directly experienced harassment or mistreatment at work or felt forced to take protective actions that negatively impacted their careers or their well-being, such as hiding who they were, in order to avoid workplace repercussions.

Mistreatment ranged from verbal harassment and breaches of confidentiality to physical and sexual assault, while bias-avoidant behaviors included hiding one’s gender, delaying transition, or staying in a job one would have preferred to leave. Given the broad spectrum of workplace abuse experienced by our study participants, their persistent engagement in the workforce speaks to a determination and resilience that goes largely unheralded in statistics and discourse about transgender and gender non-conforming people in the workplace.

“The obstacles currently facing trans people in regards to employment are the most insidious. Without an income, one has absolutely NO voice, politically, economically or socially. Elimination of employment discrimination, above all else, is the keystone to fundamental transgender equality in America.”

In answering each negative work experience question, transgender respondents reported higher levels of abuse than their gender non-conforming counterparts, often with a gap of 10 percentage points or more. Male-to-female respondents experienced harassment and mistreatment slightly more often than female-to-male respondents, though MTF experience of job loss, denial of promotion and discrimination in hiring was much higher than for FTM respondents.

People of color in the sample generally reported higher levels of abuse than the sample as a whole. Other respondents reporting higher vulnerability to mistreatment at work were those who had lost jobs due to discrimination; the unemployed; respondents who had done sex work, drug sales, or other underground work for income; and those earning under $10,000 annually.
“I was fired from my job after 18 years of loyal employment after a fellow employee saw me dressed while attending counseling and reported me to the boss. I was forced on to public assistance to survive.”
HARASSMENT

Fifty percent (50%) of respondents reported experiencing harassment in the workplace. This was the most common negative experience at work. Risk of harassment was higher for those earning lower incomes. High numbers of those who were currently unemployed also reported that they had been harassed when they were working. Similarly, a large number of those who reported having lost jobs due to bias also reported having been harassed at work. Last, those that had done underground work such as sex work, drug sales, or other underground activities for income also frequently reported that they had been harassed at work.

PHYSICAL ASSAULT AT WORK

Seven percent (7%) of our sample reported being physically assaulted at work because of being transgender or gender non-conforming. Undocumented noncitizens in our sample reported the highest rates of physical assault at 25%, over three times the rate of the overall sample.
SEXUAL ASSAULT AT WORK

Six percent (6%) of respondents reported being sexually assaulted by someone at work because of being transgender or gender non-conforming. Undocumented noncitizens reported the particularly high rates of sexual assault at 19%, over three times the rate of the overall sample.
FORCED TO PRESENT IN THE WRONG GENDER

Thirty-two percent (32%) of respondents reported being forced to present in the wrong gender to keep their jobs. Our question did not specify whether they were required to do so by their employer, or they felt forced to because of fear of discrimination. Undocumented noncitizens reported this experience at a particularly high rate (45%).

“When one of my colleagues found out I was born female, I was forced to use the bathroom in another part of the building where I worked, because he said that I made the ‘real’ men uncomfortable with my presence. Now, I look like a bi-male, and the only reason they knew about my status is because a supervisor found out, and spread my business to the other supervisors and friends. I had to walk 5 minutes to another building, which impeded my break times.”
**RESTROOMS AT WORK**

Eighty-six percent (86%) of those who have not lost a job due to bias reported that they were able to access restrooms at work appropriate for their gender identity, meaning that 14% of those who kept their jobs were denied access. Looking at the full sample, regardless of whether they were able to keep or they had lost a job, 78% were given access to restrooms appropriate for their gender identity and 22% were denied access.

**INAPPROPRIATE QUESTIONS**

Forty-one percent (41%) of respondents reported having been asked inappropriate questions about their transgender or surgical status.

Forty-five (45%) of our sample reported having been referred to by the wrong pronouns “repeatedly and on purpose” at work.

“At the job I came out at, most were ok and accepting; but the HR manager blocked any attempts for me to arrange a bathroom, even after I pointed to a local law allowing me to use the correct bathroom.”
DELIBERATE MISUSE OF PRONOUNS

Forty-five (45%) of our sample reported having been referred to by the wrong pronouns “repeatedly and on purpose” at work.

BREACHES OF CONFIDENTIALITY

Forty-eight percent (48%) reported that supervisors or coworkers shared information about the respondent that they should not have had.

“My former employer outs me anytime a prospective employer calls.”
Attempts to Avoid Discrimination

In order to avoid discriminatory actions and workplace abuse, many study respondents reported having “delayed my gender transition” (57%) or “hid my gender or gender transition” (71%). Given the importance of transition for many people, it is striking that well over half of our respondents delayed this life-affirming, and often live-saving step. Even more alarming is that nearly three-quarters of respondents reported they felt they had to hide who they are on a daily basis for job security.

Many respondents stayed in jobs they would have preferred to leave (45%) or didn’t seek promotions or raises (30%) in order to avoid discrimination. Others (42%) said they had changed jobs to escape discrimination.

The discrimination avoidant behaviors described in this section all have implications for career achievement and secure livelihood. Those who have lost a job due to discrimination display the highest levels of discrimination avoidant behavior.

Employment Bias by Association

We asked respondents whether their spouses/partners or children experienced job discrimination due to the respondent being transgender or gender non-conforming. Fourteen percent (14%) of respondents reported that due to their gender identity, their spouse or partner experienced job discrimination. Respondents who reported having lost a job due to bias reported discrimination against their partners at twice that rate (28%).

Respondents also reported that their children were subject to job discrimination due to associational bias at 11%. For those who lost jobs due to bias, discrimination against their children was reported at 25%.

Undocumented non-citizens reported high levels of associational discrimination for both spouses/partners (20%) and children (20%).
Improved Job Situation For Those Who Transition

Of respondents who are living full-time in accordance with their gender identity, 78% said they felt more comfortable and their performance improved at work. Respondents in the higher income categories more often reported an increase in feeling comfortable and performing better after transitioning. Transgender men (78%) and transgender women (79%) who have transitioned reported nearly identical rates of improved job situation.

These respondents who felt their performance improved experienced similar rates of harassment and other forms of mistreatment in the workplace as other transgender and gender non-conforming people. For example, of those who transitioned who said their job performance improved, 51% also reported being harassed at work, compared 50% of the overall sample.

Sex Work, Drug Sales, and Other Underground Work for Income

Given that transgender and gender non-conforming people are often denied access to, forced out of or grossly mistreated in traditional employment markets, it follows that underground work can be an essential survival strategy.

Sixteen percent (16%) of our sample has had some experience in sex work, drug sales, and other underground work. Those at high risk for underground work were those who had lost jobs due to bias (28%), compared to those who had not lost a job (13%), and the unemployed (29%), compared to 14% of those who were employed.

Black (53%) and Latino/a (34%) respondents had extremely high rates of underground work, likely related in part to barriers and abuse within educational systems and dramatically higher rates of employment discrimination.

Male-to-female (19%) respondents had slightly higher rates of underground work than female-to-male (15%) respondents, and transgender (18%) and gender non-conforming (16%) respondents were involved at almost equal frequency.

“When I started my transition, the place that I was working was very supportive. My boss had a family member who is transgender. I was treated with respect by everyone. I had worked there for many years and everyone assumed that I was gay until then and they knew my partner. I guess they just figured I would still be me. Except for growing facial hair and going bald, I am the same, only better and more free.”
SEX WORK

Eleven percent (11%) of respondents did sex work for income. Here we take a closer look at the demographics of sex workers in our sample and then examine their rates of incarceration, homelessness, and health outcomes.

MTF respondents were more likely to report sex work (15%) than FTM respondents (7%); these data unearths the reality that some transgender men have also done sex work at some point in their lives. Transgender respondents, overall, reported sex work at 12%, only slightly higher than gender non-conforming respondents (10%). Respondents of color were more likely to have reported having done sex work; African-American respondents reporting the highest rate at 44%. Latino/a respondents had the next highest rate at 28%. These data aligns with extremely high rates of unemployment and workplace abuse experienced by respondents of color in the study.

Those with higher educational attainment were less likely to report sex work. Those with no high school diploma reported a 33% rate of sex work, compared to those with college degrees at 7%. However, sex work among those with high levels of attainment remained elevated, including 6% of those with graduate degrees.

Homelessness

Respondents reporting sex work were far more likely to also report experiencing homelessness due to bias than the full sample; anecdotal evidence indicates that many who face homelessness do sex work to pay rent or to stay in a hotel. Forty-eight percent (48%) of those who had done sex work also reported experiencing homelessness due to bias. This compares to 19% of the sample overall and 7.4% for the general population overall.5

Incarceration

Participants who did sex work were almost four times as likely to have been incarcerated for any reason (48%) than the overall sample (16%).

HIV

Those who had done sex work were over 25 times more likely to be HIV-positive (15.32%) than the general population (0.6%).6

Smoking

The rate of smoking among those who had done sex work was much higher (49%) than the overall sample (30%).

Drinking and Drugs

Respondents who had done sex work were twice as likely to misuse drugs or alcohol to cope with the mistreatment (18%) as the overall sample (8%).

Suicide Attempts

The rate of attempted suicide among those who had done sex work was much higher (60%) than the overall sample (41%) and more than 37 times higher than the general population (1.6%).
Making the Connections:
Employment Discrimination, Economic Security, and Health

In this section, we examine the connections between employment discrimination and present income, incarceration, homelessness and health outcomes.

RESPONDENTS WHO HAVE LOST JOBS DUE TO DISCRIMINATION

We looked at present household income of the more than one quarter (26%) of our sample who said they had lost jobs because they were transgender or gender non-conforming and found the apparent effects to be severe. Respondents who had lost a job due to bias were six times as likely to be living on a household income under $10,000/year (24%) as the general U.S. population (4%).

They were nearly twice as likely to be living on between $10,000 and $20,000/year (17%) as the general population (9%).

Income of the General Population, Our Sample, and Those Who Lost a Job Due to Bias

Homelessness

Respondents who had lost a job due to bias were four times more likely to have experienced homelessness due to bias (40%) than those who did not lose a job due to bias (10%).

Incarceration

Respondents who had lost a job due to bias were 85% more likely to have been incarcerated for any reason (24%) than those who did not lose a job (13%).

HIV

Respondents who had lost a job due to bias reported an HIV rate (4.59%) over seven times higher than the general population (.6%), and more than double the rate of those who did not lose a job (2.06%).

Smoking

Respondents who had lost a job due to bias were more likely to be smokers (38%) than the overall sample (30%).

Drinking & Drugs

Respondents who had lost a job due to bias were 70% more likely to misuse drugs or alcohol to cope with the mistreatment they face (12%) than those who had not lost a job (7%).

Suicide Attempts

Respondents who had lost a job due to bias were much more likely to have attempted suicide (55%) than those respondents who had not lost a job due to bias (38%), and both figures are striking in contrast to the general population figure of 1.6%.

“I was fired for being transgender. I was on the brink of homelessness and starvation until a friend (who is also transgender) invited me to stay with her in a different state, over 15 hours away.”
UNEMPLOYED Respondents

Here we take a closer look at those respondents who reported being currently unemployed and describe the higher incidence of negative outcomes they experienced. These respondents may be unemployed because they lost a job due to bias, because they experienced discrimination in hiring, or for other reasons.

Homelessness

Respondents who were unemployed were more than twice as likely to have experienced homelessness due to bias (38%) than those who were employed (14%).

Incarceration

Respondents who were unemployed were 85% more likely to have been incarcerated for any reason (24%) than those who were employed (13%).

HIV

Respondents who were unemployed reported an HIV rate (4.67%) over seven times higher than the general population (.6%), and more than double the rate of those who were employed (1.81%).

Smoking

Respondents who were unemployed were more likely to be smokers (38%) than the overall sample (30%), and almost twice as likely to be smokers than those who were working (20%).

Drinking & Drugs

Respondents who were unemployed were almost two times as likely to misuse drugs or alcohol to cope with the mistreatment they face (13%) than those who were working (7%).

Suicide Attempts

Respondents who were unemployed were much more likely to have attempted suicide (51%) than those respondents who were working (37%), and both figures are striking in contrast to the general population figure of 1.6%.

“I was fired from a good job because I tried to transition on the job. I then lived on menial employment for over 3 years before finally landing another good one that was full-time job and had benefits. At one point, I had an offer of employment withdrawn after the would-be employer found out I was transgender.”
CONCLUSIONS FOR EMPLOYMENT

Transgender and gender non-conforming people face staggering rates of harassment mistreatment, and discrimination at work. In this chapter we have shown that many of those who faced this discrimination also experienced multiple, devastating outcomes across many areas of life.

The most obvious sign of this discrimination was the extremely high unemployment figure: double the rate of the general population at the time of study. Underemployment and low household income were also widely reported.

Encouragingly, most of those who have transitioned reported feeling more comfortable at work and that their job performance had improved. However, many of our respondents are unable to reap that benefit because they delayed their gender transition in order to avoid discrimination. The data appears to indicate that transition is not only pivotal to the individual’s well-being, but also that employers would be wise to support and facilitate gender transition of their employees to increase productivity.

Many report changing jobs to avoid discrimination or the risk of discrimination. Again, employers should be aware how environments hostile to transgender workers negatively affect their bottom line, as they lose experienced employees and face the added expense of hiring and training replacements.

High rates of workplace abuse and unemployment among respondents, and resulting poverty, indicate that anti-transgender discrimination has left many in a position where sex work and drug sales are necessary for survival. Respondents of color were particularly vulnerable to being pushed into underground work, with a combination of discrimination based on gender, race and citizenship forcing them farthest to the margins.

The data show that there is a high price to pay for those who must do sex work and other underground work, including homelessness, incarceration and catastrophic health outcomes.

This survey is a call to action; employment discrimination has devastating effects on transgender and gender non-conforming people and must be confronted and eradicated. Not only must individual employers be held accountable, but society as a whole must be held accountable for widespread violations of a basic human right.

RECOMMENDATIONS FOR EMPLOYMENT

Respondents in this study faced overwhelming bias and mistreatment in the workplace due to gender identity and expression. In the absence of workplace protections, employers and coworkers are free to engage in a broad range of abuses from arbitrary firings to demeaning and even violent treatment. The solution to this problem requires the attention of the legislative and executive branches of government, corporations and other employers, labor organizations and non-profit organizations.

- Federal, state, and local laws should be enacted to prohibit discrimination on the basis of gender identity or expression.
  - Federal employment non-discrimination legislation should be enacted with transgender/gender non-conforming protections intact.
  - States and local governments should prioritize enactment of non-discrimination laws.
- Government agencies should implement laws through regulations, compliance guidelines, training, and publicized decisions by enforcement agencies.
  - Only a handful of the states/localities that currently have legal protections have written regulations or guidelines showing employers how to properly treat transgender and gender non-conforming employees. Without these specifics, employers are not sure what the law requires of them and employees cannot engage in effective self-advocacy when being mistreated or discriminated against.
• Enforcement agency staff should undergo training to better understand the specific issues that transgender and gender non-conforming employees experience in the workplace and should learn how to respectfully deal with transgender and gender non-conforming complainants.

• Decisions, investigations, and settlements related to discrimination on the basis of gender identity/expression should be publicized as much as possible to increase awareness of what constitutes illegal discriminatory actions.

• Enforcement agencies should develop and offer trainings for employers on how to comply with the law. If this is not done, non-profit organizations should develop and provide these trainings.

• Enforcement agencies and non-profit groups should develop “Know Your Rights” materials and trainings for transgender and gender non-conforming people.

• Corporations should enact and enforce their own gender identity/expression non-discrimination policies.

• All employees should be trained on how to comply with the policy. Hiring officers must be instructed to ensure they are not consciously or unconsciously discriminating in hiring and should also be educated about how to recognize when an applicant has a poor work record due to discrimination.

• Written policies should be developed concerning gender transition in the workplace so that all employees understand proper, respectful protocol. This policy should address confidentiality, access to gender-segregated facilities, dress standards (if relevant), medical leave policies, pronouns and forms of address, harassment, change of employee records and badges, and any other topic necessary for a smooth gender transition in the workplace.

• Companies should actively recruit transgender and gender non-conforming applicants.

• Government agencies at all levels should develop transgender-specific workforce development programs, or modify existing programs, to train and match transgender and gender non-conforming people to the best jobs available.

• Staff running these programs should be properly trained to address and work with transgender and gender non-conforming participants respectfully.

• Special attention in such programs should be paid to devising ways to expunge criminal records of persons who have been incarcerated for survival behaviors, and/or find employers who are willing to hire applicants with criminal records.

• These programs should train cooperating employers on how to avoid discrimination in hiring transgender and gender non-conforming employees and require that staff of cooperating employers have received training on how to respectfully treat these coworkers.

• Government agencies should work with transgender organizations to develop such programs, ideally providing grants to these organizations for their assistance.

• Labor organizations should ensure that contracts include gender identity/expression nondiscrimination clauses, train union officers and rank-and-file on the importance of nondiscrimination in the workplace, and how to process grievances related to discriminatory treatment.

• Governments should focus their resources on providing meaningful pathways out of poverty, such as by increasing employment opportunities for transgender and gender non-conforming people, rather than expending significant resources on arresting, prosecuting, and incarcerating those doing sex work.
Endnotes


2 This includes people who said they tell “everyone.”

3 Seven percent (7%) was the rounded weighted average unemployment rate for the general population during the six months the survey was in the field, based on which month questionnaires were completed. See seasonally unadjusted monthly unemployment rates for September 2008 through February 2009. For information on how we calculated the unemployment rate for respondents, see the Portrait chapter. U.S. Department of Labor, Bureau of Labor Statistics, “The Employment Situation: September 2008,” (2008): http://www.bls.gov/news.release/archives/empsit_10032008.htm

4 See Appendix B: Survey Instrument – Issues and Analysis for more discussion of this question.


6 HIV rates are reported without rounding in order to make a more precise comparison with general population data.


8 HIV rates reported without rounding in order to make a more precise comparison with general population data.

9 HIV rates reported without rounding in order to make a more precise comparison with general population data.
HEALTH

Access to health care is a fundamental human right that is regularly denied to transgender and gender non-conforming people.

Transgender and gender non-conforming people frequently experience discrimination when accessing health care, from disrespect and harassment to violence and outright denial of service. Participants in our study reported barriers to care whether seeking preventive medicine, routine and emergency care, or transgender-related services. These realities, combined with widespread provider ignorance about the health needs of transgender and gender non-conforming people, deter them from seeking and receiving quality health care.

Our data consistently show that racial bias presents a sizable additional risk of discrimination for transgender and gender non-conforming people of color in virtually every major area of the study, making their health care access and outcomes dramatically worse.

KEY FINDINGS IN HEALTH

• Survey participants reported that when they were sick or injured, they postponed medical care due to discrimination (28%) or inability to afford it (48%).

• Respondents faced serious hurdles to accessing health care, including:
  - Refusal of care: 19% of our sample reported being refused care due to their transgender or gender non-conforming status, with even higher numbers among people of color in the survey.
  - Harassment and violence in medical settings: 28% of respondents were subjected to harassment in medical settings and 2% were victims of violence in doctor’s office.
  - Lack of provider knowledge: 50% of the sample reported having to teach their medical providers about transgender care.

• The majority of survey participants have accessed some form of transition-related medical care despite the barriers; the majority reported wanting to have some type of surgery but have not had any surgeries yet.

• If medical providers were aware of the patient’s transgender status, the likelihood of that person experiencing discrimination increased.

• Respondents reported over four times the national average of HIV infection, 2.64% in our sample compared to .6% in the general population, with rates for transgender women at 4.28%, and with those who are unemployed (4.67%) or who have done sex work (15.32%) even higher.¹

• Over a quarter of the respondents misused drugs or alcohol specifically to cope with the mistreatment they faced due to their gender identity or expression.

• A staggering 41% of respondents reported attempting suicide compared to 1.6% of the general population, with unemployment, bullying in school, low household income and sexual and physical associated with even higher rates.
Access to Healthcare

HEALTH CARE SETTINGS

A majority of study participants sought care (“when you are sick or need advice about your health”) through a doctor’s office (60%); however a sizable minority used health centers and clinics (28%). Four percent (4%) of respondents primarily used emergency rooms for care. Several studies have shown that individuals who use emergency rooms for primary care experience more adverse health outcomes than those who regularly see a primary physician. Factors that correlated with increased use of emergency rooms (ERs) among our respondents were:

- Race—17% of African-Americans used ERs for primary care, as did 8% of Latino/a respondents;
- Household income—8% of respondents earning under $10,000 per year used ERs for primary care;
- Employment status—10% of unemployed respondents and 7% of those who said they had lost their jobs due to bias used ERs for primary care;
- Education—13% of those with less than a high school diploma used ERs for primary care.

Visual conformers and those who had identity documents that matched their presentation had high rates of using doctor’s offices for their care.

Primary Source of Medical Care for Respondents

Health Care Experiences

DISCRIMINATION BY MEDICAL PROVIDERS

Denial of health care and multiple barriers to care are commonplace in the lives of transgender and gender non-conforming people. Respondents in our study seeking health care were denied equal treatment in doctor’s offices and hospitals (24%), emergency rooms (13%), mental health clinics (11%), by EMTs (5%) and in drug treatment programs (3%).

Female-to-male respondents reported higher rates of unequal treatment than male-to-female respondents. Latino/a respondents reported the highest rate of unequal treatment of any racial category (32% by a doctor or hospital and 19% in both emergency rooms and mental health clinics).

We also asked whether respondents had been denied service altogether by doctors and other providers. Nineteen percent (19%) had been refused treatment by a doctor or other provider because of their transgender or gender non-conforming status.

Twenty-four percent (24%) of transgender women reported having been refused treatment altogether and 20% of transgender men did. Respondents who reported they had lost jobs due to bias (36%); American Indians (36%); those who worked in the underground economy (30%); those on public insurance (28%); and those who transitioned (25%) experienced high occurrence of refusal to treat.

“After an accident on ice, I was left untreated in the ER for two hours when they found my breasts under my bra while I was dressed outwardly as male.”

“I have been refused emergency room treatment even when delivered to the hospital by ambulance with numerous broken bones and wounds.”
Refusal to Provide Medical Care by Race

Refusal to Provide Care by Gender Identity/Expression

“Refusal to provide medical care by race”

VIOLENCE AND HARASSMENT WHEN SEEKING MEDICAL TREATMENT

Doctors’ offices, hospitals, and other sources of care were often unsafe spaces for study participants. Over one-quarter of respondents (28%) reported verbal harassment in a doctor’s office, emergency room or other medical setting and 2% of the respondents reported being physically attacked in a doctor’s office.

Those particularly vulnerable to physical attack in doctors’ offices and hospitals include those who have lost their jobs (6%); African-Americans (6%); those who done sex work, drug sales or other work in the underground economy (6%); those who transitioned before they were 18 (5%); and those who are undocumented non-citizens (4%).

In emergency rooms, 1% reported attack. Those more vulnerable to attack include those who are undocumented (6%); those who have worked in the underground economy (5%); those who lost their jobs (4%); and Asian respondents (4%). Obviously, harassment and physical attacks have a deterrent effect on patients seeking additional care and impact the wider community as information about such abuses circulates.

“My experiences in dealing with hospital personnel after my rape was not pleasant and lacked a lot of sensitivity to trans issues.”

“When I tried to kill myself and was taken to a suicide center, I was made fun of by staff and treated roughly.”

“I was forced to have a pelvic exam by a doctor when I went in for a sore throat. The doctor invited others to look at me while he examined me and talked to them about my genitals.”
OUTNESS AND DISCRIMINATION

Twenty-eight percent (28%) of respondents said they were out to all their medical providers. Eighteen percent (18%) said they were out to most, 33% said some or a few, and 21% were out to none.

Doctors can provide more effective care when they have all medically relevant information about their patients. Unfortunately, our data shows that doctors’ knowledge of a patient’s transgender status increases the likelihood of discrimination and abuse. Medical professionals’ awareness of their patient’s transgender status increased experiences of discrimination among study participants up to eight percentage points depending on the setting:

- **Denied service altogether**: 23% of those who were out or mostly out to medical providers compared to 15% of those who were not out or partly out
- **Harassment in ambulance or by EMT**: 8% of those who were out or mostly out to medical providers compared with 5% of those who were not out or partly out
- **Physically attacked or assaulted in a hospital**: 2% of those who were out or mostly out to medical providers compared with 1% of those who were not out or partly out

“I have been harassed and physically assaulted on the street. One time, I didn’t go the hospital until I went home, changed [out of feminine] clothes, and then went to the emergency room in male mode. I had a broken collar bone as a result of that attack.”

“I rarely tell doctors of my gender identity. It just seems so hard to explain what “genderqueer” means in a short doctor’s appointment. I also am reluctant to take the risk of discrimination; I need to be healthy more than I need to be out to my doctors. I hate making this compromise. But I’m not quite that brave yet.”

“Denial of health care by doctors is the most pressing problem for me. Finding doctors that will treat, will prescribe, and will even look at you like a human being rather than a thing has been problematic. Have been denied care by doctors and major hospitals so much that I now use only urgent care physician assistants, and I never reveal my gender history.”
MEDICAL PROVIDERS’ LACK OF KNOWLEDGE

When respondents saw medical providers, including doctors, they often encountered ignorance about basic aspects of transgender health and found themselves required to “teach my provider” to obtain appropriate care. Fully 50% of study respondents reported having to teach providers about some aspect of their health needs; those who reported “teaching” most often include transgender men (62%), those who have transitioned (61%) and those on public insurance (56%).

“I have several health issues and have been refused care by one doctor who ‘suggested’ that I go somewhere else because she could not treat me since she ‘did not know anything about transgender people.’ “

POSTPONEMENT OF NECESSARY AND PREVENTIVE MEDICAL CARE

We asked respondents whether they postponed or did not try to get two types of health care: preventive care “like checkups” and necessary care “when sick or injured.” We found that many postponed care because they could not afford it and many postponed care because of discrimination and disrespect from providers.

A large number of study participants postponed necessary medical care due to inability to afford it, whether seeking care when sick or injured (48%), or pursuing preventive care (50%). Transgender men reported postponing any care due to inability to afford it at higher rates (55%) than transgender women (49%).

Insurance was a real factor in delayed care: those who have private insurance were much less likely to postpone care because of inability to afford it when sick or injured (37%) than those with public (46%) or no insurance who postponed care (86%).

In terms of preventive care, those without insurance reported delaying care due to inability to afford it much more frequently (88%) than those with private insurance (39%) or public insurance (44%). Failing to obtain preventive care is known to lead to poor long-term health outcomes.

Due to discrimination and disrespect, 28% postponed or avoided medical treatment when they were sick or injured and 33% delayed or did not try to get preventive health care. Female-to-male transgender respondents reported postponing care due to discrimination and disrespect at a much higher frequency (42%, sick/injured; 48% preventive) than male-to-female transgender respondents (24%, sick/injured; 27% preventive). Those with the highest rates of postponing care when sick/injured included those who have lost a job due to bias (45%) and those who have done sex work, sold drugs, or done other work in the underground economy for income (45%). Twenty-nine percent (29%) of respondents who were “out” or “mostly out” to medical providers reported they had delayed care when ill and 33% postponed or avoided preventive care because of discrimination by providers.

“The transition and health care has been expensive, all at a time where my main source of income (my law practice) deteriorated. I have exhausted my savings and the equity from selling my home just to pay medical and living expenses.”

ACCESS TO INSURANCE

Study participants were less likely than the general population to have health insurance, more likely to be covered by public programs such as Medicare or Medicaid, and less likely to be insured by an employer.

Nineteen percent (19%) of the sample lacked any health insurance compared to 17% of the general population. Fifty-one percent (51%) had employer-based coverage compared to 58% of the general population.

African-American respondents had the worst health insurance coverage of any racial category: 39% reported private coverage and 30% public. Thirty-one percent (31%) of Black respondents reported being uninsured; by contrast 66% of white respondents reported private insurance, 17% public insurance and 17%
uninsured. In the general population, 68% have private insurance and 28% have public insurance.\textsuperscript{7}

Undocumented non-citizens had very low rates of coverage: 26% reported private insurance, 37% public insurance, and 36% no insurance. The South was the worst region for coverage where 59% of respondents reported private insurance, 17% public insurance and 25% no insurance.

Transgender women reported private insurance at 54%, public insurance at 24% and 22% were uninsured. Transgender men reported private insurance at 68%, public insurance at 13% and 19% with no insurance. Transgender respondents, overall, reported private insurance at 60%, public insurance at 20% and 20% had no insurance. Gender non-conforming respondents were insured at higher rates than their transgender counterparts, with 73% reporting private insurance, 11% public insurance, and 17% uninsured.

“I have been living with excruciating pain in my ovaries because I can’t find a doctor who will examine my reproductive organs.” (from a transgender man)

The majority of survey participants have accessed some form of transition-related medical care despite the barriers.

Most survey respondents had sought or accessed some form of transition-related care. Counseling and hormone treatment were notably more utilized than any surgical procedures, although the majority reported wanting to “someday” be able to have surgery. The high costs of gender-related surgeries and their exclusion from most health insurance plans render these life-changing (in some cases, life-saving) and medically necessary procedures inaccessible to most transgender people.

Throughout this section, we focus primarily on transgender people rather than on gender non-conforming people, though they too may also desire and sometimes use various forms of gender-related medical care.

The World Professional Association for Transgender Health (WPATH) publishes Standards of Care\textsuperscript{8} which are guidelines for mental health, medical and surgical professionals on the current consensus for providing assistance to patients who seek transition-related care. They are intended to be flexible to assist professionals and their patients in determining what is appropriate for each individual. The Standards of Care are a useful resource in understanding the commonly experienced pathways through transition-related care.

“My choices for health coverage at my employer all exclude any treatment for transgender issues, even though they cover things like hormones for other people.”
Counseling often plays an important role in transition. Because of the WPATH Standards of Care, medical providers often require a letter from a qualified counselor stating that the patient is ready for transition-related medical care; transgender people may seek out counseling for that purpose. Counseling may also play a role in assisting with the social aspects of transition, especially in dealing with discrimination and family rejection.

Seventy-five percent (75%) of respondents received counseling related to their gender identity and an additional 14% hoped to receive it someday. Only 11% of the overall sample did not want it. Those who identified as transgender were much more likely to have had counseling (84%) than those who are gender non-conforming (48%). Eighty-nine percent (89%) of those who medically transitioned have received counseling, as have 91% of those who had some type of surgery.

Part of counseling can involve receiving a gender-related mental health diagnosis such as “Gender Identity Disorder.” Many doctors require this diagnosis before providing hormones or surgical treatment, but the diagnosis itself is widely criticized for categorizing naturally occurring gender variance as pathological. Fifty-percent (50%) of study participants have received a gender-related mental health diagnosis. Transgender women reported a higher rate of diagnosis (68%) than transgender men (56%); and transgender-identified participants had a substantially higher rate of diagnosis (63%) than gender non-conforming respondents (11%).

“\[\text{I can no longer afford health care of any kind. I am fully transitioned and thus reliant upon estradiol as my body produces neither estrogens nor androgens in sufficient quantity. I am unable to go to the doctor for my prescriptions, and thus have been unable to buy my hormones for over one year. Thus I watch my hair falling out, my nails dissolve and am weak and tired like a far older lady than I am.}\]”

Hormone Therapy by Age of Respondent

Sixty-two percent (62%) of respondents have had hormone therapy, with the likelihood increasing with age; an additional 23% hope to have it in the future. Transgender-identified respondents accessed hormonal therapy (76%) at much higher rates than their gender non-conforming peers, with transgender women more likely to have accessed hormone therapy (80%) than transgender men (69%). Almost all respondents who reported undertaking transition-related surgeries also reported receiving hormone therapy (93%).
**SURGERY—MALE-TO-FEMALE**

Transgender women may elect to undertake a variety of surgeries, including breast augmentation, orchiectomy (removal of testes), vaginoplasty (creation of a vagina and/or removal of the penis), and facial feminization surgeries. We asked respondents to report on whether they had, or wanted, breast augmentation surgery, orchiectomies and vaginoplasties. As the charts below show, most transgender women reported wanting or having these surgeries. In addition, 17% reported having had facial surgery. However, it is impossible to know how many others would desire or utilize surgery if it was more financially accessible.

“I cannot afford gender reassignment surgery which is crucial to my mental well being and thoughts of suicide are always present.”

**SURGERY—FEMALE-TO-MALE**

Transgender men may elect to undertake a variety of surgeries, including chest reconstruction, hysterectomy, metoidioplasty and other genital surgeries. We asked respondents to report on chest surgery; hysterectomy; metoidioplasty, which releases the clitoris; surgeries that create testes; and phalloplasty, which surgically creates a penis and testes. The majority of FTM transgender-identified respondents wanted to have, or have already had, chest surgery and a hysterectomy. However, when it came to genital surgeries, very few reported having such surgeries; a slim majority (53%) reported desiring other genital surgery such as metoidioplasty in addition to the 3% that have had it; and one-quarter (27%) wanted to have a phalloplasty in addition to the 1% who have had it. It is impossible to know how these rates would change if these surgeries were more financially accessible.

“I have also have had several bouts with depression and anxiety disorders and once ended up in the emergency room for depression. I still bounce in and out of depression due to not being able to get the appropriate surgical procedures.”
Health Vulnerabilities

Survey participants reported poorer health outcomes than the general population in a variety of critical health areas.

PHYSICAL VIOLENCE AND SEXUAL ASSAULT

In questions related to experiences in educational settings, at work, in interactions with police and with family members, at homeless shelters, accessing public accommodations, and in jails and prisons, respondents were asked about physical violence or sexual violence, or both, committed against them because of their gender identity/expression. There was no general question asked about whether respondents had ever experienced any bias-motivated violence, and further, there was no question that asked to report on violence that was not specifically motivated by anti-transgender bias.

Twenty-six percent (26%) of respondents had been physically assaulted in at least one of these contexts because they were transgender or gender non-conforming. Ten percent (10%) of respondents were sexually assaulted due to this bias.

Having been physically or sexually assaulted aligned with a range of other negative outcomes, as described below in each relevant section.

HIV

Respondents reported an HIV infection rate of 2.64%, over four times the rate of HIV infection in the general United States adult population (0.6%) as reported by the United Nations Programme on HIV/AIDS and the World Health Organization. People of color reported HIV infection at substantially higher rates: 24.90% of African-Americans, 10.92% of Latino/as, 7.04% of American Indians, and 3.70% of Asian-Americans in the study reported being HIV positive. This compares with national rates of 2.4% for African Americans, .08% Latino/as, and .01% Asian Americans. Non-U.S. citizens in our sample reported more than twice the rate of HIV infection of U.S. citizens (2.41%), with documented non-citizens at 7.84% and undocumented at 6.96%.

Respondents reported over four times the national average of HIV infection.

Doing sex work for income clearly was a major risk factor, with 61% of respondents who were HIV positive reporting they had done sex work for income. To consider this from a different angle, of all the people in our sample who had done sex work, 15.32% reported being HIV positive.

Among survey participants, 88% of those who reported being HIV positive identified as either MTF or gender non-conforming on the male-to-female spectrum. The reported rate of HIV infection for the MTF transgender respondents was 4.28%. The reported rate of HIV infection for FTM respondents was .51%, lower than the national average.

Other categories that reported substantially higher HIV rates than the sample as a whole were:

- Those without a high-school diploma (13.49%)
- Those who had been sexually assaulted due to bias (10.13%)
- Those with household income below $10,000 a year (6.40%)
- Those who had lost a job due to bias (4.59%) or reported being unemployed (4.67%)

Eight percent (8%) of our sample reported that they did not know their HIV status. Transgender women and transgender men had equal rates of not knowing, both 8%, with transgender respondents also at 8% and gender non-conforming respondents at 9%. Those most likely not to know their HIV status include undocumented non-citizens (17%), those with household incomes under $10,000/year (14%), and those with lower educational attainment (those with no high school diploma and high school diploma only, both at 13%). With regard to race, Asian respondents were least likely to know their status (13%).

HIV Infection By Race, Compared to U.S. General Population
**DRUG AND ALCOHOL USE**

The National Institutes of Health (NIH) estimate that 7.3% of the general public abuses or is dependent on alcohol, while 1.7% abuses or is dependent on non-prescription drugs. Eight percent (8%) of study participants reported currently using alcohol or drugs specifically to cope with the mistreatment that they received as a result of being transgender or gender non-conforming, while 18% said they had done so in the past but do not currently. We did not ask about general use of alcohol and drugs, only usage which the respondents described as a coping strategy for dealing with the mistreatment they face as transgender or gender non-conforming persons.

Doing sex work, drug sales, and other work in the underground economy for income more than doubles the risk of alcohol or drug use because of mistreatment, with 19% of these respondents currently using alcohol and/or drugs while 36% reported that they had done so in the past. Those who have been the physically attacked due to bias also had a higher rate of current alcohol and drug misuse (15%) as did those who have been sexually assaulted due to bias (16%). Also at elevated risk were those who had lost a job due to discrimination; 12% reported currently using drugs and alcohol, while 28% have done so in the past.

Alcohol and drug use decreased by age among our participants, as they did in studies of the general population, with those 65 years and above reporting less than half the rate of use (4%) of those who are the 18-44 age range (9%). This contrasts with studies of LGBT populations that show a less dramatic decrease in use over the life cycle; however, because our study only asked about use connected to mistreatment, the comparisons with both the general population and LGBT studies are not precise.

**SMOKING**

Thirty percent (30%) of our sample reported smoking daily or occasionally, compared to 20.6% of U.S. adults. Studies of LGBT adults show similar rates to those in our study, with elevated rates of 1.1-2.4 times that of the general population, and a 2004 California study found a 30.7% smoking rate for transgender people. In the general population, men smoke at higher rates than women, but in LGBT studies, women smoke at higher rates than men. Our sample resembled the LGBT data regarding elevated smoking levels but differed in that more men than women in our sample smoke, a pattern that is closer to that of the general population. When asked if they would “like to quit,” 70% of smokers in the study selected yes.

**Comparative Smoking Rates from Other Studies**

<table>
<thead>
<tr>
<th>General Population</th>
<th>Lesbian and Gay</th>
<th>Bisexual</th>
<th>Our Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Men</strong></td>
<td>23.1%</td>
<td>26.5-30.9%</td>
<td>29.5-38.1%</td>
</tr>
<tr>
<td><strong>Women</strong></td>
<td>18.3%</td>
<td>22.3-26%</td>
<td>30.9-39.1%</td>
</tr>
</tbody>
</table>

Visual conformers were less likely to be current smokers (27%) than visual non-conformers (37%), suggesting that the stress caused by the additional mistreatment that visual non-conformers face may be involved in the development of an addiction to nicotine. Similarly, those who have been physically assaulted due to bias (40%) and sexually assaulted due to bias (45%) have higher smoking rates than their peers who were not assaulted.
SUICIDE ATTEMPTS

When asked “have you ever attempted suicide?” 41% of respondents answered yes. According to government health estimates, five million, or 1.6% of currently living Americans have attempted suicide in the course of their lives.21 Our study asked if respondents had ever attempted suicide while most federal studies refer to suicide attempts within the last year; accordingly it is difficult to compare our numbers with other studies. Regardless, our findings show a shockingly high rate of suicidality.

The National Institute for Mental Health (NIMH) reports that most suicide attempts are signs of extreme distress, with risk factors including precipitating events such as job loss, economic crises, and loss of functioning.22 Given that respondents in this study reported loss in nearly every major life area, from employment to housing to family life, the suicide statistics reported here cry out for further research on the connection between the consequences of bias in the lives of transgender and gender non-conforming people and suicide attempts.23

NIMH also reports that generally African-Americans, Latino/as and Asians have much lower suicide rates than whites and American Indians; our sample showed a different pattern of risk for suicide by race, with Black and Latino/a respondents showing dramatically elevated rates in comparison to their rates in the general population.

In terms of age group risk, the highest rates of suicide attempts in this study were reported among those in the 18-24 age group (45%) and 25-44 age group (45%), with only 16% of those over 65 reporting a suicide attempt. These rates are inverse to the general population, which shows a higher incidence of attempts among older Americans than youth.24

Respondents’ work status and experiences of discrimination in employment also had a sizable impact on their likelihood of having attempted suicide.

Over half of those bullied, harassed, assaulted, or expelled due to bias in school attempt suicide.

Our questionnaire did not ask at what age the respondents made suicide attempts and therefore it is difficult to draw conclusions about the risk of suicide over their life spans. However, there are a number of attributes that align with an increased rate of attempted suicide. High risk groups include visual non-conformers (44%) and those who are generally out about their transgender status (44%). Those who have medically transitioned (45%) and surgically transitioned (43%) have higher rates of attempted suicide than those who have not (34% and 39% respectively).
Those who were bullied, harassed, assaulted, or expelled because they were transgender or gender non-conforming in school (at any school level) reported elevated levels of suicide attempts (51% compared with 41% of our sample as a whole). Most notably, suicide attempt rates rise dramatically when teachers were the reported perpetrators: 59% for those harassed or bullied by teachers, 76% among those who were physically assaulted by teachers and 69% among those who were sexually assaulted by teachers. These numbers speak to the urgency of ending violence and harassment of transgender students by both their peers and their teachers.

Education and household income both align with suicide rates, with those earning $10,000 annually or less at extremely high risk (54%), while those making more than $100,000 are at comparatively lower risk (26%), while still tremendously higher than the general population. Those who have not completed college attempted suicide at higher rates (48% among those with no high school diploma, 49% for those with a high school diploma only, and 48% for those with some college education) while those have completed college (33%) or graduate school (31%) have lower rates.

Those who had survived violence perpetrated against them because they were transgender or gender non-conforming were at very high risk; 61% of physical assault survivors reported a suicide attempt, while sexual assault survivors reported an attempt rate of 64%.

“My suicide attempt had a lot to do with the fact that I felt hopeless and alone in regards to my gender identity.”
CONCLUSIONS FOR HEALTH

Respondents reported serious barriers to health care and outrageous frequencies of anti-transgender bias in care, from disrespect to refusal of care, from verbal harassment to physical and sexual abuse. Transgender people of color and low-income respondents faced substantially elevated risk of abuse, refusal of care, and poor health outcomes than the sample as a whole.

The data gathered here speak to a compelling need to examine the connection between multiple incidences of discrimination, harassment and abuse faced by our respondents in the health care system and the high risk for poor health outcomes. Additionally, our data suggest that discriminatory events are commonplace in the daily lives of transgender people and that this has a cumulative impact—from losing a job because of bias to losing health insurance; from experiencing health provider abuse to avoiding health care; from long-term unemployment to turning to work on the streets. The collective impact of these events exposed our respondents to increased risk for HIV infection, smoking, drug/alcohol use, and suicide attempts.

It is important to note that the traumatic impact of discrimination also has health care implications. Transgender people face violence in daily life; when this risk is compounded by the high rates of physical and sexual assault they face while accessing medical care, health care costs increase, both to treat the immediate trauma as well as ongoing physical and psychological issues that may be created.

As we have seen across a number of categories in the survey, the ability to work substantially impacts transgender health. In particular, those who have been fired due to anti-transgender bias and those who have done sex work, drug sales, or other work in the underground economy are much more likely to experience health risks that are shown to lead to poorer health outcomes.

Discrimination in the health care system presents major barriers to care for transgender people and yet a majority of our survey participants were able to access some transition-related care, with 75% receiving counseling and 62% obtaining hormones. Genital surgery, on the other hand, remains out of reach for a large majority, despite being desired by most respondents. This is one important reason why legal rights for transgender people must never be determined by surgical status.

“I saw a doctor in New York and told her how I wanted [chest surgery]. She looked at me sternly and said, ‘I can’t believe you are wasting my time. Do you know what your problem is? You just want to be a boy. You want to be a boy and that’s never gonna happen so just do yourself a favor and get over it.’ Then she left the room abruptly. I grabbed my things and bolted down the street, feeling like the biggest freak in the world.”
RECOMMENDATIONS FOR HEALTH

• Anti-transgender bias in the medical profession and U.S. health care system has catastrophic consequences for transgender and gender non-conforming people. This study is a call to action for the medical profession:
  • The medical establishment should fully integrate transgender-sensitive care into its professional standards, and this must be part of a broader commitment to cultural competency around race, class, and age;
  • Doctors and other health care providers who harass, assault, or discriminate against transgender and gender non-conforming patients should be disciplined and held accountable according to the standards of their professions.
• Public and private insurance systems should cover transgender-related care; it is urgently needed and is essential to basic health care for transgender people.
• Ending violence against transgender people should be a public health priority, because of the direct and indirect negative effect it has on both victims and on the health care system that must treat them.
• Medical providers and policy makers should never base equal and respectful treatment and the attainment of appropriate government-issued identity documents on:
  • Whether an individual has obtained surgery, given that surgeries are financially inaccessible for large majorities of transgender people because they are rarely covered by either public or private insurance;
  • Whether an individual is able to afford or attain proof of citizenship or legal residency.
• Rates of HIV infection, attempted suicide, drug and alcohol abuse, and smoking among transgender and gender non-conforming people speak to the overwhelming need for:
  • Transgender-sensitive health education, health care, and recovery programs;
  • Transgender-specific prevention programs.
• Additional data about the health outcomes of transgender and gender non-conforming people is urgently needed:
  • Health studies and other surveys need to include gender identity as a demographic category;
  • Information about health risks, outcomes and needs must be sought specifically about transgender populations;
  • Transgender people should not be put in categories such as “men who have sex with men” (MSM) as transgender women consistently are and transgender men sometimes are. Separate categories should be created for transgender women and transgender men so HIV rates and other sexual health issues can be accurately tracked and researched.
Endnotes

1 HIV rates are presented with two decimal places for more accurate comparison with general population figures.


3 These results were based on question 30, which was prefaced by: “Based on being transgender/gender non-conforming, please check whether you have experienced any of the following in these public spaces,” and asked respondents to indicate whether they had been “denied equal treatment or service” for each of the various locations.

4 These results were based on question 43, which was prefaced by: “Because you are transgender/gender non-conforming, have you had any of the following experiences?” and asked respondents to indicate whether “a doctor or other provider refused to treat me because I am transgender/gender non-conforming.”


10 The facial feminization surgery rate was determined differently than the other surgery data. We determined the rate by looking at how many respondents reported spending a valid dollar amount in Question 45.

11 HIV rates are presented with two decimal places for closer comparison with general population figures.


20 The general population, lesbian and gay, and bisexual data in this table is from California Department of Health Services, “California Lesbians, Gays, Bisexuals, and Transgender (LGBT) Tobacco Use Survey — 2004.” The data on transgender persons is ours.


23 American Foundation for Suicide Prevention, “Risk Factors for Suicide” (2010): http://www.afsp.org/index.cfm?fuseaction=home.viewPage&page_id=05147440-E24E-E376-BDF48F8B9A6444E76. According to the Substance Abuse and Mental Health Services Administration, adults who have had a major depressive episode—the leading risk factor for suicide—in the previous twelve months had an attempt rate of 10.4%.

FAMILY LIFE

Respondents answered several questions about family life, specifically about relationships with their families, partners/spouses, and children. We wanted to know how living, parenting and partnering as a transgender or gender non-conforming person had impacted relationships; we also wanted to know if participants were the primary providers for the economic security of children or others.

Our results showed a combination of improved relationships and successful development of families alongside major challenges in retaining friendships, partnerships, and relationships with children. Among some groups of respondents, coming out to family members and friends had a positive impact, while for others, relationships faced considerable challenges.

KEY FINDINGS IN FAMILY LIFE

- Forty-five percent (45%) of respondents reported that their family is as strong today as it was before coming out.

- Forty-three percent (43%) maintained the majority of family bonds.

- Thirty-eight percent (38%) of the sample were parents with 18% reporting that they currently have at least one dependent child.

- Seventy percent (70%) of respondents reported that their children continued to speak to them and spend time with them after coming out.

- Fifty-seven percent (57%) of respondents experienced family rejection.

- Relationships ended for 45% of those who came out to partners.

- Twenty-nine percent (29%) of those with children experienced an ex-partner limiting their contact with their children.

- Courts limited or stopped relationships with children for 13% of respondents, with Black, Asian, and multiracial respondents experiencing higher rates of court interference.

- Nineteen percent (19%) of respondents reported experiencing domestic violence by a family member because they were transgender or gender non-conforming.

- Family acceptance was strongly connected with a range of positive outcomes while family rejection was connected with negative outcomes. Those who were rejected by family members had considerably elevated negative outcomes, including homelessness (three times the frequency), sex work (double the rate), and suicidality (almost double), compared to those that were accepted by their family members.

- Domestic violence at the hands of a family member was also strongly connected to negative outcomes, with domestic violence survivors reporting four times the rate of homelessness, four times the rate of sex work, double the HIV rate, and double the rate of suicide attempts compared to their peers who did not experience family violence.

“When I asked my father to sign a ‘consent to treat’ form so I could start hormone therapy in 1970, he tore it up and threatened to kill me if I went ahead with transition.”
Outness to Family

We asked about outness to family members or “at home” in two different ways. First, we asked respondents whether they tell family members they are transgender or gender non-conforming. Overall, 57% reported telling family members they are transgender or gender non-conforming. Transgender respondents reported this more often (64%) compared to gender non-conforming respondents (35%).

Outness to Family by Gender Identity/Expression

Overall Sample | MTF | FTM | All Trans | GNC
---|---|---|---|---
57% | 62% | 68% | 64% | 35%

Whether or not respondents reported telling family members varied somewhat by race; multiracial (59%) and white (57%) respondents more often reported doing so.

Outness to Family by Race

Overall Sample | American Indian | Asian | Black | Latino/a | White | Multiracial
---|---|---|---|---|---|---
57% | 51% | 47% | 46% | 51% | 57% | 59%

“My partner knows about my cross-dressing but is not and does not want to be involved. My partner is afraid my being found out will affect our relationship and our lives dramatically. If there was not such a stigma with appearing or acting like another gender to any degree, she would be fine with my dressing. I know in my lifetime this probably will not change.”

We also asked how many people they were out to “at home.” Because home does not necessarily include family members, and may instead include friends, roommates, and other non-family members, this is not an exact measure of outness to family.

Overall, 73% reported they were out at home to “most” or “all,” 17% were out to “some” or “a few,” and 10% were out to no one.

Of those who had transitioned, 88% were out to “most” or “all” at home, 8% were out to “some” or “a few,” and 4% were out to no one.
Parenting

Only 38% of respondents identified themselves as parents, compared to 64% of the general population. Part of this difference may be due to the relative age of our sample compared to the general population. Yet, looking at status as a parent by age, reveals different patterns of parenting by age compared to the general population.

Being a parent appears to be strongly related to age of transition. Those who transitioned later in life were much more likely to be parents; 82% of those who transitioned at age 55 or older were parents compared to 38% of those who transitioned between the ages of 25 and 44.

“My partner and I are in the process of adopting a child whom we’ve been fostering for the past two years. We’ve been engaged in a legal battle since November of 2007, when a social worker decided (primarily, we’ve been told by a number of sources, because of my transgender status) to try to remove her from our home.”

Latino/a and white respondents reported the highest rates of parenting of any racial/ethnic groups at 40% each. Asian respondents had the lowest rate at 18%.
Transgender women were parents (52%) considerably more often than transgender men (17%). However, our transgender female sample was considerably older (44% were 45 or older) than the transgender male respondents (11% were 45 or older) and age is associated with increased rates of parenting.

Transgender respondents, overall, reported being parents at 41%, compared to 20% of gender non-conforming respondents (again, this may be partly explained by differences in the age of these groups). Sixty-one percent (61%) of male-born cross-dressers said they were parents.

### Parenting Rate by Gender

<table>
<thead>
<tr>
<th>Gender</th>
<th>Parenting Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>MTF</td>
<td>52%</td>
</tr>
<tr>
<td>FTM</td>
<td>17%</td>
</tr>
<tr>
<td>All Trans</td>
<td>39%</td>
</tr>
<tr>
<td>GNC</td>
<td>20%</td>
</tr>
</tbody>
</table>

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**Dependants**

We asked respondents how many children currently rely on their income. Note that the question did not ask whether the children were under 18 years of age, or specify a biological or legal relationship.

Federal surveys generally ask respondents about the number of children in a household, rather than the number of dependents, so it is difficult to compare federal statistics to these data.

Eighteen percent (18%) of the sample reported at least one dependent.

### Number of Dependent Children

- Zero dependents: 82%
- One dependent: 9%
- Two dependents: 6%
- Three dependents or more: 3%

Generally, those with higher levels of household income and education were more likely to be responsible for children, with 18% of respondents making more than $100,000 annually reporting two or more dependents. People in the workforce reported more dependents than those who were unemployed or out of the workforce.
Black and Latino/a respondents were slightly more likely to be providing for two or more children.

MTF respondents were supporting dependents much more often (22%) than their FTM peers (12%).
Family Strength and Acceptance

“AS STRONG TODAY”

We asked three general questions about our respondents’ family relationships. Depending on the individual respondent, answers to these questions may relate to parents and siblings (family of origin), spouse/partner and children, or both.

Almost half of the sample (45%) reported that their family is as strong today as before coming out. Conversely, 55% indicated their family was not as strong today. Those who reported a higher level of family resilience include Black (55%) and Asian (49%) respondents as well as 52% of respondents without a high school diploma. These data counters prevailing mythologies about race, culture and class and family acceptance of transgender and gender non-conforming people.

“As Strong Today” by Race

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Sample</td>
<td>45%</td>
</tr>
<tr>
<td>American Indian</td>
<td>48%</td>
</tr>
<tr>
<td>Asian</td>
<td>49%</td>
</tr>
<tr>
<td>Black</td>
<td>55%</td>
</tr>
<tr>
<td>Latino/a</td>
<td>47%</td>
</tr>
<tr>
<td>White</td>
<td>45%</td>
</tr>
<tr>
<td>Multiracial</td>
<td>53%</td>
</tr>
</tbody>
</table>

“As Strong Today” by Educational Attainment

<table>
<thead>
<tr>
<th>Educational Attainment</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No HS Diploma</td>
<td>52%</td>
</tr>
<tr>
<td>High School Diploma</td>
<td>41%</td>
</tr>
<tr>
<td>Some College</td>
<td>41%</td>
</tr>
<tr>
<td>College Degree</td>
<td>47%</td>
</tr>
<tr>
<td>Graduate Degree</td>
<td>49%</td>
</tr>
</tbody>
</table>

“IMPROVING AFTER COMING OUT”

A majority of respondents (61%) reported that their family relationships have slowly improved after coming out, with Latino/a (65%) and white (61%) respondents reporting the highest percentages of improvement. Those who had made medical (63%) and surgical (66%) transitions, and visual conformers (67%) also reported high rates of improving family relationships.

“I have been very fortunate to live in the state where I do, where people for the most part, are open-minded and accepting. I have also been fortunate to have the support of my parents and my, now, 11 year-old son who I came out to when he was age 6.”

“After coming out to my family last year, I was told they ‘support me 100%’ and then they proceeded to change their phone number and discontinued any contact.”
FAMILY ACCEPTANCE/REJECTION

Two-fifths (40%) of respondents reported that their parents or other family members “chose not to speak or spend time with me” due to their gender identity/expression. Sixty percent (60%) did not experience this type of family rejection.

Family rejection was worse for multiracial (49%), American Indian (46%), and Latino/a (44%) participants. Also at higher risk than the full sample for family rejection were those earning $10,000 or less annually (47%), those earning between $10,000 and $20,000 annually (48%), the unemployed (47%), those working in the underground economy (52%) and those who reported they lost a job due to bias (57%). MTFs and transgender participants fared worse with their families than their FTM and gender non-conforming counterparts.

“I just wish my daughter would come back to me. I fear I have lost her.”

Family Rejection by Race

Family Rejection by Gender
Partner and Spousal Relationships

Nearly half (45%) of those who responded to the statement “my relationship with my spouse or partner ended” reported that their relationship with that spouse or partner ended due to their transgender identity or gender non-conformity; over half (55%) stayed in their relationship (or the relationship ended for other reasons). These data indicate that relationships are maintained at a much higher rate than some might expect.

Those respondents who had transitioned did see their relationships end at a higher rate, with 55% of relationships ending. Additionally, the age the respondent began living full time was closely connected to whether a relationship ended. Those who transitioned at a younger age were more likely to have maintained their relationship through a transition, with 59% of people maintaining their relationship if they transitioned between the ages of 18-24 compared to only 36% of relationships lasting for those between the ages of 45-54.

We also saw that whether or not relationships ended was connected to gender identity. Transgender women were more likely to experience the end of a relationship, compared to transgender men, except for those transitioned under the age of 18. This gender difference increased as the age of transition for respondents increased.4

Unemployed respondents (50%) and those who had lost jobs due to bias (62%) reported higher rates of relationship disruption. Male-to-female transgender respondents also reported higher rates of disruption (57%) than their FTM peers (39%) and transgender respondents lost their partnerships more often (50%) than gender non-conforming respondents (22%).

For information on current relationship status of the survey respondents, see the Portrait chapter.

“"I am married, and my wife knew about my status by the time of our second date. She said she could accept me as I was. After we were married, and she was pregnant with our son, she told me I could not be who I wanted/was. Out of a sense of commitment, I have stayed with her, and have not been able to fully express who I really am. I have considered suicide. After all, smoking and drinking are a civilized way of committing suicide.""


Relationships with Children

For the majority of our respondents, relationships with children remained the same, although for a sizable minority, contact with their children was limited or denied.

When asked if being transgender or gender non-conforming had impacted their situation as parents, 22% of respondents reported an improved situation and 29% reported that their situation was worse. Almost half (49%) reported that their situation as parents either “remained the same” or was “in some ways better, in some ways worse.”

Asian (21%), Latino/a (20%) and Black (14%) respondents all had higher rates of improvement in their parenting situations after coming out than their white counterparts (9%).

Lower household income respondents (under $10,000/year) experienced a much improved situation somewhat more often (15%) than their peers earning over $100,000 annually (11%). However, they were also more likely to report a “much worse” situation (24%) versus those with high household income (7%).

Respondents who had worked in the underground economy reported a higher level of improvement (17%) than the sample as a whole, as well as a higher rate of reporting “much worse.”

Those without a high school diploma were more likely to report a much improved parenting situation (26%) versus the overall sample (10%) and, in general, those without a high school diploma and those with only a high school diploma were least likely to report any of the “worse” options.

Others reported that their parenting situation was “much worse.” This includes 23% of respondents who have lost a job due to bias and 16% of the unemployed.
EX-PARTNER/SPOUSE LIMITING OR STOPPING RELATIONSHIPS WITH CHILDREN

Of respondents who had children and were in a relationship that ended, 29% reported that their ex-spouse or partner limited or stopped their relationships with their children because of their transgender identity or gender non-conformity. However, 71% have maintained their relationships with their children, or if they were limited or stopped it was not due to bias.

29% My ex limited or stopped my relationship with my children.

71% My ex did not limit or stop my relationship with my children.

Multiracial (33%) and Black (33%) respondents were more vulnerable to having their relationships with their children limited or stopped as were those who worked in the underground economy (35%) or had lost jobs due to bias (43%). Male-to-female transgender respondents had their relationships with their children limited or stopped more often (34%) than FTM respondents (20%), and transgender participants were more vulnerable (32%) than gender non-conforming respondents (19%).

Of respondents who had children and were in a relationship that ended, 13% reported that a court or judge stopped or limited their relationships with children because of their transgender identity or gender non-conformity. However, this does not necessarily mean that 87% of transgender parents who appeared before a court in a custody dispute did not experience discrimination. The way we posed this question suggests that 87% of respondents either came to an agreement with their ex-spouse or partner over the issue of custody outside of court or, if they went to court, had a positive outcome.

Compared to the 13% of the overall sample that experienced court interference, Black (29%) and multiracial (20%) respondents were much more vulnerable to court interference, as were respondents earning a household income of $10,000/year or less (29%), those working in the underground economy (27%) and those who had lost jobs due to bias (26%).

Male-to-female transgender respondents suffered court interference more often (16%) than their FTM peers (8%).

--

* Sample size too low to report
Thirty percent (30%) of respondents reported that their children have chosen not to speak with them or spend time with them due to their gender identity/expression. Still, a large majority (70%) reported that their children chose to continue their relationship.

White respondents experienced child rejection at the highest rate of any racial group (31%). Respondents whose household income was $10,000/year or less (33%), those without a high school diploma (37%), and those who had lost jobs due to bias (43%) all reported high level of rejection by their children. Male-to-female transgender respondents experienced child rejection more often (37%) than female-to-male transgender participants (10%). Transgender respondents endured child rejection more often (33%) than gender non-conforming participants (10%). Those who reported living full time in their preferred gender (37%), and those who had undertaken a medical (35%) or surgical (37%) transition all reported higher rates of child rejection.
Family Violence

Nineteen percent (19%) of respondents have experienced domestic violence at the hands of a family member because of their transgender identity or gender non-conformity.

American Indian (45%), Asian (36%), Black (35%) and Latino/a (35%) respondents reported higher rates of domestic violence than the full sample, as well as undocumented non-citizens (39%), those earning under $10,000 annually (38%), those without a high school diploma (39%), the unemployed (30%), respondents who have lost jobs due to bias (35%) and those who worked in the underground economy (42%). MTF respondents endured family violence more often (22%) than FTM respondents (15%), while gender non-conforming respondents were victimized more often (21%) than their transgender peers (19%).

Friendships

Over half the sample (58%) experienced the loss of close friendships as a result of their gender identity/expression.

Black and Asian respondents were least likely to have lost a close friend than other racial cohorts. Those most at risk for losing close friends included undocumented non-citizens (66%), those who had lost jobs due to bias (79%) and those engaged in the underground economy (70%). MTFs lost friends more often (67%) than FTMs (51%) and transgender respondents lost friends at a higher rate (61%) than their gender non-conforming peers (49%).

“I cannot come out of the closet until I have graduated college and/or have a steady job, because I would be disowned by my parents and they would stop paying for my education.”
Making the Connections: Family Rejection and Domestic Violence, Homelessness, Incarceration, and Health

In this section, we examine the connections between negative experiences at home and how they relate to income, incarceration, homelessness, work in the underground economy and health outcomes.

FAMILY REJECTION OR ACCEPTANCE

To compare the experiences of respondents who had been accepted by their families with those who were rejected, we created a new variable using the answers to several statements about family acceptance. Fifty-seven percent (57%) faced some rejection by their family and 43% were accepted.

Family Acceptance/Rejection by Household Income

<table>
<thead>
<tr>
<th>Household Income</th>
<th>Those whose families accepted them</th>
<th>Those whose families rejected them</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 10K</td>
<td>13%</td>
<td>16%</td>
</tr>
<tr>
<td>10K-under 20K</td>
<td>11%</td>
<td>13%</td>
</tr>
<tr>
<td>20K-under 50K</td>
<td>30%</td>
<td>33%</td>
</tr>
<tr>
<td>50k-100k</td>
<td>31%</td>
<td>26%</td>
</tr>
<tr>
<td>100k+</td>
<td>16%</td>
<td>12%</td>
</tr>
</tbody>
</table>

Household Income

Those whose families accepted them tended to have higher current household incomes than those who experienced family rejection. For example, 47% of those whose families accepted them made more than $50,000/year compared to 38% of those whose families rejected them.

Homelessness

Twenty-six percent (26%) of those who experienced family rejection also reported having experienced homelessness, nearly three times higher than those whose families were accepting (9%).

Incarceration

Nineteen percent (19%) of those who experienced family rejection had been incarcerated compared to only 11% of those whose families were accepting.

Underground Economy

Nineteen percent (19%) of those who experienced family rejection had worked in the underground economy for income, compared to only 11% of those whose families were accepting. Specifically, 13% of those who experienced family rejection had done sex work for income, compared to 7% of those whose families were accepting.

HIV

The contrast between HIV rates of the two groups was less stark, with 2.46% of those who experienced family rejection also reporting an HIV-positive status, compared to 2.04% of those whose families were accepting.

Suicide

Family rejection dramatically increased the likelihood of suicide attempts. Fifty-one percent (51%) of those who experienced family rejection reported having attempted suicide, compared to 32% of those whose families were accepting.

Smoking

Thirty-two percent (32%) of those who experienced family rejection reported being current smokers. For those whose families were accepting, the rate was slightly lower at 27%.

Drugs and Alcohol

Thirty-two percent (32%) of those who experienced family rejection also reported having used drugs or alcohol to deal with the mistreatment they faced as a transgender or gender non-conforming person. This compared with 19% of those whose families were accepting.

“My parents threatened to disown me. ‘It was a sin,’ ‘I was sick,’ ‘I wanted to mutilate my body,’ etc. I drank fairly heavily from when I was 14 on. And I just kept drinking.”
DOMESTIC VIOLENCE

Of those who experienced family rejection, we found that those who experienced domestic violence by family members experienced other negative outcomes at particularly alarming rates, explained below.

Homelessness

Family violence had a strong apparent link to homelessness. Forty-eight percent (48%) of those who experienced domestic violence also reported having experienced homelessness, nearly four times the rate of those whose families were accepting (9%).

Incarceration

Twenty-nine percent (29%) of those who experienced domestic violence reported having been incarcerated, compared to only 11% of those whose families were accepting.

Underground Economy

Thirty-eight percent (38%) of those who experienced domestic violence also reported having worked in the underground economy for income, compared to only 11% of those whose families were accepting.

Specifically, 29% of those who experienced domestic violence also reported having done sex work for income, a rate more than four times as high than those whose families were accepting (7%).

HIV

Five and a half percent (5.5%) of those who experienced domestic violence also reported being HIV-positive. This compared to 2.04% of those whose families were accepting and our overall sample rate of 2.64%.

Suicide

Sixty-five percent (65%) of those who experienced domestic violence also reported having attempted suicide, compared to 32% of those whose families were accepting.

Alcohol and Drugs

Forty-seven (47%) of those who experienced domestic violence also reported drinking or misusing drugs to cope with the mistreatment they faced as transgender or gender non-conforming people. This compared with 19% of those whose families were accepting.
CONCLUSIONS FOR FAMILY LIFE

Our analysis shows that many transgender and gender non-conforming people experienced improvement in their family relationships after coming out. Others endured considerable challenges including rejection by partners, friends, and family members. A majority experienced both good and bad, and this didn’t differ much by race.

Occasionally, family rejection took severe forms including domestic violence, which was associated with some of the most alarming rates of negative outcomes later in life.

Nonetheless, these data contradict the assumption that coming out as transgender or gender non-conforming always causes relationships with spouses or partners to end; we found about half of respondents staying in the same relationship (or having broken up for other reasons).

Children of transgender and gender non-conforming parents were generally accepting although their relationships were sometimes limited by ex-partners/spouses or family court judges. It appears that partner and judicial biases towards transgender and gender non-conforming parents often obstruct ties with children.

While family rejection was shown to be related to a number of negative outcomes including homelessness, HIV and suicide attempts, those respondents whose families accepted them had better health outcomes and enjoyed higher levels of social and economic security that the full sample. It appears that family support and safety nets can have a major positive impact on the lives of transgender and gender non-conforming people even in the face of pervasive mistreatment and discrimination outside of the home.

All of these statistics appear to confirm the groundbreaking findings of the Family Acceptance Project (FAP), a multi-year study that examines the impact of family rejection on LGBT youth health outcomes. Aligned with FAP findings, data in this study show a strong correlation between family acceptance and health as well as social and economic security for adult transgender and gender non-conforming adults, making a strong case for more research in this emerging arena of study.
RECOMMENDATIONS FOR FAMILY LIFE

• Family members of transgender and gender non-conforming people who are coming out should educate themselves so that they can accept and continue to support their loved one and provide a place to turn to in the face of mistreatment or discrimination in wider society.

• Those involved with the family court system should be educated about transgender and gender non-conforming people, their continuing ability to be good parents, and the destructive consequences of separating parents and children.

  • Family court judges should be educated about research showing that remaining in a strong relationship with a transgender or gender non-conforming parent is in “the best interest of the child,” and that transgender or gender non-conforming children need to be in custody of parents or guardians who accept them. Furthermore, transgender and gender non-conforming parents should not be restricted from expressing their identity or gender non-conformity during visitation.

  • Guardians Ad Litem and Court Appointed Special Advocates should be trained to understand that transgender and gender non-conforming children need to be in custody of parents or guardians who are accepting of their gender identity/expression. They also need to understand that it is in “the best interest of the child” to have contact with their transgender or gender non-conforming parent.

  • Lawyers involved in family court issues should not make arguments to limit custody or contact with children a parent is transgender or gender non-conforming.

  • Experts or professionals that the court relies on for analysis and advice who express bias against transgender or gender non-conforming children or adults should be removed from their cases.

• Adoption and foster care agencies should similarly be educated and establish policies of nondiscrimination for potential parents based on gender identity/expression and race.

• Social service providers should be aware of the likelihood of family rejection and domestic violence for transgender and gender non-conforming people and be prepared to be a resource or intervene as appropriate.

  • School counselors should be aware of the potential challenges transgender and gender non-conforming youth may be facing at home as well as in school, so that they can provide needed assistance.

  • Social workers should provide services friendly to transgender and gender non-conforming people as well as develop referral lists of other social service providers accessible to transgender and gender non-conforming people including homeless shelters and domestic violence shelters.

• Counselors and therapists in private practice should be prepared to counsel individuals and families who have a transgender or gender non-conforming family member and assist these families in accepting and supporting their identity.

• Family and marriage counselors should be able to assist spouses and partners dealing with gender identity/expression issues and what they may mean for their relationship. They should encourage understanding on the part of all parties and, if separation is warranted, they should also assist with an amicable breakup and ensure that any children continue to have relationships with their parents.
Endnotes

1 We included those that tell “everyone” in this calculation.


3 Ibid.

4 No data is available in this study to explain the differences between MTF and FTM respondents in relationship preservation. However, based on anecdotal evidence, this may be due to a difference in the sexual orientation of the partner of the transitioning individual and the norms that go with that sexual orientation.

5 Those who responded “Yes” to any of the following statements were in the family rejection group: “my relationship with my spouse or partner ended,” “my ex limited or stopped my relationship with my children,” “a court/judged limited or stopped my relationship with my children,” “my children chose not to speak with me or spend time with me,” “my parents or family chose not to speak with me or spend time with me,” or “I was a victim of domestic violence by a family member.”

6 HIV rates have not been rounded for better comparison to national rates.

7 HIV rates have not been rounded for better comparison to national rates.

8 For more, see The Family Acceptance Project at http://familyproject.sfsu.edu/home.

HOUSING AND HOMELESSNESS

Housing is a necessity and a basic human right but one that is often denied to transgender and gender non-conforming people. Direct discrimination as well as the aggregate effects of mistreatment and denied opportunities across multiple aspects of life create a tenuous and often threatening housing landscape for participants in this study.

We asked a series of questions to evaluate the impact of anti-transgender bias in housing. Respondents reported substantial housing insecurity while employing a variety of strategies to secure shelter and make a home.

We also asked several questions specifically about shelters, including homeless and domestic violence shelters. These responses confirmed the study team’s anecdotal experience that emergency shelter systems as a whole are utterly failing to provide safety or relief for transgender and gender non-conforming people facing a housing crisis.

KEY FINDINGS IN HOUSING AND HOMELESSNESS

- The various forms of direct housing discrimination faced by respondents included 19% being denied a home or apartment and 11% being evicted because they were transgender or gender non-conforming.

- Nineteen percent (19%) of respondents became homeless at some point because they were transgender or gender non-conforming, and 1.7% of respondents were currently homeless.¹

- Those who had experienced homelessness were 2.5 times more likely to have been incarcerated (34%) than those who had not (13%), and were more than four times more likely to have done sex work for income (33%) than those who had not (8%). They were more likely to be HIV-positive (7.12%) than those who had not (1.97%), and were much more likely to have attempted suicide (69%) than those who had not (38%).²

- For those respondents who had attempted to access homeless shelters, 29% were turned away altogether, 42% were forced to stay in facilities designated for the wrong gender, and others encountered a hostile environment. Fifty-five percent (55%) reported being harassed, 25% were physically assaulted and 22% were sexually assaulted.

- Respondents were forced to use various strategies to secure shelter including moving into a less expensive home/apartment (40%), moving in with family or friends (25%), and having sex with people to sleep in a bed (12%).

- Thirty-two percent (32%) of respondents reported owning their home, compared to 67% of the general population.

- Respondents demonstrated resilience: Of the 19% who reported facing housing discrimination in the form of a denial of a home/apartment, 94% reported being currently housed.

“I’m homeless, sleeping in makeshift housing under a bridge.”
Current Housing Situation

We asked respondents to indicate their current housing situation, in order to establish a national snapshot of their living situation at the time the survey was fielded.

Currently Homelessness or Living in a Shelter

We first asked about homelessness; 1.7% of the sample responded that they were currently homeless or living in a shelter, which is nearly double the percentage that the National Coalition for the Homeless estimates for the U.S. population.4 Those particularly vulnerable to being currently homeless included African Americans (13%), American Indians (8%) and undocumented non-citizens (4%). The unemployed (7%), those working in the underground economy (7%) and those without a high school diploma (8%) also reported high rates of homelessness. Three percent (3%) of those who had lost a job due to bias were currently homeless.

As will be demonstrated later in this chapter, transgender people faced real barriers accessing shelter resources; therefore, it is possible that an even higher percentage of our sample needed shelter services but were unable or afraid to access them.

“I am now being evicted from the garage I have been living in the last several months, and in parting fashion, this afternoon I was informed that I have been denied access to renting a two-decade-old mobile home, the only place I could find with my limited income.”
LIVING WITH FAMILY OR FRIENDS TEMPORARILY

Four percent (4%) of the sample reported living with family members or friends temporarily. Those who were younger were more likely to report this experience, as were Black (8%), and Latino/a (7%) respondents, as well as those who worked in the underground economy (8%). Although these respondents are not currently homeless, their “temporary” status suggests a substantial level of housing insecurity.

GROUP HOMES AND FOSTER CARE

Less than 1% of respondents were currently living in a group home or foster care. However, Black (5%), Latino/a (1%) and multiracial respondents (1%) were in group or foster care situations at slightly higher rates, as were those making less than $10,000/year (2%) and those without a high school diploma (4%).

SKILLED NURSING AND ADULT CARE FACILITIES

Only .1% of the overall sample reported living in a skilled nursing or adult care facility. Due to small sample size, we are unable to provide more details about this group.

“I fear growing old as I feel I would be treated poorly if I ever ended up in an elder care home.”
CAMPUS AND UNIVERSITY HOUSING

Four percent (4%) of respondents reported living in university or campus housing. As expected, the age category with the highest rate was 18-24 year olds (8%); the percentage for 25-44 year olds was 3%.

LIVING WITH PARENTS OR FAMILY MEMBERS

Seven percent (7%) of the sample reported currently living with their parents or family “they grew up with.” Though younger respondents were more likely to have marked this response, 3% of 45-54 year olds did as well. We did not ask whether respondents were living with family members because they needed to for financial reasons, wanted to, or had invited aging relatives into their homes to care for them.

LIVING WITH PARTNER OR SPOUSE WHO PAYS

Eight percent (8%) of respondents said they lived with a partner or spouse who paid for their housing. Those who were unemployed (18%) and out of the workforce (10%) were particularly likely to be relying on a spouse or partner to cover housing expenses. In terms of race, Latino/as were the most likely to have marked this response at 14%.

Asian respondents had the highest rate of living with parents or family members of any race.
RENTING A HOUSE, APARTMENT, OR CONDO

Forty-two percent of respondents said they lived in a house, apartment, or condo that they rent. Renting did not vary widely across race. However, transgender men were much more likely to rent their homes (52%) than transgender women (40%).

Those making between $10,000 and $50,000/year were the most likely to be renting their homes.

OWNING A HOUSE, APARTMENT, OR CONDO

Thirty-two percent (32%) of respondents reported owning their place of residence. This is less than half of the national average of 67.4% reported by the U.S. Department of Housing and Urban Development (HUD) in the second quarter of 2009, at approximately the same time as the survey was launched.

Transgender women were more likely to own their homes (36%) than transgender men (20%), and transgender respondents were more likely to own their homes (30%) than their gender non-conforming peers (24%). As might be expected, home ownership rose with age, from 15% of those aged between 18 and 24 to 71% of those over 65 years old.

People of color were much less likely to own their homes than white respondents. African American respondents were the least likely to own their homes at 14%. By comparison, the U.S. Department of Housing and Urban Development reports that “minority home ownership” nationwide was 49.7% during the comparable period.
Home ownership also rose with income, but even in the highest income categories, our respondents have a lower rate of home ownership that the general population (67%).

Negative Housing Outcomes

We asked respondents to report on experiences related to housing conditions and situations they’ve encountered due to anti-transgender bias over their lifetime. We found high levels of homelessness and eviction, as well as spending down of assets and moving into less desirable housing due to bias.

“I MOVED INTO A LESS EXPENSIVE HOME/APARTMENT”

Forty percent (40%) of respondents said they had moved into a less expensive home or apartment due to bias. Those hit hardest were Black (52%) and Latino/a (51%) respondents, as well as those making under $10,000/year (55%), and those who: were unemployed (54%), had lost a job due to bias (65%), had worked in the underground economy for income (63%) and had no high school diploma (54%).
Transgender women were much more likely to have moved into a less expensive home or apartment due to bias (50%) than their transgender male counterparts (34%). Transgender respondents were more likely to have done so (44%) than gender non-conforming respondents (28%).

**“I BECAME HOMELESS”**

Nineteen percent (19%) of respondents said they became homeless as a result of discrimination or family rejection based on gender identity. This figure is more than 2.5 times higher than the general population lifetime rate of homelessness (7.4%).

Fewer older people reported having been homeless with 10% of 55-64 year olds reporting homelessness at some point in their lives and 8% of those 65 and above experiencing homelessness at some point. Transitioning later in life was inversely related to homelessness, with the percentage of those who had been homeless decreasing as the age of transition increased. A possible explanation is that prior to a late-life transition process, these respondents may have hidden their transgender identity or gender non-conformity and thus been better able to preserve jobs and secure housing over time.

The U.S. Conference of Mayors cites a number of causal factors for homelessness. For families: a lack of affordable housing, poverty and unemployment, while for single people: substance abuse, lack of affordable housing and mental illness were the leading factors. As we’ve seen in this report, transgender and gender non-conforming people experience many of these situations and conditions at much higher rates than the general population due to discrimination.

As expected, respondents who faced economic challenges were at increased risk for homelessness: 39% of those who reported incomes of less than $10,000 per year had experienced homelessness, while those with incomes between $10,000 and $20,000 were at 26%, compared with 19% of the sample as a whole. Losing a job due to bias also led to highly elevated levels of homelessness. Forty percent (40%) of those who had been fired because of their gender identity reported having been homeless.

**“I HAVE BEEN EVICTED”**

Eleven percent (11%) of respondents said they had been evicted from housing at some point in their lives because they are transgender or gender non-conforming. African American respondents reported an exceptionally high eviction rate of 37%. Others reporting high rates included those with no high school diploma at 33%, those making under $10,000/year at 26%, and undocumented immigrants at 21%.
MTF respondents reported nearly twice the rate of eviction (16%) as their FTM counterparts (8%), and transgender respondents had twice the rate (13%) as gender non-conforming respondents (6%).
“I HAD TO MOVE BACK IN WITH FAMILY OR FRIENDS”
Twenty-five percent (25%) of respondents said they had to move in with family or friends because they were transgender or gender non-conforming. Black respondents reported the highest rate of this outcome at 47%, followed by multiracial respondents at 36%. Those without a high school diploma reported living with family or friends at 47%. Those working in the underground economy had a rate of 49%.

“I had to move back in with family or friends” by Race

“I HAD TO FIND DIFFERENT PLACES TO SLEEP FOR SHORT PERIODS OF TIME, LIKE A FRIEND’S COUCH”
Twenty-six percent (26%) of respondents reported having to find different places to sleep for short periods. Those working in the underground economy reported a rate of 56%, and Black respondents reported a rate of 48%. Those who had lost a job reported having to find different places to sleep for short periods at a rate of 49%. Also reporting high rates were those with no high school diploma (53%) and those making under $10,000/year (45%).

“I had to find different places to sleep for short periods of time, like a friend’s couch” by Race

“I had to find different places to sleep for short periods of time, like a friend’s couch” by Household Income
“I HAVE HAD SEX WITH PEOPLE TO SLEEP IN THEIR BED/AT THEIR HOMES OR TO PAY RENT”

Twelve percent (12%) of the sample reported having had sex with people to secure a place to stay. Those exchanging sex for housing in high numbers were those working in the underground economy (43%), those with no high school diploma (43%), Black respondents (38%), Latino/a respondents (27%), and those making under $10,000/year (25%).

“łam to have sex with people to sleep in their bed/at their homes or to pay rent” by Race

<table>
<thead>
<tr>
<th>Race</th>
<th>Overall Sample</th>
<th>American Indian</th>
<th>Asian</th>
<th>Black</th>
<th>Latino/a</th>
<th>White</th>
<th>Multiracial</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>12%</td>
<td>12%</td>
<td>27%</td>
<td>38%</td>
<td>27%</td>
<td>7%</td>
<td>20%</td>
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</tbody>
</table>

“I had to use equity in my home to pay for living expenses” by Race

<table>
<thead>
<tr>
<th>Race</th>
<th>Overall Sample</th>
<th>American Indian</th>
<th>Asian</th>
<th>Black</th>
<th>Latino/a</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>14%</td>
<td>11%</td>
<td>26%</td>
<td>13%</td>
<td>13%</td>
<td>16%</td>
<td>18%</td>
</tr>
</tbody>
</table>

“lam to have sex with people to sleep in their bed/at their homes or to pay rent” by Household Income

<table>
<thead>
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<th>Income Range</th>
<th>Overall Sample</th>
<th>Under $10K</th>
<th>$10K-under $20K</th>
<th>$20K-under $50K</th>
<th>$50K-under $100K</th>
<th>$100K+</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>12%</td>
<td>12%</td>
<td>12%</td>
<td>6%</td>
<td>3%</td>
<td></td>
</tr>
</tbody>
</table>

“lam to use equity in my home to pay for living expenses” by Household Income

<table>
<thead>
<tr>
<th>Income Range</th>
<th>Overall Sample</th>
<th>Under $10K</th>
<th>$10K-under $20K</th>
<th>$20K-under $50K</th>
<th>$50K-under $100K</th>
<th>$100K+</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>20%</td>
<td>15%</td>
<td>10%</td>
<td>13%</td>
<td>14%</td>
<td></td>
</tr>
</tbody>
</table>

“lam to have sex with people to sleep in their bed/at their homes or to pay rent” by Gender

<table>
<thead>
<tr>
<th>Gender</th>
<th>Sample</th>
<th>American Indian</th>
<th>Asian</th>
<th>Black</th>
<th>Latino/a</th>
<th>White</th>
<th>Multiracial</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>15%</td>
<td>12%</td>
<td>27%</td>
<td>38%</td>
<td>27%</td>
<td>7%</td>
<td>20%</td>
</tr>
<tr>
<td>Female</td>
<td>8%</td>
<td>12%</td>
<td>12%</td>
<td>6%</td>
<td>3%</td>
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</table>

Male-to-female respondents were nearly twice as likely to have traded sex for housing (15%) as their female-to-male counterparts (8%), but transgender respondents, overall, were equally likely to have traded sex for housing as gender non-conforming respondents (12%).

“I HAD TO USE EQUITY IN MY HOME TO PAY FOR LIVING EXPENSES”

Fourteen percent (14%) of respondents reported having to use equity in their home to pay for living expenses. Those reporting the highest rates included those with no high school diploma (34%), those who had lost jobs due to bias (28%), those 55-64 years old (27%), and African American respondents (26%).

“I had to use equity in my home to pay for living expenses” by Household Income

<table>
<thead>
<tr>
<th>Income Range</th>
<th>Overall Sample</th>
<th>Under $10K</th>
<th>$10K-under $20K</th>
<th>$20K-under $50K</th>
<th>$50K-under $100K</th>
<th>$100K+</th>
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<td>14%</td>
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</tbody>
</table>
Male-to-female respondents were more than twice as likely to have had to use equity in their home to pay for living expenses (21%) as their female-to-male counterparts (8%), and transgender respondents were more than three times as likely (16%) as gender non-conforming respondents (5%).

Access to Shelters

Of the 19% of respondents who had experienced homelessness, about a quarter (25%) reported trying to access a homeless shelter during that time. Their reports of attempting to access shelter describe a system in which abuses against transgender and gender non-conforming people are commonplace. These include denial of access, ejection when transgender status was disclosed, harassment by staff and residents, assault and forced presentation in the wrong gender. Nearly half of all respondents who accessed a shelter (47%) left due to poor treatment.

OUTRIGHT DENIAL

Housing insecurity for transgender and gender non-conforming people in the U.S. goes beyond eviction and homelessness; they are also frequently barred from access to safety nets meant to help people in crisis. Twenty-nine percent (29%) of respondents who attempted to access shelter reported being denied access to shelters altogether because they were transgender or gender non-conforming.

Groups reporting particularly high rates of denial of access to shelters included documented non-citizens (45%), Latino/a respondents (45%), those with no high school diploma (44%), those who had lost a job due to bias (40%), and Black respondents (40%).

Transgender women were much more likely to have been denied access to shelters (34%) than their transgender male counterparts (20%), and transgender respondents, overall, were far more likely (30%) to have been refused shelter than gender non-conforming respondents (12%).

In addition to those who were denied access outright, 25% of respondents reported being evicted after their transgender identity or gender non-conformity became known and 47% reported leaving a shelter due to poor treatment. Sixteen percent (16%) reported experiencing all three of these outcomes.
HARASSMENT AND ASSAULT

When provided access to shelter, respondents often reported living in hostile and dangerous environments. Many experience harassment, physical and sexual assault perpetrated by either shelter residents or staff.

Harassment

Over half of respondents (55%) reported being harassed by residents or staff members of shelters. Looking at race, Latino/as reported the highest rate of harassment at 63%, followed by Black respondents at 61%.

Others reporting high rates of harassment included documented non-citizens (62%), those who had lost a job due to bias (70%), and those working in the underground economy (65%).

Physical Assault

One quarter (25%) of respondents who accessed shelter reported having been physically assaulted by either another resident or a staff person. Looking at race, Black respondents reported the highest rate at 31%.

Others reporting high rates of physical assault included undocumented non-citizens at 50% and those who had lost a job due to bias at 35%.

Transgender women were almost twice as likely to have been physically assaulted in a shelter (29%) than transgender men (15%), and transgender respondents were more likely to have been assaulted (25%) than gender non-conforming respondents (20%).
Sexual Assault

Twenty-two percent (22%) of respondents who accessed shelter reported being sexually assaulted by either another resident or a staff person. Looking at race, Black respondents reported the highest rate of sexual assault at 33%, followed by Latino/as at 31%.

Others reporting high rates of sexual assault included undocumented non-citizens (40%) and those who had lost a job due to bias (32%).

MTF respondents were more likely (26%) than FTM respondents (15%) to report sexual assault. Transgender respondents were nearly six times more likely to report sexual assault (23%) than gender non-conforming respondents (4%).

Forced to Live as the Wrong Gender

Among respondents who accessed a shelter, 42% reported that they were forced to live as the wrong gender to be allowed to stay. Being forced to live as the wrong gender can range from being required to alter a hairstyle or make-up to radically altering gender presentation from head to toe. More than half of those who had lost a job due to bias (51%) said they had had to live as the wrong gender to access a shelter, along with 47% of the unemployed and 47% of those who worked in the underground economy. African-American respondents experienced high levels of coerced presentation, with 48% being forced to live in the wrong gender.

Also hard hit were those who reported that they were not visually conforming (51%).

Those who had had surgery were less likely to be subjected to coerced gender presentation; nonetheless, 35% of those who had surgically transitioned were still required to live as the wrong gender.

In addition to those who were forced to present in the wrong gender to stay in a shelter, 41% of respondents also reported presenting in the wrong gender in order to be or feel safe in a shelter.
Making the Connections

In this section, we examine the connections between homelessness and how it relates to incarceration, work in the underground economy and health outcomes. We offer analysis concerning both those who reported having experienced homelessness at some point in their lives because of bias due to gender identity and those who reported being currently homeless for any reason.

THOSE WHO EXPERIENCED HOMELESSNESS

We found that having experienced homelessness seemed to align with several other negative conditions and outcomes.

Household Income

Respondents who had experienced homelessness reported earning lower incomes at the time of survey. Fifty-four (54%) of those who experienced homelessness said they were currently making less than $20,000/year, while only 24% of those who had not experienced homelessness were earning under $20,000.

Incarceration

Thirty-four percent (34%) of those who had experienced homelessness had been incarcerated for any reason. This is nearly 2.5 times the rate of those who had not experienced homelessness (13%).

Underground Economy

Forty-seven percent (47%) of respondents who had experienced homelessness said they had worked in the underground economy for income, more than 3.5 times the rate of those who had not experienced homelessness (13%).

Thirty-three percent (33%) of respondents who had experienced homelessness said they had done sex work for income. This is more than four times the rate of those who had not experienced homelessness (8%).

Physical and Sexual Assault

Sixty-six percent (66%) of those who experienced homelessness also reported experiencing physical assault and 33% also reported sexual assault.

Smoking

Forty-seven percent (47%) of those who had experienced homelessness reported being smokers. Those who have not been homeless smoked at a rate of 28%.

Drinking and Drugs

Forty-nine percent (49%) of those who had experienced homelessness said they had used alcohol or drugs to deal with the discrimination they faced as transgender or gender non-conforming people. This is almost double the rate of those who had not experienced homelessness.

HIV

The HIV rate for those who had experienced homelessness (7.12%) was dramatically higher than those who had not (1.97%).

Suicide

Sixty-nine percent (69%) of those who had experienced homelessness said they had attempted suicide. This compared to 38% of those who had not experienced homelessness.

CURRENTLY HOMELESS

Being currently homeless (including those living in a shelter) seemed to correlate with several other negative outcomes.

Incarceration

Fully 49% of currently homeless respondents said they had been incarcerated at some point in their lives. This is more than 3 times higher than the rate of incarceration for those who were not currently homeless (15%).

Underground Employment

Sixty-nine percent (69%) of respondents who were currently homeless had worked in the underground economy for income. This is nearly five times the rate of those who were not currently homeless (15%).

Fifty-five percent (55%) of those who were currently homeless reported having done sex work for income. This is compared to only 10% of those who were not currently homeless.
Smoking
Sixty-one percent (61%) of those who were currently homeless reported being smokers. This compares with 30% of those who were not currently homeless.

Drinking and Drugs
Fifty-four percent (54%) of currently homeless respondents said they had used drugs or alcohol to cope with the discrimination they face as transgender or gender non-conforming people. This was nearly twice as high as the rate for those who were not currently homeless (25%).

HIV
The HIV infection rate for currently homeless respondents was 22.11%, over eight times the rate of those who were not currently homeless (2.27%).

Suicide
Sixty-eight percent (68%) of those who said they were currently homeless also reported having attempted suicide, compared to 40% of those who said they were not currently homeless.

“I experienced a lot of discrimination during my time of being homeless, in group homes, shelters, and transitional living houses. Additionally, I was been kicked out of several colleges, but I never gave up. For the last 6 years, I have used my past experiences, as a transgender person of color, to improve best practices for youth in systems, get more services for them, and help youth become assertive. I am on the local government-run HIV prevention planning council. I continue to struggle to find a job that pays enough, but I always have a positive attitude and that has gotten me far.”
CONCLUSIONS FOR HOUSING AND HOMELESSNESS

Housing insecurity for transgender and gender non-conforming people is a crisis. Respondents reported direct discrimination by housing providers and negative housing impacts of discrimination in other critical areas of life such as employment, health care and criminal justice. Accordingly, respondents were forced to employ various strategies to secure places to live.

For transgender and gender non-conforming people who became homeless, safety nets meant to help people in a housing crisis often failed. Respondents experienced being refused shelter due to bias and when admitted, often faced a hostile environment. Study participants reported enduring harassment, physical attack, and sexual assault perpetrated by both shelter staff and other residents.

Finally, for respondents who experienced homelessness, we found a correlation to life-threatening, devastating outcomes including incarceration, work in the underground economy, smoking, drinking and drug use, HIV infection and suicide attempts.
RECOMMENDATIONS FOR HOUSING AND HOMELESSNESS

- Stronger laws are needed to address housing discrimination and insecurity.
  - Congress should amend the Fair Housing Act to include transgender and gender non-conforming people in its protections and pass employment protections so that they can better afford to provide shelter for themselves.
  - State legislatures and local governments should pass laws prohibiting both housing discrimination and employment discrimination based on gender identity/expression, so that transgender and gender non-conforming people are better able to provide shelter for themselves and have recourse when they experience discrimination.
- Government agencies should fully enforce housing discrimination laws, including already existing protections based on race and gender as well as gender identity/expression.
  - Free trainings on how to comply with the law should be developed and made widely available for housing providers and real estate professionals.
  - Pair testing and other ways to detect discrimination should be regularly used to ensure that housing non-discrimination laws are being followed and corrective actions should be taken when non-compliance is found.
  - Individual complaints should be investigated thoroughly and housing providers who discriminate should face harsh penalties.
- Shelters should be made accessible and safe for all transgender and gender non-conforming people.
  - Shelters should have clear policies on housing transgender residents, ensuring that they are housed according to their gender identity.
  - Gender non-conforming expression and presentation should not be prohibited in order to gain access to shelters.
  - Policies should be developed to minimize the risk of violence directed at transgender and gender non-conforming residents by other residents.
  - Shelter staff should be fully trained on these policies as well as how to respectfully serve transgender and gender non-conforming residents. Staff members who violate policy or serve residents disrespectfully should be disciplined or dismissed.
  - Shelter staff who physically or sexually assault residents should be terminated and reported to law enforcement authorities for investigation.
  - Group homes should have policies that ensure transgender and gender non-conforming residents are respected and safe from harm.
  - Assisted care facilities should have policies of respect for residents’ gender identity/expression and house them accordingly.
  - Foster care systems should ensure that before placing a transgender or gender non-conforming child in a home that the foster family is accepting and supportive of the child’s gender identity/expression.
  - Colleges and universities should develop policies to ensure that transgender and gender non-conforming students are housed according to their gender identity and that there are gender-neutral options available.
- State and local support programs should be developed that holistically approach and resolve the various challenges and barriers that transgender and gender non-conforming people need addressed in order to house and support themselves. This includes assistance in such things as: earning a G.E.D., work training, finding a job, transitional housing, health care, updating ID documents, legal services, counseling, and/or assistance with applying for benefits.
Endnotes

1 Some numbers have not been rounded due to their small size.

2 HIV rates are provided to two decimal points for easier comparison with national rates.

3 Some numbers have not been rounded due to their small size.


5 Some numbers have not been rounded due to their small size.


10 HIV rates are provided out to two decimal points for easier comparison with national rates.

11 HIV rates are provided out to two decimal points for easier comparison with national rates.
PUBLIC ACCOMMODATIONS

We asked respondents to report on experiences they have had in various places of public accommodation, such as restaurants, hotels and emergency services. Participants were asked if they had experienced being denied equal treatment or service, verbal harassment or disrespect, and physical assault or attack “based on being transgender/gender non-conforming” in 15 kinds of public accommodation. Ninety-three percent (93%) of survey respondents had attempted to access one or more of these types of public accommodation as a transgender or gender non-conforming person.

KEY FINDINGS IN PUBLIC ACCOMMODATIONS

- **Over half (53%) of respondents** reported being verbally harassed or disrespected in a place of public accommodation.
- Forty-four percent (44%) of respondents reported being denied equal treatment or service at least once at one or more of the 15 types of public accommodation covered in the study.
- Eight percent (8%) of respondents reported being physically attacked or assaulted in places of public accommodation.
- Respondents of color generally experienced higher rates of abuse in public accommodations than their white peers. African American respondents endured much higher rates of physical assault than their non-Black peers, at 22% (relative to the 8% mentioned above).
- Police services were the most highly problematic aspect of government services overall, with respondents reporting the highest rate of assault when attempting to access police services (6%), along with very high rates of harassment/disrespect (29%) and denial of equal service (20%). More information about police treatment can be found in the Police and Incarceration chapter.
- Gender non-conforming respondents experienced higher rates than transgender respondents of refusal of service, harassment/disrespect and violence when accessing retail stores, hotels, and transportation; transgender respondents experienced higher rates of unequal treatment, harassment/disrespect and violence in accessing government services and interacting with judges.
- Those who had lost jobs due to anti-transgender bias experienced among the highest rates of harassment/disrespect, denial of service and physical assault in nearly every setting.

“I was intentionally discriminated against by a motel owner. He told me he would not give me a room because I was a cross dresser, and to leave the property or he was going to call the police and tell them that a hooker was in the parking lot selling drugs.”
Denied Equal Treatment in Public Accommodations

Forty-four percent (44%) of respondents reported being denied equal treatment or service at least once at one or more of the types of public accommodation covered in this survey. Experiences differ depending on race, income, employment status, gender, transition status, visual non-conformity and whether the respondent had ID documents consistent with his or her gender identity/expression. Those who had lost their jobs due to discrimination and those who have worked in the underground economy reported the highest rate of discrimination in public accommodations, at 67% and 63%, respectively.

American Indian (49%), Latino/a (50%) and multiracial (57%) respondents reported higher rates of gender identity/expression discrimination in public accommodation than the full sample.

Respondents with household incomes of $50,000 a year or less reported higher rates of discrimination in public accommodation than those in households with incomes over $50,000 a year. Respondents who were currently unemployed reported discrimination in public accommodations at a rate 6 percentage points higher than the full sample. Transgender men reported a higher rate of discrimination in public accommodation (50%) than transgender women (44%).

Noticeable differences in experiences of discrimination in public accommodations appear based on the age a respondent began living full-time in a gender other than that assigned at birth, current transition status, and whether a person has undergone any medical or surgical transition procedures. Those who began living full-time at a younger age seem to have experienced more discrimination in public accommodations than those who began living full-time at an older age, possibly because they are able to report about discrimination over a longer period of time.

“A lot of people tell me I’m lucky because I ‘pass’ and am considered beautiful as a transgender woman, but... I sure don’t feel lucky. I’m always fearful every time I step out the door into the real world, that someone will harass or physically harm me.”
Those who are currently living full-time in a gender other than that assigned at birth reported discrimination in public accommodations at a rate 6 percentage points higher than respondents as a whole. Those who had any medical or surgical transition treatments or procedures also reported higher rates than all respondents, at 48% and 51%, respectively. Visual non-conformers (53%) and those open about their transgender or gender non-conforming identity in general (48%) or at work (51%) also reported higher rates of discrimination in public accommodations.

Finally, people who have transitioned and tried to update the gender marker on their driver’s license, but were denied the change, reported discriminatory treatment in public accommodations at a high rate (57%).

Verbal Harassment in Places of Public Accommodation

Fifty-three percent (53%) of respondents reported being verbally harassed or disrespected in a place of public accommodation. Subgroups that reported higher rates of being denied equal treatment or service also reported higher rates of verbal harassment or disrespect in places of public accommodation.

Those groups reporting higher rates of verbal harassment included those with lower household incomes (ranging from 56% to 63%), those who lost their jobs (72%), or were currently unemployed (63%), those who began living full-time at younger ages (ranging from 59% to 68%), those who were currently living full-time (59%), those who were visual non-conformers (64%), and those who were generally out (59%). In addition, 67% those who have transitioned and tried to update the gender on their driver’s license and were denied were harassed/disrespected.

Respondents who have worked in the underground economy reported the highest rate of verbal harassment/disrespect, at 77%.

Respondents’ reports of verbal harassment/disrespect differed more sharply by race than was the case with other types of mistreatment. Those who identify as Black, Latino/a, or multiracial (at 56%, 57%, and 65%, respectively) all reported higher rates of verbal harassment/disrespect than the full sample.

“The fear of being the victim of a hate crime has also meant that I haven’t lived completely freely; I know that if people on the street knew that I was born female, I’d be at risk of violence or harassment.”
FTM respondents and gender non-conforming respondents reported higher rates of verbal harassment/disrespect (at 62% and 59%, respectively) than MTF and transgender respondents (52% and 56%, respectively).

Physical Attack or Assault in Places of Public Accommodation

Eight percent (8%) of respondents reported being physically attacked or assaulted in places of public accommodation.

Some groups reported much higher rates of physical attack or assault than the full sample. African American respondents endured the highest rate of assault (22%) of any demographic group — much higher than any other. Multiracial (13%), Asian (11%), and Latino/a (11%) respondents also reported high rates of physical assault.

Those who have lost their jobs due to bias (17%) or are currently unemployed (12%) reported higher rates of physical attack or assault. Twenty-two percent (22%) of those who had worked in the underground economy reported physical assault.

Respondents who are younger (9-10%) also reported higher rates of physical assault than older respondents.¹

Non-citizens (documented at 13% and undocumented at 12%) reported higher rates of physical attack or assault than those who identified as U.S. citizens (7%). Although there are some differences in reported rates of physical assault based on the educational attainment and household income of the respondents, the difference is not as great as some might expect.
Those who transitioned at younger ages reported higher rates of physical attack or assault than those who began living full-time at an older age.

Respondents who are visual non-conformers reported higher rates of physical attack or assault (10%) than those who are visual conformers (6%).
Places of Public Accommodation

Discrimination, verbal harassment/disrespect, and physical attack or assault were reported more often in some types of public accommodation or when accessing certain services. This study offered 15 types of public accommodation for which respondents could report their experiences. The following table lists those types and the corresponding rates of denial of equal treatment, verbal harassment/disrespect, and physical attack or assault that respondents reported in those areas.

Respondents reported denial of equal treatment or service at all 15 listed types of accommodation, ranging from 3% to 32%. The highest rate of such mistreatment occurred at retail stores (32%), followed by doctor’s offices or hospitals (24%) and when interacting with a government agency or official (22%). Police officers were reported to have denied equal service or treatment to 20% of respondents. Other accommodations where respondents reported relatively high rates of discrimination included emergency rooms (13%), by a judge or official of the court (12%), on an airplane or airport (11%), and at a mental health clinic (11%).

Respondents also reported verbal harassment or disrespect at all listed types of accommodations, at rates ranging from 4% to 37%. Retail stores were the location where respondents reported the highest rate of verbal harassment or disrespect (37%). The second highest rate was related to police services; 29% of respondents reported that police officers verbally harassed or disrespected them. Other settings that proved to be highly problematic for respondents in terms of verbal harassment or disrespect include hotels and restaurants (25%), doctor’s offices or hospitals (25%), buses, trains or taxis (22%), by a government agency or official (22%), airplanes or airports (17%), emergency rooms (16%), by a judge or court official (12%) and mental health clinics (12%).

Physical attack or assault was also reported in all 15 listed settings. Rates of reported assaults range from 1% to 6%. The highest reported rate of physical attack or assault related to police services, with 6% of respondents reporting physical attack/assault. The second-highest rate of reported assaults occurred on buses, trains or taxis (4%). Three percent (3%) of respondents reported physical attack or assault at retail stores. Two percent (2%) of respondents reported physical assault at doctor’s offices or hospitals, and the same rate was reported at hotels or restaurants.

Retail stores, hotels, transportation services, government and legal services, including police, and social services are all areas where respondents reported experiencing unequal treatment, verbal harassment/disrespect and physical assault. In the following sections, we will look at those groups that experienced disproportionally high rates of mistreatment in these settings. More detailed reporting of respondents’ experiences with medical services and law enforcement is provided in the chapters on Health and Police and Incarceration.
Experiences of Discrimination and Violence in Public Accommodations by Location

- Any location: 44% denied equal treatment or service, 32% harassed or disrespected, 29% physically assaulted, 22% any problem
- Retail Store: 32% denied equal treatment or service, 37% harassed or disrespected, 29% physically assaulted, 29% any problem
- Police Officer: 20% denied equal treatment or service, 29% harassed or disrespected, 25% physically assaulted, 33% any problem
- Doctor's Office or Hospital: 24% denied equal treatment or service, 25% harassed or disrespected, 25% physically assaulted, 22% any problem
- Hotel or Restaurant: 19% denied equal treatment or service, 25% harassed or disrespected, 25% physically assaulted, 22% any problem
- Government Agency/Official: 1% denied equal treatment or service, 22% harassed or disrespected, 22% physically assaulted, 3% any problem
- Bus, Train, or Taxi: 6% denied equal treatment or service, 22% harassed or disrespected, 26% physically assaulted, 4% any problem
- Emergency Room: 2% denied equal treatment or service, 16% harassed or disrespected, 22% physically assaulted, 12% any problem
- Airplane or Airport Staff/TSA: 1% denied equal treatment or service, 17% harassed or disrespected, 21% physically assaulted, 11% any problem
- Judge or Court Official: 1% denied equal treatment or service, 12% harassed or disrespected, 19% physically assaulted, 12% any problem
- Mental Health Clinic: 1% denied equal treatment or service, 12% harassed or disrespected, 18% physically assaulted, 11% any problem
- Legal Services Clinic: 1% denied equal treatment or service, 6% harassed or disrespected, 12% physically assaulted, 6% any problem
- Ambulance or EMT: 1% denied equal treatment or service, 5% harassed or disrespected, 10% physically assaulted, 7% any problem
- Domestic Violence Shelter/Program: 1% denied equal treatment or service, 4% harassed or disrespected, 9% physically assaulted, 4% any problem
- Rape Crisis Center: 1% denied equal treatment or service, 5% harassed or disrespected, 7% physically assaulted, 4% any problem
- Drug Treatment Program: 3% denied equal treatment or service, 4% harassed or disrespected, 1% physically assaulted, 6% any problem
RETAIL STORES

Retail stores were the setting for which respondents reported the highest rates of unequal treatment and verbal harassment/disrespect. Those groups most affected by discrimination, verbal harassment/disrespect and physical assault in retail stores were largely those who experienced the highest overall rates of these problems in all public accommodations. These include those of younger current age, people of color, non-citizens, people living on lower household incomes, those who are unemployed or have lost jobs, those who have worked in the underground economy and those who identify as FTM or gender non-conforming.

Asian, Latino/a, and multiracial respondents reported higher rates of unequal treatment and verbal harassment/disrespect (38-44% unequal treatment and 39-46% verbal harassment/disrespect). Black, Latino/a, and multiracial respondents reported higher rates of physical assault than the full sample and those of other races (4-6% physical assault).\(^4\)

People living on lower household incomes (less than $50,000 per year) reported higher rates of all reported problems in retail stores than those with higher household incomes.\(^5\) Those respondents with the highest educational attainment (graduate degree) reported higher rates of unequal treatment (35%) and verbal harassment/disrespect (40%) than those with lower educational attainment.\(^6\) However, those with lower educational attainment (high school diploma or less) reported higher rates of physical assault, at 4%.\(^7\) The higher rates of reported unequal treatment and harassment/disrespect by those with high household income and educational attainment may be accurate or may be due to a different sense of what is equal treatment/harassment/disrespect, whereas the question of physical violence is less subjective.

Those who worked in the underground economy reported among the highest rates of unequal treatment in retail stores (51%), verbal harassment/disrespect (56%), and had the highest rate of physical assault of all groups in the survey (10%).
Those who began living full-time in a gender other than that assigned at birth at younger ages (age 24 or younger) reported higher rates of unequal treatment in retail stores (37% for under 18, 36% for 18-24), verbal harassment/disrespect (38% for under 18, 44% for 18-24), and physical assault (6% for under 18, 4% for 18-24). Visual non-conformers reported among the highest rates of unequal treatment (50%), verbal harassment/disrespect (54%) and physical assault (5%).

In addition, of those whose driver’s licenses did not reflect the gender they have transitioned to, 41% reported denial of equal treatment or service and 48% reported harassment/disrespect in retail stores.

HOTELS OR RESTAURANTS

Respondents reported relatively high rates of unequal treatment (19%) and verbal harassment/disrespect (25%) at hotels or restaurants. The demographic patterns detailed in the Retail Stores section above also apply to hotels or restaurants. Those reporting the highest rates of unequal treatment at hotels or restaurants included those who: are visual non-conformers (32%), identify as gender non-conforming (31%), are Latino/a or multiracial (28%) or earn under $10,000 annually (26%).

The highest rates of verbal harassment/disrespected in hotels or restaurants were reported by those who are visual non-conformers (38%), identify as gender non-conforming (34%), or are American Indian, Latino/a, or multiracial (30-32%).

Two percent (2%) of respondents reported being physically attacked or assaulted at a hotel or restaurant. Those reporting the highest rates of physical assault included those who are African American (6%) or Asian (5%).

TRANSPORTATION

The survey asked respondents to report experiences in two areas of transportation: ground transportation (buses, trains or taxis) and air travel (airplanes, airports, during TSA screening). When using buses, trains or taxis, respondents reported experiencing unequal treatment (9%), verbal harassment or disrespect (22%), and physical attack or assault (4%). During air travel, whether on a plane or at the airport, respondents reported experiencing unequal treatment (11%), verbal harassment or disrespect (17%) and physical attack or assault (1%).

Experiences based on demographic patterns, again, largely reflect the patterns described in the section on retail stores above.

“Travel is a nightmare. Searches, IDs, pat-downs, the new low-power X-ray, power-drunk guards, etc….and if your ID doesn’t match, you are immediately guilty until proven innocent.”
GOVERNMENT AND LEGAL SERVICES

The survey asked respondents to report their experiences when interacting with government agencies or officials, judges or courts, and legal services clinics. Rates of mistreatment at government agencies or by government officials were among the highest rates for unequal treatment (22%) or verbal harassment/disrespect (22%). When dealing with judges and courts, respondents reported lower overall rates of mistreatment, including unequal treatment (12%) and verbal harassment/disrespect (12%). When utilizing legal services clinics, respondents reported unequal treatment (8%) and verbal harassment/respect (6%). One percent (1%) of respondents reported being physically attacked or assaulted at a government agency or by a government official, by a judge or court official, or when utilizing a legal services clinic.

In the areas previously discussed, retail stores, hotels or restaurants, and transportation, gender non-conforming respondents have consistently reported higher rates of mistreatment than transgender respondents and all respondents. The reverse is true in the area of government agencies and officials. In these responses, transgender respondents consistently reported higher rates of unequal treatment (24%) and verbal harassment/disrespect (24%) than gender non-conforming respondents. Gender non-conforming respondents reported rates lower than all respondents (17% for unequal treatment and 19% for verbal harassment/respect).

In dealing with judges, courts and legal services clinics specifically, transgender respondents reported higher rates of mistreatment than gender non-conforming respondents. Yet, an additional exception to the overall demographic trends appears in the area of judges, courts, and legal services clinics. In all prior areas discussed thus far, respondents who identify as FTM have consistently reported higher rates of mistreatment than MTF respondents. In the area of judges, courts, and legal services clinics, however, the reverse is true; MTF respondents reported consistently higher rates of mistreatment than FTM respondents.

Latino/a and multi-racial respondents reported the most denial of equal treatment/service by government agencies or officials. Black and Asian respondents reported the lowest rates of denial of equal service and verbal harassment/disrespect. Physical assault was most was most often reported by Black, Latino/a and multiracial respondents.
SOCIAL SERVICES

The survey asked respondents to report on their experiences with a variety of social services: rape crisis centers, domestic violence shelters or programs, mental health clinics and drug treatment programs. Respondents reported mistreatment with all of these services, including unequal treatment, verbal harassment/disrespect and physical assault. For purposes of demographic breakdowns and analysis, the lower number of those who utilized these services creates the problem of sample sizes too small within various demographic groups to conduct a complete analysis.

Respondents reported unequal treatment (5%), verbal harassment/disrespect (4%), and physical assault (1%) when utilizing rape crisis centers. When being housed in or utilizing domestic violence shelters or programs, respondents reported unequal treatment (6%), verbal harassment/disrespect (4%), and physical assault (1%). In drug treatment programs, respondents reported unequal treatment (3%), verbal harassment/disrespect (4%), and physical assault (1%).

Higher rates of unequal treatment and verbal harassment/disrespect were reported with mental health clinics. Eleven percent (11%) of respondents reported unequal treatment and 12% reported verbal harassment/disrespect. One percent (1%) reported physical attack or assault.

“It is a lonely place filled with seemingly endless scorn, ridicule and humiliation and the constant threat of violence.”
CONCLUSIONS FOR PUBLIC ACCOMMODATIONS

Transgender and gender non-conforming people experience grave abuses when accessing everyday goods and essential services, from retail stores and buses to police and court systems. From disrespect and refusal of service to harassment and violence, this mistreatment in so many settings contributes to severe social marginalization and safety risk. Study participants’ experiences demonstrate the overwhelming need for legal and policy protections to ensure access to essential services and prospects for living fully and moving freely in public and social settings. Throughout this chapter, we discussed physical assault in numerous places of public accommodation. In the Health chapter we examine the impact of surviving assault on other social, economic and health outcomes.

The data on public accommodation show that gender non-conforming respondents and transgender men generally reported higher rates of unequal service and verbal harassment/disrespect than transgender women (though not true in regard to interactions with judges-court officials and legal services). More research is needed into why there is a different reported experience based on gender: we speculate that the difference may be that transgender women were under-reporting discrimination and verbal harassment/disrespect that occurred.

“I was at first verbally assaulted and then physically assaulted in broad daylight on a crowded street. As a result of the assault I didn’t leave my house for several weeks unless it was absolutely necessary (due to mental anguish). I didn’t report the incident but I have since helped start a self-defense class for trans-men and masculine-identified genderqueers.”

“Being androgynous has given me such a different perspective on how rigid people’s ideas of gender are. When I was younger I was picked on for being a tomboy, and now I get picked on for the fact that, at first glance, they can’t tell if I’m a boy or girl.”

Respondents of color generally experienced higher rates of abuse in public accommodations than their white peers.
RECOMMENDATIONS FOR PUBLIC ACCOMMODATIONS

• Enact strong federal, state and local laws prohibiting discrimination on the basis of gender identity/expression in places of public accommodation.

• Government enforcement agencies should develop compliance regulations and guidelines, provide trainings for entities covered by the laws, and should effectively and thoroughly investigate complaints of discrimination, and when discrimination is found, use strong penalties to deter other entities from violating the law.

• Places of public accommodation should develop their own non-discrimination policies related to gender identity/expression and train staff on how to follow these policies. Service organizations should develop cultural competency. Institutions include:
  • Retail stores
  • Hotels
  • Restaurants
  • Transportation agencies, including mass transit and taxi systems
  • Airline and airport staff, including Transportation Security Officers
  • Rape crisis centers and domestic violence shelters
  • Government agencies
  • Judges and court systems
  • Legal services agencies
  • Police departments (see the Police and Incarceration chapter for more specific recommendations)
  • Doctor’s offices, hospitals, and other health related services (see the Health chapter for more specific recommendations).
1 Respondents aged 18-24 reported physical assault in any place of public accommodation at 9%, those aged 25-44 at 10%, those aged 45-54 at 4%, those aged 55-64 at 3%, and those 65 and older at 6%.

2 We asked questions about mistreatment by police both in our public accommodations question, Question 30, as well as in a police-specific question, Question 32, and we did so in slightly different ways. Respondents answered the questions consistently. When asked about harassment and/or disrespect in Question 30, 29% selected yes. When asked about disrespect in Question 32, 30% selected yes (and 22% selected harassment). The minor numeric difference between 29% and 30% are not meaningful and likely reflect the slightly different wording of the question. For more information, see the Police and Incarceration chapter.

3 We asked about assault by police in two different ways. In Question 30, which asked about public accommodations, “physical attack or assault” was an option that 6% of respondents chose. In Question 32, “officers physically assaulted me” and “officers sexually assaulted me” were options in a list with a “mark all that apply” instruction. Six percent (6%) of respondents chose physical assault and 2% of respondents chose sexual assault; these respondents generally overlapped. Thus, the data correspond as one would expect. For more information, see the Police and Incarceration chapter.

4 The breakdown of mistreatment in retail stores by race is as follows. Unequal treatment was reported by American Indians at 33%, Asians at 38%, Black respondents at 28%, Latino/as at 40%, white respondents at 30%, and multiracial respondents at 44%. Verbal harassment was reported by American Indians at 31%, Asians at 39%, Black respondents at 30%, Latino/as at 41%, white respondents at 36%, and multiracial respondents at 46%. Physical assault was reported by American Indians at 3%, Asians at 3%, Black respondents at 6%, Latino/as at 4%, white respondents at 3%, and multiracial respondents at 5%.

5 For physical assault, those making between $20,000 and $50,000 annually broke from the trend of higher reported incidence and reported a lower rate than the overall sample, at 2%. Those whose household incomes were less than $10,000/year reported being denied equal treatment at a retail store at 38%, those whose household incomes were between $10,000/year and $20,000/year at 38%, those whose household incomes were between $20,000/year and $50,000/year at 34%, those whose household incomes were between $50,000/year and $100,000/year at 27%, and those whose household incomes were $100,000/year or more at 27%. Those whose household incomes were less than $10,000/year reported being verbally assaulted in a retail store at 43%, those whose household incomes were between $10,000/year and $20,000/year at 43%, those whose household incomes were between $20,000/year and $50,000/year at 39%, those whose household incomes were between $50,000/year and $100,000/year at 34%, and those whose household incomes were $100,000/year or more at 29%. Those whose household incomes were less than $10,000/year reported being physically assaulted at a retail store at 5%, those whose household incomes were between $10,000/year and $20,000/year at 4%, those whose household incomes were between $20,000/year and $50,000/year at 2%, those whose household incomes were between $50,000/year and $100,000/year at 2%, and those whose household incomes were $100,000/year or more at 1%.

6 Respondents who did not have a high school diploma reported being denied treatment at retail stores at 31%, those who had only a high school diploma at 29%, those who had some college at 31%, those who had a college degree 34%, and those who had a graduate degree at 35%.

7 Respondents who did not have a high school diploma reported verbal harassment at retail stores at 37%, those who had only a high school diploma at 36%, those who had some college at 36%, those who had a college degree 37%, and those who had a graduate degree at 40%. Respondents who did not have a high school diploma reported being assaulted at retail stores at 4%, those who had only a high school diploma at 4%, those who had some college at 3%, those who had a college degree 2%, and those who had a graduate degree at 2%.

8 The only exception is people who began living full-time in a gender other than assigned at birth between the ages of 25 and 44, who reported verbal harassment at a rate of 38%, the same as the youngest age group.

9 See the Housing chapter for more detailed reporting and analysis.
IDENTITY DOCUMENTS

Possessing accurate and consistent identification documents is essential to basic social and economic functioning in our country. Access to employment, housing, health care and travel all can hinge on having appropriate documentation. Yet, for many of the respondents, obtaining identity documents that match their gender is a major hurdle.

We provided survey respondents with a list of nine commonly used identity documents and asked them to tell us whether they had a) succeeded in changing the gender on each document, b) tried and failed, c) did not try at all, or d) if the question didn’t apply (i.e. If they didn’t have that particular form of ID or they didn’t want that document updated).

Throughout this chapter, except as noted otherwise, we are reporting only on those who have transitioned gender from male to female or from female to male—since these are primarily the people who need updated identity documents in order to function in society.

Some of the laws and policies relating to changing gender on identification documents require that evidence of surgical sex reassignment must be produced. Because laws and written policies often emphasize transgender people’s surgical status, we examined how having or not having the most common gender-related surgical procedures affected people’s ability to get accurate and updated identity documents.

The costs of transition-related surgeries, which are rarely covered by health insurance, are beyond the reach of most transgender people, particularly because the community experiences such high rates of employment discrimination and poverty. In addition, some people who want such surgery cannot have it for medical reasons. Furthermore, some do not want surgery because they do not feel it is necessary for them personally.

Study participants confirmed anecdotal evidence that gender incongruent identification exposes people to a range of hostile outcomes, from denial of benefits and employment to violence. Legal and bureaucratic barriers to amending transgender people’s identity documents marginalize and stigmatize transgender people.

It is unjust to require people to obtain financially-unobtainable or undesired medical care in order to change identification. The extent of this injustice and related abuses is detailed in this chapter.
KEY FINDINGS IN IDENTITY DOCUMENTS

• Of people who had already transitioned from male to female or female to male:
  • Only one-fifth (21%) have been able to update all of their IDs and records with their new gender and one-third (33%) had updated none of their IDs/records.
  • Fifty-nine percent (59%) reported updating the gender on their driver’s license/state ID.
  • About half (49%) reported updating the gender in their Social Security record.
  • About one quarter (26%) reported updating the gender on their passport.
  • About one quarter (24%) reported updating the gender on their birth certificate.
  • More than half (59%) of those who have work ID reported updating it.
  • Less than half (46%) of current students have updated their student records, although 81% of those who have tried to do so have been successful.

• Whether or not an individual has had some type of transition-related surgery dramatically affects his or her likelihood of having changed each of the ID documents and records we studied. For example, 81% of those who have had some type of surgery have updated their driver’s license compared to 37% of those who have not had any surgery.

• People of color, and those with lower household incomes and educational attainment, were generally less likely to have updated their IDs/records across the board, even when controlling for surgical status, with few exceptions.

• Forty percent (40%) of those who presented ID (when it was required in the ordinary course of life) that did not match their gender identity/expression reported being harassed and 3% reported being attacked or assaulted. Fifteen percent (15%) reported being asked to leave the setting in which they had presented incongruent identification.

• Rates of reported hiring discrimination, and discrimination in housing, including campus housing, are much higher for those who do not have an updated driver’s license.
Ability to Change Gender on Identification and in Records

DRIVER’S LICENSES / STATE IDENTIFICATION CARDS

For driver’s licenses, 59% of those who had transitioned were able to change the gender marker on their driver’s license. Eleven percent (11%) were denied an updated license, 30% did not try or indicated not applicable (meaning that they do not have this form of identification or they did not desire to change it).

Transgender women were more likely to have an updated driver’s license (65%) than transgender men (57%).

White respondents (62%) were most likely to have updated their driver’s license, and American Indian (37%) and Black respondents (42%) were least likely.

Even though many states have abandoned outdated surgery requirements for a change of driver’s license gender marker, the data shows that surgery has made a difference for respondents’ ability to update their license, with 81% of those who have had some type of surgery able to update their driver’s license compared to 37% of those who have had no surgery. Seven percent (7%) of those who had some type of transition-related surgery were denied an updated license, and 12% did not seek to update their ID.

Eighty-five percent (85%) of transgender women who have had some type of transition-related surgery were able to update their licenses, with 7% denied, while 8% did not try; of those who had some type of surgery and tried to change their license, 92% were successful. Only 43% of those who did not have surgery were able to update their driver’s license.

Unfortunately, it appears that the ability to update driver’s licenses is affected by the type of surgery undergone. Sixty-three percent (63%) of transgender women who have only had breast augmentation were able to update their license, with 18% denied and 19% not trying; of those that tried, 78% were successful. Ninety-four percent (94%) of transgender women who had an orchiectomy or vaginoplasty were able to update their driver’s license; of those who tried, 96% were successful.
Similarly, 76% of transgender men who had some type of surgery were allowed to update their driver’s license with 6% denied, and 18% not trying; of those who tried, 92% were successful.

Which surgeries were performed also affected transgender men’s ability to update their licenses. Seventy-six percent (76%) of those who have had chest surgery were able to update their licenses, with 7% denied and 17% having not tried; of those who tried, 92% were successful. Ninety-four percent (94%) of those with a metoidioplasty or surgery to create testes have been able to update their licenses; of those who tried, 97% were successful. Ninety percent (90%) of those who have had phalloplasty were able to update their driver’s licenses; of those who tried, 93% were successful. Because of the small numbers of those who have had metoidioplasty and/or phalloplasty in the sample, the difference in rates between these two (97% and 93%) was likely not meaningful.
Of the variables we asked about in the survey, surgical status seems most strongly associated with the ability to update driver’s licenses. We also found that visual conformity was associated. Of those who have not had surgery but have tried to update their license, 76% of visual conformers were successful in obtaining the change, while only 60% of visual non-conformers succeeded. Common wisdom among transgender people is that the more a person looks like the gender he or she identifies in, the easier it is to change a driver’s license; survey responses seem to bear this out.

We also wanted to see if we looked only at those who have not had any transition-related surgery, what the effect of race, household income and educational attainment was on the likelihood of having updated one’s driver license. Among people who have not had any surgery, Latino/as (45%) were the most likely to have updated their licenses, with multiracial respondents (37%) next most successful. Asian and American Indian respondents were the least likely.

Those with higher household incomes were generally more likely to have updated their licenses, and, of those who tried, generally more likely to have been successful. We also found that those with higher educational attainment were more likely to have successfully updated their ID, and, of all of those who tried, they were the most likely to have obtained the changes they sought.
BIRTH CERTIFICATES

With some exceptions, birth certificate laws and policies (which are established at the state level) generally require that surgery must take place before an updated document is issued. These laws and policies have been slow to catch up to the current medical understanding that medical treatments should not be required to update gender on identity documents. Some states also require a court order for a change of birth certificate, presenting added financial and logistical barriers.

Overall, 24% were able to change the gender marker on their birth certificates.

However, 18% of respondents were denied and 53% had not even attempted to change their birth certificate, with another 5% choosing “not applicable,” meaning that they either did not have a birth certificate or they did not desire to change it. Many of those who did not attempt to change their birth certificates may have chosen not to do so because they knew they would not meet the requirements of the written policies; for example, because they had not had any surgery. Alternatively, they may not have had the resources to pay an attorney for assistance in obtaining a court order.

Gender identity was not a factor, with 26% of MTF respondents and 24% of FTM respondents able to change gender markers.10

Looking at race, White (25%) and Latino/a (23%) respondents were the most likely to have changed their gender markers and American Indians were the least likely, with only 7% having done so.

Many state laws and policies require surgery for changing a birth-certificate gender marker; not surprisingly, having had surgery dramatically changes the likelihood of updating a birth certificate. Those who have had some type of surgery were able to change their gender marker over six times as frequently (39%) than those without (6%).12 Twenty percent (20%) have been denied the change even with some type of surgery. Thirty-eight percent (38%) with some type of surgery have not tried to change their birth certificate.13

Unfortunately, the type of surgery an applicant has undergone appears to matter to state agencies charged with amending birth certificates. Of MTF respondents who have had some type of surgery, 43% had changed their birth certificates. Of MTFs who have only had breast augmentation surgery, only 15% had changed their birth certificates; of those with breast surgery who tried, 32% were able to. Of transgender women who have had an orchiectomy or vaginoplasty, 55% have been able to change their birth certificate; of those who tried, 74% were able to do so.

Ability to Update Birth Certificate for Transgender Women by Surgical Status

<table>
<thead>
<tr>
<th>Surgery Status</th>
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<th>Denied</th>
<th>Not Tried</th>
<th>Not Applicable</th>
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</thead>
<tbody>
<tr>
<td>MTFs with No Surgery</td>
<td>53%</td>
<td>21%</td>
<td>72%</td>
<td>7%</td>
</tr>
<tr>
<td>MTFs with Any Surgery</td>
<td>35%</td>
<td>22%</td>
<td>52%</td>
<td>15%</td>
</tr>
<tr>
<td>MTFs with Breast Augmentation</td>
<td>43%</td>
<td>32%</td>
<td>52%</td>
<td>15%</td>
</tr>
<tr>
<td>MTFs with Orchiectomy/ Vaginoplasty</td>
<td>25%</td>
<td>19%</td>
<td>55%</td>
<td>25%</td>
</tr>
</tbody>
</table>

Many state laws and policies require surgery for changing a birth-certificate gender marker; not surprisingly, having had surgery dramatically changes the likelihood of updating a birth certificate. Those who have had some type of surgery were able to change their gender marker over six times as frequently (39%) than those without (6%).12 Twenty percent (20%) have been denied the change even with some type of surgery. Thirty-eight percent (38%) with some type of surgery have not tried to change their birth certificate.13
For FTM respondents who have had some type of transition-related surgery, 37% have updated their gender markers on their birth certificates. Twenty-nine percent (29%) of FTMs with chest surgery only were able to change their birth certificate, while 23% were denied an updated document, and about half had not tried (48%); of those with chest surgery who tried to change their birth certificate, 56% were able to do so. Seventy percent (70%) of those with a metoidioplasty or surgery to create testes were able to change their birth certificates (15% were denied) and 15% did not try; of those who tried, 82% with this surgery or surgeries were allowed the change. Of those with a phalloplasty, 72% have been granted changes (21% were denied) and 7% have not tried; of those who tried, 78% were successful. Because of the low numbers of FTMs with phalloplasty, the different rates of ability to change their birth certificates between metoidioplasty (82%) and phalloplasty (78%) is probably not meaningful.

“I cannot get my birth certificate changed in Illinois unless I have a penis! This is wrong! I look like, act like and am seen as a man by everyone around me until I have to show my Driver’s License, which still says Female. The picture on my license is me with a beard!”

Ability to Update Birth Certificate for Transgender Men by Surgical Status

- **All FTM Respondents Who Transitioned**
  - 60% Not Tried
  - 24% Allowed
  - 15% Denied

- **FTMs with No Surgery**
  - 86% Not Tried
  - 4% Allowed
  - 9% Denied

- **FTMs with Any Surgery**
  - 44% Not Tried
  - 37% Allowed
  - 19% Denied

- **FTMs with Chest Surgery**
  - 48% Not Tried
  - 29% Allowed
  - 23% Denied

- **FTMs with Metoidioplasty/Creation of Testes**
  - 15% Not Tried
  - 15% Denied
  - 70% Allowed

- **FTMs with Phalloplasty**
  - 7% Not Tried
  - 21% Denied
  - 72% Allowed
Of all those who have transitioned, those who are visual conformers are more likely to have a change to their birth certificate approved, regardless of their level of surgical transition. Of those who have had some type of surgery as part of transition and who have tried to update their birth certificate, those who are visual conformers are more likely to be granted a change on their birth certificate (70%) than visual non-conformers (57%).

We also wanted to see how race, household income and educational attainment affected rates of updating birth certificates. Since most birth certificate policies generally require some type of transition-related surgery, we looked at respondents who only had some type of surgery.

Among those who have had some type of surgery, white respondents were the most likely to have updated their birth certificates (41%), with black respondents next most likely (37%).

Higher-income respondents who have had some type of surgery were able to change their birth certificates more often than those with lower household incomes; and, among those who tried to update such documents, higher-income respondents had much higher rates of being allowed to do so. It is possible that those with higher household incomes were able to afford legal representation for the gender change process, as many states require a court order to change a birth certificate; however, we did not ask if people used the services of an attorney.

Similarly, those in the higher educational attainment categories were more likely to have changed their birth certificate and more likely to report success if they tried. Because the process for changing birth certificates in most states is complex, those with formal education may have fared better in navigating the government bureaucracy.
SOCIAL SECURITY

The Social Security Administration keeps a record of gender, although Social Security cards are issued without gender markers. It is the Social Security Administration’s current policy to change the gender in a transgender person’s records only upon proof of “completed” sex reassignment surgery (although the policy does not specify what types of surgery must be done). Before this current policy was adopted, it is our understanding that surgery was not always required and there are reports that even after the written policy went into effect, some people have been to update their records without showing proof of surgery.

Only about half (49%) of those who transitioned have updated their Social Security gender record. Twelve percent (12%) were denied the change, 37% have not tried, and 3% chose not applicable (meaning they do not have a Social Security account or they did not want to update it). Transgender women were more likely to have updated their accounts, with 51% having done so, compared to 44% of transgender men.

![Ability to Change Gender in Social Security Record by Gender Identity](image)

Of those who tried to update their gender in Social Security records, transgender men fared better than women. Transgender men who tried to update their records were able to do so in 89% of cases, compared to 77% for transgender women.

Whether or not respondents had changed their Social Security gender record differed by race. American Indian (35%), Asian (38%), and Black (38%) respondents were least likely to have changed their records.

![Ability to Change Gender in Social Security Record by Race](image)

Given the written policy requiring completed surgery, it is not surprising that the ability to change the Social Security record was strongly connected to whether an individual had had surgery.

For transgender women, 75% who have had some surgery updated their Social Security records, compared to 30% of those who have not had any surgery; 15 of those have had surgery and tried to update their records, 89% succeeded. Interestingly, more than half (56%) of those who tried to update their record but had not had any surgery were also successful. About half (48%) of those who have only had breast augmentation updated their record, with 23% denied, and 29% who have not tried; of those who tried, 67% were successful. Of those who had orchiectomy or vaginoplasty, 88% have changed their record, with 4% denied and 8% not tried; of those who tried, 95% were successful.
For transgender men, 64% of those who had some type of surgery updated their Social Security records, compared to 16% of those who have had no surgery. Of those who have had some type of surgery and tried to update their records, 92% were successful. Interestingly, more than two-thirds (71%) of those without any surgery who tried to update their record were successful. Sixty-two percent (62%) who had only chest surgery were able to change their Social Security records; of those who tried, 91% were successful. Of those who had a metoidioplasty or surgery to create testes, 91% have updated their record; of those who tried, 97% were successful. For those who have phalloplasty, 93% have updated their Social Security record; and, of those who tried, 96% were successful. Because the numbers of transgender men in our sample who have had metoidioplasty and/or phalloplasty are low, the differences in the rates between them may not be meaningful.
We also wanted to see how race, household income and educational attainment affected rates of updating Social Security records when we held surgery constant. Since current Social Security policy requires surgery, we looked at respondents who only had some type of surgery.

With regard to race, among those who have had some type of surgery, white respondents were the most likely to have updated their Social Security records (72%), with multiracial respondents next most likely (63%).

Among those who have had some type of surgery, those in the higher household income brackets reported more often having Social Security records updated, and, among those who tried to change their records, much higher rates of being allowed to change their records. Those in the higher educational attainment categories were more likely to have changed their Social Security records and more likely to report success if they tried.
Looking at whether visual conformity appears to affect the outcome of attempts to update Social Security records, among those who have had surgery, we found that visual conformers were much more likely to be granted the updated records.

Ability to Change Gender on Social Security Record by Visual Conformity Among Those With Surgery

- Visual Non-Conformers: 52% Yes, changes allowed, 12% No, changes denied, 37% Not tried or N/A
- Visual Conformers: 70% Yes, changes allowed, 8% No, changes denied, 22% Not tried or N/A
PASSPORTS

From 1992 until June 2010, the U.S. Department of State had a policy of requiring proof of “sex reassignment surgery” before changing gender markers on passports. In 2010, the department, eliminated the surgery requirement, but field work for our study was done before that action.

Twenty-six percent (26%) of respondents who had transitioned reported having updated the gender markers on their passport. Seven percent were denied, and 68% either did not try or chose “not applicable” likely meaning they did not have a passport.

Of those who had some type of surgery, 43% reported having an updated passport, compared to only 5% of those who did not have surgery. Six percent (6%) of those who have had surgery reported being denied an updated passport and 51% either did not try to update it or did not have a passport.

Of those who have tried to change their passport, and have had some type of surgery, 87% reported success and 13% reported denials. Of those who had not had surgery and tried to change the gender on their passport anyway, 40% reported success and 60% reported denials.

We wanted to know whether race, household income and educational attainment appeared to have an effect on whether people were able to update their passports. Among those who have had some type of surgery, Asian respondents were the most likely to have updated a passport and had the highest success rate among those who tried to update their passport.

“...I don’t want to have document-mismatch problems down the road crossing international borders.”

Among those with some type of surgery, those with higher household incomes and higher educational attainment were more likely to have changed their passports.
WORK ID

Overall, 59% of those who have work ID\textsuperscript{20} were able to update gender markers. Six percent (6%) were denied the change and 35% have not tried. Transgender women were more likely to have made this change, with 64% having received an updated ID, compared to 51% of transgender men. Thirty percent (30%) of transgender women and 43% of transgender men have not tried. Six percent of both groups were denied the change.

The likelihood of trying to change one’s work ID, and the likelihood of being successful in doing so, also increased by household income.

MILITARY DISCHARGE PAPERS

Thirty-five percent (35%) of those who tried to update discharge records (by receiving a DD-215 form) were allowed to do so.\textsuperscript{21} Those who had some type of surgery, and who tried to update their discharge papers, were only slightly more likely to have been allowed the change, with 40% successful.

HEALTH INSURANCE RECORDS

Generally, 39% percent of people who have transitioned updated their health insurance records, and a small number (7%) reported being denied. A large group has not attempted to do so (41%). Anecdotally, we know that many people fear updating their health insurance records because doing so may prevent them from getting preventive and necessary care for their sexual and reproductive systems (for example, someone listed as male is likely to be denied coverage for a mammogram). Furthermore, transgender people are aware that updating gender markers could out the person as transgender to the insurance company. This could trigger a denial of coverage for care that the insurance company considers related to gender transition (much of which is excluded by most insurance plans).

Transgender women (44%) were more likely to have updated their records; however, transgender men were less likely to try to do so. Of those who tried, transgender men have a lower denial rate (14%) than transgender women (17%).

STUDENT RECORDS

Overall, less than one half (46%) of current students\textsuperscript{22} who have transitioned have updated the gender on their student records. Eleven percent (11%) attempted to update their records and were denied, and 38% have not tried. Of those who tried, 81% were successful.

PROFESSIONAL LICENSES AND/OR CREDENTIALS

Eighty-eight percent (88%) of those who tried to change the gender on their professional license or credential were successful, while 12% were denied such changes. 

\textit{“I have not attempted to change my gender ID on my health insurance policy because I am afraid of discrimination if my health insurer knows I’m transgender.”}
Living With Incongruent Identity Documents

We asked respondents whether “All,” “Some,” or “None” of their IDs and records match the “gender you prefer.” Of those who had transitioned, only 21% reported that they had been able to update all of their IDs and records. About half (46%) indicated that they have been able to update some of their IDs and/or records, and one-third (33%) indicated that none of their IDs and records matched their current gender identity.

Respondents’ success in updating all, some or none of their IDs and records varied by race and household income. Although the percentages of respondents reporting that they had been able to change all of their IDs/records was relatively even across the board, respondents of color (except Latino/as) were more likely to be living with no matching IDs and/or records. Similarly, respondents with higher household incomes were also more likely to have been able to change all or at least some IDs and records.

“When I tell people my birth name or show IDs with my birth name, people at first don’t believe me. Often when I am trying to buying something, people squint at my ID and usually let me buy it, but I can tell they are not sure that is really who I am.”

Only one-fifth (21%) of those who have transitioned have been able to update the gender on all their IDs and records.
Harassment and Violence When Presenting Incongruent Identity Documents

All respondents, not only those who have transitioned, may need to present ID during at times in the ordinary course of their lives when their visible gender expression doesn’t match the gender or name on their IDs. We asked respondents to tell us what happened to them when they presented incongruent ID documents.

Forty percent (40%) of respondents who presented gender incongruent identification reported harassment and 3% reported being assaulted or attacked. Fifteen percent (15%) reported that they were asked to leave an establishment. Overall, 44% had one of these problems (harassment, assault, or being asked to leave) and 56% had no problems.

African American (50%) and multiracial (53%) respondents reported higher rates of harassment than the overall sample. While only 3% of the full sample reported being assaulted when presenting incongruent identification, 9% of African American and Latino/a respondents and 6% of multiracial respondents reported assault.

Working in the underground economy and losing a job due to bias were highly associated with harassment (61% and 56% respectively) due to incongruent ID. These groups also experienced high exposure to violence (8% and 7% respectively). Transgender men reported much higher rates of harassment (50%) than transgender women (33%); gender non-conforming respondents reported more harassment due to gender incongruent identification (47%) than their transgender peers (40%).

“My documents match now, but they didn’t for most of my life. I lived in terror of losing my life, my freedom, my employment, and my friends.”

Harassment and Violence When Presenting Incongruent Identity Documents by Race

Harassment and Violence When Presenting Incongruent Identity Documents by Gender Identity/Expression
Making the Connections: The Impact of Incongruent Identification

For transgender and gender non-conforming people, not having identification consistent with their gender identity or expression can have far-reaching negative consequences. Whenever people with incongruent identification documents must produce them, they are potentially revealed as transgender, whether to an employer, clerk, police officer, or airport personnel. Each of these “outings” presents the possibility for disrespect, harassment, discrimination or violence as outlined above.

In the hiring process, ID is required by employers who need to fill out government forms relating to taxes and Social Security when adding an employee to payroll. Anecdotal evidence indicates that some transgender people are offered jobs by employers who don’t realize these job candidates are transgender, and when ID is provided that doesn’t match gender identity/expression, the result can be withdrawal of the offer of employment.

Among those who have transitioned, we looked at the relationship between reported rates of hiring discrimination and updating of driver’s licenses. Of those who had an updated driver’s license, 52% reported experiencing discrimination in hiring. Among those who did not have an updated driver’s license, the reported rate was 64%. More research is needed to determine whether the lack of gender-congruent ID is a direct cause of hiring discrimination.

We also examined denials of home/apartments and housing on campus in terms of ID gender congruence. Showing ID is a typical step toward renting or buying a home or apartment and checking ID or student records is typically a determinant in deciding eligibility for housing on campus. Among those who have transitioned, about one-third (32%) of those with a non-matching driver’s license reported being denied a home or apartment, compared to 20% of those who did have an updated driver’s license.

Among those who transitioned and reported seeking campus housing, those with updated driver’s licenses were less likely to be denied housing, with 7% being denied housing, compared to 20% being denied among those without updated licenses. We also asked about whether respondents were denied gender-appropriate student housing. Gender congruent licenses also appeared to matter here — 36% of those without an updated driver’s license reported being denied gender-appropriate housing, compared to 18% of those with an updated driver’s license.

“These are hard times, I know, but there is still no reason for me to not be able to find adequate employment. I am very passable until the employer runs my driver’s license. I have to work as a Drag King for now and hope to at least make my mortgage payment.”

“My worst experience involved how the police saw me and what my Pennsylvania driver’s license listed as my sex was when I was in New Jersey. I was held and verbally abused by two officers for a burned-out headlamp for about 45 minutes.”
CONCLUSIONS FOR IDENTITY DOCUMENTS

Having gender-congruent identification is clearly important to the well-being of transgender people. However, substantial barriers to obtaining gender-congruent identification remain in place in states, localities and federal agencies.

Gender-incongruent identification presents barriers to travel, employment, health care, housing, education and other essential arenas areas of life. Further, data here indicate that presenting gender-incongruent identification exposed respondents to harassment and violence.

Having transition-related surgery is, by far, the single biggest factor in obtaining gender-congruent identification and, it appears that government agencies and other institutions that maintain IDs and records discriminate based on what type of surgery the respondent has had.

Health data on gender related surgeries analyzed earlier in this report indicate that a high percentage of our study respondents do not have access to the gender-related surgeries they need. Accordingly, requiring surgery to change gender markers on essential identity documents effectively condemns a major portion of transgender and gender non-conforming people to social and economic marginalization and harassment and violence.

RECOMMENDATIONS FOR IDENTITY DOCUMENTS

• Gender markers on all identity documents and in all records, at every level of government and by every institution that records gender, should be determined by the gender the person identifies as. This includes:
  • Federal agencies, such as the Social Security Administration, Department of Transportation, Department of Defense, Department of Veteran's Affairs, Office of Personnel Management
  • State Bureaus of Vital Statistics
  • State Departments of Motor Vehicles
  • Employers and professional licensing organizations and associations
  • Educational institutions of all levels
  • Health systems and health insurance companies
• All entities should evaluate whether there is a legitimate programmatic purpose for collecting gender information and putting this information on identity documents; if not, gender markers should be removed.
• Sensitivity training is urgently needed for staff who administer the changing of IDs and records, to ensure that transgender people are treated respectfully and IDs and records are updated appropriately.
• Research should be funded to further assess the impacts of gender-incongruent identity documents on transgender people’s social and economic security; studies should be constructed to explore potential race and income discrimination at agencies that issue identity documents.
Endnotes

1 Data here is calculated with Not Applicables removed, as we typically do in this report. However, in some instances in this section, data are reported with Not Applicable responses included in order to better describe the percent of respondents who have updated that particular ID/record. If Not Applicable responses are not mentioned in the text or in the relevant chart, as done here, the reader should assume that they were not included in the calculations.

2 Many states have policies that require proof of surgery, while many others allow applicants to obtain updated licenses in order to match their current gender identity with or without surgery. More research could be done to divide respondents based on the type of policy in each state, and then further inquire into the how having had surgery, or not, affects the percent of those able to change their driver's licenses.

3 See note 1.

4 Please see the Glossary for definitions of various medical terms.

5 See note 1.

6 See note 1.

7 Please see the Glossary for definitions of various medical terms.

8 See note 1.

9 The World Professional Association for Transgender Health, a professional association of those who provide medical and other health care for transgender people, develops the current worldwide Standards of Care, referred to in the Health chapter. In June of 2010, they issued the following statement (excerpt): “The WPATH Board of Directors urges governments and other authoritative bodies to move to eliminate requirements for identity recognition that require surgical procedures.” In 2010, the U.S. Department of State abandoned its surgery-based policy in favor of a new policy requiring a letter from a physician (without reference to the patient's surgical status) to update the birth certificates of U.S. citizens born in other countries, referred to as Consular Reports of Birth Abroad, making them one of the first government agencies to catch up with medical understandings of transgender people.

10 See note 1.

11 Some people do not have a birth certificate because they were born in a different country without a formal certificate system; others do not have a birth certificate because of record storage problems, among other reasons.

12 See note 1.

13 See note 1.

14 See note 1.

15 See note 1.

16 See note 1.

17 See note 1.

18 See note 1.

19 See note 1.

20 A reader might note that it appears from these numbers and charts that our sample has a higher rate of holding a passport than the general population (28%). Note that we have segmented our sample for most of the this section to examine only those who have had surgery, which means that they are more likely to have higher income, which in turn means it is more likely they hold a passport. Furthermore, because many surgeons who do transgender-related procedures practice in other countries, a larger number of these respondents may have acquired a passport to travel abroad for their surgery. For general population figures, see http://www.gao.gov/new.items/d08891.pdf.

21 We presume that those who have work ID without a gender marker chose “not applicable” or answered this question with regard to being able to update a gender-specific name.

22 The DD-214, which are discharge papers, are generally considered historical documents and are generally not updated. However, according to the policy, veterans should be able to receive a DD-215 with updated information.

23 We presume that these students are primarily college, graduate or technical school students because our sample includes only those 18 and older.
POLICE AND INCARCERATION

Most people interact with police officers during the ordinary course of their lives. Transgender and gender non-conforming people may have higher levels of interaction with police. They are more likely to interact with police because they are more likely to be victims of violent crime, because they are more likely to be on the street due to homelessness and/or being unwelcome at home, because their circumstances often force them to work in the underground economy, and even because many face harassment and arrest simply because they are out in public while being transgender. Some transgender women report that police profile them as sex workers and arrest them for solicitation without cause; this is referred to as “Walking While Transgender.” The survey brought to light a wide range of alarming experiences of transgender and gender non-conforming people with police and the criminal justice system. It also provides the first look at abuse in jails and prisons nationwide; other studies have documented abuse in specific geographic areas or within certain systems.

KEY FINDINGS IN POLICE AND INCARCERATION

- **One-fifth (22%) of respondents who have interacted with police** reported harassment by police due to bias, with substantially higher rates (29-38%) reported by respondents of color.

- **Six percent (6%) reported physical assault and 2% reported sexual assault by police officers** because they were transgender or gender non-conforming.

- **Twenty percent (20%) reported denial of equal service by police.** More information about denial of equal service can be found in the Public Accommodation chapter.

- **Almost half** of the respondents (46%) reported being uncomfortable seeking police assistance.

- While 7% of the sample reported being held in a cell due to their gender identity/expression alone, these rates skyrocketed for Black (41%) and Latino/a (21%) respondents.

- Respondents who served time in jail reported harassment by correctional officers (37%) more often than harassment by peers (35%).

- **Physical and sexual assault in jail/prison is a real problem:** 16% of respondents who had been to jail or prison reported being physically assaulted and 15% reported being sexually assaulted.

- **African-American respondents reported much higher rates of physical and sexual assault in prison, by other inmates and corrections officers, than their counterparts.**

- Health care denial was another form of abuse in prison, with **12% of people who had been in jails or prisons reporting denial of routine health care** and 17% reporting denial of hormones.
Police Interaction

Fifty-four percent (54%) of all respondents reported that they had interacted with the police as a transgender or gender non-conforming person. When asked about their experience, 68% of those interacting with police reported that “officers generally have treated me with respect.” Almost a third, (30%), indicated that “officers generally treated me with disrespect.”

Respect increased with household income (51% of those earning $10,000/year or less compared to 79% of those earning $100,000/year or more reported respectful treatment) and educational attainment (43% among those with no high school diploma compared to 74% of those with a graduate degree).

We were curious if respondents who had never worked in the underground economy and who had never been incarcerated would report differing degrees of respectful treatment by police. We found that incidence of respectful treatment and harassment increased for these respondents, but not dramatically. Seventy-seven (77%) of those who have never worked in the underground economy and have never been to jail or prison reported that officers treated them with disrespect (compared to our overall rate of 68%) and 22% reported disrespectful treatment (compared to 30% of the overall sample).

Race had a larger impact on interactions with the police, with white respondents experiencing respectful treatment at much higher levels than their peers who are people of color. Gender non-conforming respondents and transgender men reported higher rates of disrespect than transgender women.

One-fifth of respondents who have interacted with police reported harassment by police.
HARASSMENT AND ASSAULT

We asked respondents whether they were harassed, physically assaulted, or sexually assaulted by police officers because they were transgender or gender non-conforming. There were notable differences between reported frequency of harassment compared to reported frequency of physical and sexual assault.

Twenty-two percent (22%) of respondents interacting with police reported harassment by officers. Higher rates of harassment were reported by Black (38%), multiracial (36%) and Asian (29%) respondents. Higher household income and educational attainment made it less likely that a person experienced harassment. Female-to-male and gender non-conforming respondents reported higher rates of police harassment than their MTF and transgender counterparts. Looking at whether harassment was also directed at those who had never worked in the underground economy and had never been incarcerated, we found still high rates of harassment, with 15% reporting that officers harassed them, compared to the 22% overall rate for all respondents who interacted with police.

Six percent (6%) of study participants who had interacted with police reported physical assault, and 2% reported sexual assault because of being transgender or gender non-conforming. Fifteen percent (15%) of Black respondents interacting with police reported physical assault and 7% reported sexual assault. Those who have worked in the underground economy experienced high rates of physical (15%) and sexual assault (8%). Two percent (2%) of those who have never worked in the underground economy and have never been incarcerated reported physical assault.

“After I was raped, the officer told me that I got what I deserved.”
“I did not pass as male, but I was obviously presenting as a masculine person at a nightclub. I kissed the cheek of my girlfriend at the time. ... The security guard picked me up and carried me towards the door, kicked the door open with his foot and launched me out the door of the nightclub. I tumbled to the ground to find three police officers standing over me. One said, ‘Do we have trouble here?’ The security guard said, ‘The trouble is that this fucking lesbian needs to know what it’s like to be with a man.’ They all started to laugh. ‘I could show her,’ one police officer said. Just then my friends bolted through the door and instructed me to run. I stumbled to my feet and narrowly escaped the officer’s hands. ‘Fucking dykes! Don’t come back here unless you wanna get fucked!’ one of the officers screamed as we ran off.”
Comfort in Seeking Police Assistance

Police harassment and assault had an apparent deterrent effect on respondents’ willingness to seek help from law enforcement; 46% of the sample reported that they were uncomfortable seeking help from police while only 35% reported that they were comfortable doing so.

Almost half of the respondents reported being uncomfortable seeking police assistance.

Those who have never worked in the underground economy nor were ever incarcerated reported only a slight decrease in discomfort in seeking police assistance, with 42% uncomfortable and 37% comfortable.

“My boyfriend and I were jumped last year because he was wearing a dress. I didn’t call the police because we are both gender non-conforming and he is a person of color.”

“Street harassment is the most constant gender-related experience of discrimination in my day-to-day life: from cops, other government workers, as well as fellow city residents. My experience ranges from catcalls, to being followed (on foot and in cars) by threatening groups of people, to having things thrown at me. Enough of this harassment comes from cops that I can’t imagine a situation in which I’d either report it to the police or want them to intervene.”

Levels of Comfort and Discomfort in Seeking Help from Police by Race

Levels of Comfort and Discomfort in Seeking Help from Police by Gender Identity/Expression

Levels of Comfort and Discomfort in Seeking Help from Police
Incarceration

Seven percent (7%) of study participants reported being arrested or held in a cell strictly due to bias of police officers on the basis of gender identity/expression. Four percent (4%) of those who have not worked in the underground economy reported being arrested or held in a cell due to this same bias.

This experience was heightened for respondents of color. Black and Latino/a incidences of being incarcerated due only to gender identity/expression were much higher than the overall sample’s experience, at 41% and 21% respectively.

Sixteen percent (16%) of respondents reported being sent to jail or prison “for any reason,” with Black (47%) and American Indian (30%) respondents at highest risk for going to jail/prison. Twenty-one percent (21%) of male-to-female transgender respondents reported having been sent to jail for any reason, in contrast with 10% of female-to-male respondents.

These statistics exceed those of the general population for prisons, in some cases by many times. A 2003 report of the Department of Justice shows that 2.7% of the general American population is imprisoned at some point in life. However, the Department of Justice report does not include jails, so the general population rate for being held in jail or prison should be higher than the simple prison rate.

Despite this difference, the Department of Justice data provides a useful benchmark. Their data reported an overall rate for males of 4.9%, and for females, 0.5%. They provide only limited racial/ethnic data.

Because the Department of Justice data is limited to prisons and does not include jails, the comparison with our data is not exact. However, the difference in reported rates is stark, with respondents in our sample reporting many times the rate of incarceration than the general population, based on the best available data for comparison.

Incarceration by Race

<table>
<thead>
<tr>
<th>Race</th>
<th>Arrested/Jailed Due to Bias</th>
<th>Jailed for Any Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Sample</td>
<td>7%</td>
<td>13%</td>
</tr>
<tr>
<td>American Indian</td>
<td>10%</td>
<td>13%</td>
</tr>
<tr>
<td>Asian</td>
<td>16%</td>
<td>13%</td>
</tr>
<tr>
<td>Black</td>
<td>41%</td>
<td>47%</td>
</tr>
<tr>
<td>Latino/a</td>
<td>21%</td>
<td>25%</td>
</tr>
<tr>
<td>White</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>Multiracial</td>
<td>10%</td>
<td>10%</td>
</tr>
</tbody>
</table>

Incarceration by Gender Identity/Expression

<table>
<thead>
<tr>
<th>Gender Identity/Expression</th>
<th>Arrested/Jailed Due to Bias</th>
<th>Jailed for Any Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>All</td>
<td>21%</td>
<td>11%</td>
</tr>
<tr>
<td>MTF</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>FTM</td>
<td>10%</td>
<td>9%</td>
</tr>
<tr>
<td>All Trans</td>
<td>17%</td>
<td>12%</td>
</tr>
<tr>
<td>GNC</td>
<td>4%</td>
<td>4%</td>
</tr>
</tbody>
</table>

Incarceration by Gender and Race/Ethnicity in the General Population from the Department of Justice

<table>
<thead>
<tr>
<th></th>
<th>All</th>
<th>Males</th>
<th>Females</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Population</td>
<td>2.7%</td>
<td>4.9%</td>
<td>0.5%</td>
</tr>
<tr>
<td>White</td>
<td>1.4%</td>
<td>2.6%</td>
<td>0.3%</td>
</tr>
<tr>
<td>Black</td>
<td>8.9%</td>
<td>16.6%</td>
<td>1.7%</td>
</tr>
<tr>
<td>Latino/a</td>
<td>4.3%</td>
<td>7.7%</td>
<td>0.7%</td>
</tr>
</tbody>
</table>
LENGTH OF INCARCERATION

Respondents were asked to provide the total amount of time they have been in jail/prison throughout their lives.

In terms of race, Black respondents had by far the worst outcomes in terms of length of stay in jails/prisons. Five percent (5%) of African Americans sent to jail for any reason were incarcerated for 10 or more years and 10% were incarcerated for 5-10 years. By contrast, the only 4% of the full sample served 5 or more years in jail.

As is true in other populations, participants’ jail time decreased as household income increased; educational attainment was also inversely correlated with jail time.

Male-to-female transgender respondents reported serving more time than FTMs. In general, transgender respondents served longer sentences (or more sentences) than gender non-conforming participants, faring worse in every category except the lowest (serving under 6 months).

“I was arrested recently and the officer thought it necessary to announce in a loud tone to the entire jail that I was a transgender man.”

![Total Length of Incarceration by Gender Identity/Expression](chart.png)
Experiences in Jail and Prison

Not surprisingly, the mistreatment and abuse by law enforcement officers that transgender and gender non-conforming people experienced on the street and in their communities continued when respondents were in custody. Harassment and assault at the hands of corrections officers and by other inmates from whom they have no escape was frequent both for transgender and gender non-conforming respondents.

HARASSMENT AND ASSAULT IN JAIL AND PRISON

Harassment

Thirty-five percent (35%) of respondents who served time in jail/prison reported harassment by other inmates. Latino/a (56%), Black (50%), and multiracial (43%) respondents all report much higher incidence of peer harassment than the full sample. MTFs (40%) and transgender (38%) respondents report higher rates of peer harassment than their FTM (29%) and gender non-conforming (29%) peers.

Of respondents who went to jail/prison, 37% reported they were harassed by correctional officers or staff. Respondents of color experienced officer/staff harassment at higher rates (44%-56%) than their white peers. Transgender male inmates experienced officer/staff harassment at higher incidence than their transgender female peers.

“While I only experienced verbal harassment and rape threats during a night in jail, I watched a trans woman arrested with me experience physical and sexual assault from the police that night as well as extensive verbal harassment and humiliation.”
Physical and Sexual Assault

When someone is sent to jail or prison, society agrees that rape should never be part of the sentence. Unfortunately, for many of our respondents, it is. Respondents who went to jail/prison report alarming levels of physical assault (16%) and sexual assault (15%) perpetrated both by other inmates and by staff. Black respondents reported the highest incidence of sexual assault in prison (34%) by other inmates or by staff.

Male-to-female transgender respondents reported higher incidence of physical assault (21%) than their FTM peers (11%). MTF respondents also reported a higher rate of sexual assault (20%) than FTM respondents (6%). Transgender inmates experienced physical and sexual assault at higher frequencies (19% and 16%) than their gender non-conforming peers (4% and 8%).

It is not easy to compare this information with the general population of people who go to jail/prison, since most surveys ask about sexual assault that occurred in the prior year only. One study from California that was not limited to the last year, shows an overall sexual assault rate of 4.4% of all inmates in male California correctional facilities.4
Transgender women of color were particularly vulnerable to sexual assault in jail/prison. Thirty-eight percent (38%) of Black MTF respondents reported being sexually assaulted by either another inmate or a staff member in jail/prison. Unfortunately, breaking our respondents who had gone to jail/prison down both by race and gender created individual sample sizes too small for analysis, including for nearly all FTM respondents. However, we include the following table below to highlight the experiences of transgender women by race. We have indicated where sample size was too low to present reliable data.

"I was arrested one day regarding something minor. Due to my gender being marked as male, I was put in with the men. Within 15 minutes, I was raped by 3 different men. My mother even called and warned the officers NOT to put me in with general population as I would be an easy target. When I got out I tried to seek help from Victims Services but was denied. I was also discouraged from trying to press charges on the men."
DENIAL OF HEALTH CARE IN PRISON

Respondents also reported abuse through denial of general health care as well as hormone therapy.

The damaging effects of being denied general health care are self-evident; however, it is important for readers to also understand that denial of hormone treatment to transgender inmates also has serious health consequences. Interruptions in hormone therapy can be physically painful and damaging to a person’s physical and mental health, and the initiation of hormone therapy for those who need it is highly important.

Seventeen percent (17%) reported they were denied hormones by while incarcerated and 12% reported denial of routine medical care because of bias.

Black and multiracial respondents, those with low household incomes, and transgender women all reported higher incidences of hormone and routine health care denial than the full sample.
CONCLUSIONS FOR POLICE AND INCARCERATION

Respondents revealed gross differences in treatment by police and prison systems based on race, with African Americans incarcerated more often and at greater length within a much more abusive and violent context than for others. Latino/a respondents also experienced much worse police abuse, longer sentences and greater harassment and violence than the sample as a whole. While the sample of American Indians who had been incarcerated was too low to report on, the data we do have demonstrate a need for further research. The data also demonstrate gender-based biases, with male-to-female respondents experiencing high rates of physical and sexual assault.

Household income and education level were also relevant to treatment by police and the prison system, with lower educational attainment and household income associated with higher risk for incarceration, harassment and violence; in this regard, our sample reflected the experiences of Americans in general. Male-to-female transgender prisoners of color face violence at the highest numbers and at every turn — whether at the hands of police, corrections officers or other inmates. A nexus of biases based on gender identity, race and household income combine to leave some respondents in this study in particularly desperate circumstances at the hands of the law enforcement system.

All transgender and gender non-conforming people experience high levels of police harassment and abuse. A substantial number have been stopped — arrested or held in a cell — simply because they are transgender or gender non-conforming (known as “Walking While Transgender”). Police harassment and abuse has translated to a lack of trust of police, with about half of transgender and gender non-conforming people uncomfortable asking the police for assistance when needed. Only a third feel comfortable contacting police for help. Given the higher than normal rates of harassment and violence that transgender and gender non-conforming people face, this means that many feel unable to access one of the major resources that society provides to protect the safety of individuals in their time of need.

In jail and prison, abuse and violence continues in situations where transgender and gender non-conforming inmates often have no protection or escape. Correctional staff are frequently cited as participating in harassment, violence, and sexual assault—a serious abuse of authority.

As noted in the health care section, access to health care is a fundamental right often denied to study participants. Data from the prison context confirms this, showing regular denial of both routine and transgender-related health care services.

From every angle, the justice system is broken for transgender and gender non-conforming people. Instead of administering justice, it perpetrates injustice.
RECOMMENDATIONS FOR POLICE AND INCARCERATION

The data provides clarity on what is not working in the justice system. We recommend the following affirmative steps for police departments, corrections systems, and the justice system overall.

• Police departments should reform their approach to transgender and gender non-conforming people:
  • All officers, both new and those who are already serving, should be given comprehensive training to treat transgender and gender non-conforming people respectfully, regardless of whether the person is seeking assistance or is being arrested.
  • In order to sustain and reinforce the effect of training, departments need written policies related to respectful treatment, arrest procedures, and placement in housing, so that all officers know the expected protocols or can consult them when necessary.
  • Officers who fail to follow these policies, or otherwise engage in disrespectful treatment or violent behavior, should face discipline, including termination when warranted.
  • A culture of respect for diversity, including of transgender and gender non-conforming people should be established by departmental leadership.
  • Police departments should establish LGBT liaison units to be an internal voice for fairness, respectful treatment, and appropriate policies. Existing lesbian and gay units should expand to include transgender and gender non-conforming officers and issues as well.

• Jail and prison officials and systems, including the Federal Bureau of Prisons, should reform their approach and policies related to transgender and gender non-conforming inmates:
  • The U.S. Department of Justice should swiftly adopt strong, binding national regulations to implement the Prison Rape Elimination Act of 2003.
  • Until national regulations are established, prisons, jails and detention facilities should fully implement the recommendations of the National Prison Rape Elimination Commission.
  • Corrections staff should be given comprehensive training on how to treat transgender and gender non-conforming inmates with respect, including allowing people to express their gender identity through clothing and grooming.
  • Jail and prison systems need written policies on transgender and gender non-conforming inmates, to ensure they are housed according to their gender identity, unless their safety is jeopardized by this classification; however, this does not mean transgender and gender non-conforming inmates should be held in solitary confinement or administrative segregation or otherwise have their privileges reduced in a misguided attempt to keep them safe.
  • Jail and prison systems should enact policies and procedures that ensure all inmates are free of physical and sexual assault.
  • Jail and prison systems should provide appropriate medical care to transgender and gender non-conforming inmates.
  • Department of corrections must terminate staff who physically or sexually assault prisoners and otherwise ensure that staff are accountable for their actions when they endanger the health and well-being of inmates.
We asked respondents to report whether officers had treated them with respect or disrespect, harassed, physically assaulted, or sexually assaulted them. We left it up to respondents to select which terms best described their experience.


3 Generally, a jail is a facility administered by a local jurisdiction to confine people for short periods of time. A prison is administered by the state and used to house convicted criminals for generally longer periods.

A SNAPSHOT OF THE EXPERIENCES OF CROSS-DRESSERS

Study participants included 702 cross-dressers\(^1\) who were born male and cross-dress as women, about 11% of our overall sample. This group identified themselves by stating that they strongly identified with the term “cross-dresser.”\(^2\)

They were spread amongst the racial categories, with a bit more concentration in white and Latino/a groups, making up 13% of white respondents, 7% of Latino/as, 5% of Asian and multi-racial respondents, 4% of American Indians, and 3% of African Americans.

As a group, cross-dressers were less “out” to their family, friends and colleagues at work or school, than the rest of the sample. Twenty-eight percent (28%) never tell anyone about their transgender/gender non-conforming identity, 57% tell close friends, 28% tell some family members, 7% tell casual friends, and 7% tell work colleagues. Only 4% tell everyone. Since social isolation can have major impacts on mental and physical health, this reduced level of “outness” deserves further study.

At home, only 32% are out to “all,” with 22% out to “none” and 38% out to a few or some. On the job, 3% are out to “all,” 68% are out to “none,” with 24% out to a few or some. At school, 2% are out to “all,” 81% are out to “none,” with 15% out to some or a few.

In addition, cross-dressers reported being visual conformers; 37% reported that other people never know they are transgender/gender non-conforming if they are not told, 29% reported that other people only occasionally can tell, and 26% reported that others only sometimes can tell. We presume that respondents were answering this question about times when they were not cross-dressed, but there may have been some confusion about whether to answer this question in regard to occasions when they were cross-dressed or not.

About half (46%) indicated that they did not want to transition, and the other half (54%) reported that they did want to transition someday. This implies that for about half of those who identify with the term “cross-dresser,” this may be an interim identity on the way to a transsexual identity. On the other hand, half of these respondents intend to remain in this category, which indicates that it is a permanent identity. This contradicts assumptions that those who identify as cross-dressers are moving toward a transsexual identity.

Cross-dressers were more likely to be partnered (60%) than transgender (46%) and gender non-conforming (57%) respondents; 52% reported being married. Almost half (44%) reported a heterosexual sexual orientation, 38% bisexual, 9% gay/lesbian/same-gender, 3% queer, 3% asexual and 2% other. Accordingly, cross-dressers were much more often heterosexual or bisexual and much less often same-sex oriented or queer than the full sample.\(^3\)

Thirty-two percent (32%) of cross-dressers served in the military compared to 20% in the full sample, and 10% of the general population.\(^4\)

“As a cross-dresser in Atlanta I have had very few problems. I have been stopped at police road blocks 3 times and had no problems other than a few extra questions about the ID/picture issue.”

“As a part-time lifelong cross-dresser, I would love to see a day when a male can dress as a female, in public, without ridicule and fear of physical abuse. My need to dress on the feminine side is real. It makes me whole as a person. Women have enjoyed cross dressing for 50+ years, and no one gives it a second thought.”
Education

Because cross-dressers made up only 11% of our overall sample, the sample size of those who were also open about their gender non-conforming status in school was too small to offer meaningful analysis. We can say, however, that 58% of cross-dressers who expressed a transgender identity or gender non-conformity in school experienced some type of problem, including harassment, physical or sexual assault, or expulsion.

Employment

Respondents who identify as cross-dressers reported faring better in the workplace than the overall sample, likely due to higher rates of visual conformity and their much lower rates of being out at work.

Only 7% reported being unemployed, which was the unemployment level in the general population during the period of data collection. Thirty-eight percent (38%) reported a household income of $50,000-100,000 per year with another 25% reporting $100,000 per year or above. These household income levels were much higher than the full sample, of which 41% percent earns $50,000 or more annually. Seven percent (7%) of cross-dressers reported household income of $10,000 annually or less, a rate that is higher than the general population’s experience of very low household income (4%), and much lower than the full sample (15%).

However, cross-dressers do experience a range of bias-related negative experiences in the workplace: 13% reported losing a job because of bias, 34% reported harassment at work, 12% reported being denied a promotion, 18% were denied a job they applied for, 4% reported physical assault, and 6% reported sexual assault. The rates of these negative workplace experiences are all lower than the overall sample, except for sexual assault, which was approximately the same.

Thirty percent (30%) reported that private information was shared about them by coworkers or supervisors. Eighty percent (80%) reported that they have hidden their gender or gender transition and 56% have delayed transition. Twenty-seven percent (27%) reported being underemployed. Seven percent (7%) have participated in the underground economy for household income (compared to 16% for the overall sample), including 4% doing sex work and 3% in drug sales.

Public Accommodation

Cross-dressers reported denial of equal treatment and harassment when accessing public accommodation. Of the settings we studied, equal service was denied most often at retail stores (22%) and hotels and restaurants (11%) with troubling rates of denial of equal treatment reported when interacting with government agencies/officials (7%), police (7%), and judges or court officials (4%). Respondents also reported denial of equal treatment when taking buses/trains/taxis (5%) and accessing rape crisis centers (3%).

Harassment was also a major problem. Twenty-two percent (22%) said they had been harassed in a retail store, 11% when using buses, trains or taxis, 11% by hotel/restaurant personnel, 12% by government agencies, 7% by judges or court officials, 8% by airline/airport personnel or the TSA, 8% in doctor’s offices or hospitals, and 3% when accessing ambulances.

Housing

Fifty-eight percent (58%) reported living in a home that they own; this is nearly twice the rate of home ownership as the full sample, and 9 percentage points under the national average. Twenty-seven percent (27%) reported living in a space that they rented. Five percent (5%) reported living in a home that is owned by a partner/spouse, 3% reported living with family or friends temporarily, and 1% reported living in campus housing.

Twenty-three percent (23%) of respondents who are cross-dressers reported having moved into a less expensive home/apartment because of being transgender or gender non-conforming, 7% had become homeless at some point because of bias, 4% reported eviction, 6% were denied an apartment/home, 14% had to find different places to sleep for short periods of time, and 8% had sex in exchange for housing or a place to stay.

“I was intentionally discriminated against by a motel owner. He told me that he would not give me a room because I was a cross-dresser, and to leave the property or he was going to call the police and tell them that a hooker was in the parking lot selling drugs.”
Police/Jails

Cross-dressers reported a substantial degree of police disrespect and mistreatment. Twenty percent (20%) of those interacting with police as a transgender/gender non-conforming person reported that they were generally treated with disrespect and 15% reported harassment. Eight percent (8%) reported being physically attacked by a police officer and 3% reported sexual assault. Twenty-nine percent (29%) indicated they were comfortable seeking police assistance and 46% indicated they were not comfortable seeking police assistance as a transgender or gender non-conforming person. Three percent (3%) reported being arrested or held in a cell solely because of their gender identity/ expression.

Health Care

Eleven percent (11%) of respondents who cross-dress reported postponing needed medical care when sick or injured due to bias and 10% reported postponing preventive care due to bias.

Cross-dressers also report having accessed some transition-related health care. Counseling was the most accessed, followed by hormone treatment. About half desire at least one type of surgery, which is consistent with the finding that about half desired to transition some day.

Respondents who identify as cross-dressers reported poorer health outcomes than the general population but much better health outcomes than those with other gender identities/expressions in our sample.

Cross-dressers reported elevated rates of HIV infection at 1.01%, not quite twice the rate of the general population (.6%), but lower than the full sample (2.64%). Cross-dressers also reported drinking or using drugs to cope with the mistreatment they face as transgender/gender non-conforming persons: 6% reported current use and 7% reported former use. By contrast, (8%) of the full sample currently drinks or uses drugs to cope with mistreatment due to bias and (18%) reported former use.

Smoking rates are the same as the full sample; 29% of cross-dressers reported being current smokers compared to 30% of all study participants.

Finally, 21% of cross-dressers reported a suicide attempt — about half the rate of the overall sample (41%), but it is still many times the general population rate of 1.6%.

Family Life

Of those who came out to family, 60% reported their family remained as strong as before they came out. Thirty-one (31%) of those who were in a relationship reported that their relationship with their partner or spouse ended.

Sixty-one percent (61%) of cross-dressers are parents. Eighty-one percent (81%) reported that their children continued to speak and spend time with them, while 19% reported that their children limited contact. Sixteen percent (16%) stated that their former spouse limited or stopped their relationship with their children and 5% reported that a court/judge did so.

Twelve percent (12%) reported they were victims of violence by a family member due to their gender identity/expression.

Thirty-nine (39%) reported losing a close friendship because of their gender identity/expression.

“I am a private cross dresser (male-to-female). Only my wife knows, and she does not approve.”

“My ex-wife seemed to accept my cross-dressing prior to marriage, then rejected it.”
Conclusions

Because cross-dressers may live as or express a gender different than the one assigned to them at birth only part of the time, they have different experiences of discrimination. Because they can often make choices about when and if to come out to others, they seemed to be shielded from some of the hostile environments reported by our other respondents. Nonetheless, a sizable number reported dealing with bias and violence in their lives. This may well stem from the fact that they offer no visual clues about their gender identity when they are not cross-dressed, but may well be identifiable as gender different when they are dressed. It appears that this group is highly vulnerable part of the time and much less vulnerable at other times.

All of these factors deserve further study; statistically we know relatively little about the lives of cross-dressers and additional research would greatly enhance our knowledge.

“20 years in the Army, 2 in Vietnam, 2 Bronze stars, a Purple Heart. I met my wife while serving and told her that I was a transvestite. I dressed at home. After the service, I got a civil service job and stayed in the closet. Now I am retired and I live in a town that is next to a large Marine base. Dressing here would be committing suicide. I dress up at home every day, but never go outside in my feminine attire.”

Endnotes

1 We had a small number of cross-dressers in our sample who were female at birth, and, because of the differing levels of social stigma associated with wearing clothes of a different sex for men and women, we felt it was important to focus here on the experiences of those cross-dressers who were born male.

2 Those respondents who did not strongly identify with any of the terms in Question 4 were then classified based on their “somewhat” applies answers, so some of the cross-dressers in the sample only identified “somewhat” as a cross-dresser. If a respondent chose “strongly” cross-dresser and “strongly” transsexual (or were both “somewhat”), they were put in the transgender category.

3 This may be in part because many define cross-dresser as a term that only applies to heterosexuals, while the term drag queen or drag king is used more by those who identify as gay, lesbian, or bisexual.

We gave respondents a list of 13 policy areas and asked that they select the four that were most important. The nature of this question allowed respondents to identify their own priorities from this list, based on their individual experiences. The results show remarkable concurrence on priorities, and they also reveal the breadth of concerns that individuals prioritize as being the most essential to the improvement of their lives. It is also clear that priorities vary slightly by race and gender, reflecting particular vulnerabilities and unaddressed needs. It is not suggested by this report that these ranked priorities are an appropriate or accurate way for advocacy organizations or activists to prioritize work; rather, they are a reflection of what individuals identified as the policy areas in which they wished to see work or change.

The following are the 13 policy areas ranked in order of the frequency that respondents marked each.

**Policy Priorities**

<table>
<thead>
<tr>
<th>Policy Area</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protecting transgender/gender non-conforming people from discrimination in hiring and at work</td>
<td>70%</td>
</tr>
<tr>
<td>Getting transgender-related health care covered by insurance</td>
<td>64%</td>
</tr>
<tr>
<td>Passing laws that address hate crimes against transgender/gender non-conforming people</td>
<td>47%</td>
</tr>
<tr>
<td>Access to transgender-sensitive health care</td>
<td>43%</td>
</tr>
<tr>
<td>Better policies on gender and identity documents and other records</td>
<td>40%</td>
</tr>
<tr>
<td>Protecting transgender/gender non-conforming people from discrimination in housing</td>
<td>26%</td>
</tr>
<tr>
<td>The right to equal recognition of marriages involving transgender partners</td>
<td>25%</td>
</tr>
<tr>
<td>Passing anti-bullying laws that make schools safer</td>
<td>21%</td>
</tr>
<tr>
<td>Transgender/gender non-conforming prisoners’ rights</td>
<td>15%</td>
</tr>
<tr>
<td>The right of transgender/gender non-conforming people to parent, including adoption</td>
<td>14%</td>
</tr>
<tr>
<td>HIV prevention, education and treatment</td>
<td>11%</td>
</tr>
<tr>
<td>Allowing transgender/gender non-conforming people to serve in the military</td>
<td>7%</td>
</tr>
<tr>
<td>Immigration policy reform (such as asylum or partner recognition)</td>
<td>5%</td>
</tr>
</tbody>
</table>

Employment non-discrimination was the highest ranking priority for the sample overall as well as for all races and genders except for transgender men. FTM respondents ranked “Getting transgender-related health care covered by insurance” first (72%), followed by “Protecting transgender/non-conforming people from discrimination in hiring and at work” (67%).

Although their top priorities were the same as the overall sample, African American respondents marked both “HIV prevention, education, and treatment” (43%) and “Transgender/gender non-conforming prisoner’s rights” (23%) more often than the overall sample (11% and 15%). Also, Latino/a respondents were three times more likely to have marked “Immigration policy reform (such as asylum or partner recognition)” (15%) than the overall sample (5%).
CONCLUSION

This report thoroughly documents the injustices that transgender and gender non-conforming people face at every turn. In fact, study respondents were more likely to have experienced harassment at work, at school, in the doctor’s office, or on the street than to have escaped such mistreatment. Over and over again, respondents were fired, evicted, denied medical care, faced dire poverty or were bullied in school at rates far above the national average. People of color very clearly experienced the compounding and devastating effects of racism, with far higher levels of discrimination and poorer health outcomes than the sample as a whole.

Working on this report has been challenging for the researchers as we have catalogued the many ways in which people are mistreated and abused, and we assume it has been challenging reading as well. Tremendous damage results from institutional structures weighted against transgender and gender non-conforming people and from blatant acts of personal prejudice perpetrated against them just because they are different. Sometimes there are official policies in place that make it acceptable to discriminate against transgender people; in other cases, social customs or culture sanction bias and mistreatment.

We hope, however, that one thing stands out for you as it does for us: the remarkable resilience of transgender and gender non-conforming people and their families. These are people who continue to live and move forward in spite of the most daunting obstacles. They faced serious barriers to health care, and yet were able to access necessary transition-related care. Teachers and other school officials physically and sexually assaulted transgender and gender non-conforming students, and yet, although some were forced to leave school because of extreme bullying, the sample as a whole achieved a high level of educational attainment. Despite the stereotypes of broken families, and in light of all the stresses discrimination places on relationships, respondents maintained relationships with their partners, children and families.

A quarter of respondents have endured multiple acts of discrimination, any one of which would seriously impact a person’s life, and combined would be catastrophic, and yet they persevere.

It is in the spirit of transgender and gender non-conforming people everywhere who continue to thrive and contribute to their communities, despite all of the injustices they suffer and the barriers to their well-being that they face, that we present this report with the determination that it will move us forward as a community. We recognize, too, that there are many, many people we have lost along the way, who have been unable to survive the unremitting discrimination, harassment and violence that they have encountered. We can honor them by working for a world in which transgender and gender non-conforming people are free to live without fearing the marginalization and abuse detailed here, in ways that respect every individual’s right to self-determination and affirm our collective humanity.

“Even had I known the financial, legal, emotional, and physical obstacles that I would face, I would still have chosen to transition and live as I do today.”
APPENDIX A: GLOSSARY

**AG or Aggressive** A masculine identified woman; primarily used in communities of color.

**Androgynous** Refers to those whose appearance and identity do not conform to conventional views of masculinity or femininity, and who either combine aspects of both femininity and masculinity or who present in a non-gendered way.

**Butch** An identity term used by some masculine lesbian women. It is also used by others who have a masculine presentation, regardless of their sexual orientation or gender.

**Cross-Dresser** A term for people who dress in clothing not typically worn by their assigned birth sex, but who generally do not desire to live full-time as the other gender. For the purposes of this study, the term cross-dresser refers to those who identified with the term cross-dresser in Question 4 (for more information, see the Portrait chapter).

**Drag King** A term generally used to refer to women who occasionally dress as men or express female masculinity for personal satisfaction or for the purpose of entertaining others at bars, clubs or other venues. Some transgender men also use this term to describe their identity.

**Drag Queen** A term generally used to refer to men who occasionally dress as women for personal satisfaction or for the purpose of entertaining others at bars, clubs or other venues. It is also used incorrectly, sometimes in a derogatory manner, to refer to all transgender women.

**Drag Performer** A term used to refer to Drag Kings and Drag Queens who entertain others at bars, clubs or other venues. Some transgender people perform drag.

**Feminine Male** A person assigned male at birth who has a feminine identity or prefers a feminine appearance, or who otherwise express femininity.

**FTM** A person who transitions “from female to male,” meaning a person who was assigned female at birth, but identifies and lives as or hopes to live as a male. We also use the term “transgender man” as a synonym.

**Gender Expression** How a person presents or expresses his or her gender identity to others, often through manner, clothing, hairstyles, voice or body characteristics.

**Gender Identity** In general, this refers to an individual’s internal sense of gender. Since gender identity is internal, one’s gender identity is not necessarily perceived by or visible to others. In this report, we use this term to refer generally to the full range of identities that our respondents identified with, such as MTF, FTM, transgender, genderqueer, etc.

**Gender Non-Conforming** A term for individuals whose gender expression is different from societal expectations and/or stereotypes related to gender. For the purposes of this report, we include individuals identified with a number of gender non-conforming identities in Question 4 (see the Portrait chapter for more information). Although it is not often abbreviated to GNC, we have done so in this report for labeling charts.

**Genderqueer** A term used by individuals who identify as neither entirely male nor female, identify as a combination of both, or who present in a non-gendered way.

**Gender Variant** A synonym for gender non-conforming.

**GNC** See gender non-conforming.

**Hormone Therapy** The administration of hormones to facilitate the development of secondary sex characteristics as part of a medical transition process. Those medically transitioning from female to male may take testosterone while those transitioning from male to female may take estrogen and androgen blockers.

**Intersex** Generally, a term used for people who have Differences of Sex Development, such as being born with external genitalia, chromosomes, or internal reproductive systems that are not traditionally associated with typical medical definitions of male or female. In this survey, we inquired about whether respondents identified with the term intersex, rather than asking about medical diagnoses.

**MTF** A person who transitions “from male to female,” meaning a person who was assigned male at birth, but identifies and lives as or hopes to live as a female. We also use the term “transgender woman” as a synonym.

**Queer** A term used to refer to lesbian, gay, bisexual and/or transgender people or the LGBT community. For some, the term is useful to assert a strong sense of identity and community across sexual orientations and gender identities. For others, it refers to the lesbian/gay/bisexual part of the community. Used as a reclaimed epithet for empowerment by many, it is still considered by some to be a derogatory term.
**Sexual Orientation** A term describing a person’s attraction to members of the same gender and/or different gender. Usually defined as lesbian, gay, bisexual, or heterosexual and can also include queer, pansexual and asexual, among others.

**Sex Reassignment Surgery** A term that refers to various surgical procedures that change one’s body to align gender identity and presentation. Contrary to popular belief, there is not one surgery; in fact there are many different surgeries. “Sex change surgery” is considered a derogatory term by some. Examples of sex reassignment surgery include:

- **Breast Augmentation** The surgical enlargement of breast tissue as part of gender reassignment for male-to-female patients when the breasts do not grow sufficiently with hormone therapy.
- **Chest Surgery** The removal of breasts (mastectomy) in transgender men or the augmentation of breasts for transgender women.
- **Clitoral Release** See metoidioplasty.
- **Hysterectomy** The surgical removal of the uterus.
- **Metoidioplasty** A surgical procedure to create a neopenis by releasing and extending the clitoris, often combined with surgery to allow for urination through the penis.
- **Oophorectomy** The surgical removal of the ovaries.
- **Orchiectomy** The surgical removal of the testes (the scrotum and testicles).
- **Phalloplasty** The surgical creation of a penis.
- **Vaginoplasty** The surgical creation of a vagina.

**Third Gender** A person whose gender identity is neither male nor female but a third option.

**Transgender** Generally, a term for those whose gender identity or expression is different than that typically associated with their assigned sex at birth, including transsexuals, androgynous people, cross-dressers, genderqueers, and other gender non-conforming people who identify as transgender. Some, but not all, of these individuals desire to transition gender; and some, but not all, desire medical changes to their bodies as part of this process. In this report, in order to see the experiences of different types of transgender people more clearly, cross-dressers and gender non-conforming people are not included in the term transgender and are reported about separately. For more information, see the Portrait and Methodology chapters and Appendix B: Survey Instrument—Issues and Analysis.

**Transgender Woman** A term for a transgender individual who, assigned male at birth, currently identifies as a woman. In this report, we use transgender woman, male-to-female transgender person, and MTF interchangeably.

**Transition** The period during which a person begins to live as a new gender, as opposed to living as the sex assigned at birth. Transitioning may include changing one’s name, taking hormones, having surgery, or changing documents (e.g. driver’s license, Social Security record, birth certificate) to reflect one’s new gender.

**Transsexual** A term for people whose gender identity is different from their assigned sex at birth and who live in a gender different from their birth sex, or desire to do so. Often, but not always, transsexual people alter or wish to alter their bodies through hormones or surgery in order to align themselves physically with their gender identity.

**Two-Spirit** A term that references historical multiple-gender traditions in some of the native cultures of North America. Some American Indian/Alaska Native people who are lesbian, gay, bisexual, transgender, intersex or gender non-conforming identify as Two-Spirit.

**Underground Economy** A term that refers to marginal or informal economies, such as those relating to drug sales, sex work, panhandling and other street sales. Work in the underground economy may be the only income-generating option for those who experience barriers to formal employment.

**Visual Non-Conformer** A term we developed to describe a person whose gender presentation and/or gender identity are not aligned in the eyes of passing strangers or casual observers. For example a transgender man who is perceived as female by a clerk in a store; or a transgender woman who is seen as male by a front desk person at a hotel. The opposite term is “visual conformer” which refers to people whose gender identity and presentation match in casual situations; this is sometimes called “passing.”

**Additional Note on Usage:**

Throughout the report, we used the phrase “because they were transgender or gender non-conforming” interchangeably with “because of gender identity/expression.”
APPENDIX B:
THE SURVEY INSTRUMENT — ISSUES AND ANALYSIS

It was our intention to use this first large national survey to broadly explore issues of discrimination. As such, the questionnaire was quite lengthy, yet limited in the depth into each topic we delved. We encourage other researchers to use this as a starting point to dig deeper into areas of particular interest.

As we analyzed our data, we were able to get a better sense of the strengths and weaknesses of our survey instrument. There are choices we made that were appropriate for our study that may not be appropriate for others; some choices have made our work difficult, but may make others’ work more layered and interesting. We consider these possibilities here in the spirit of expanding our collective learning.

We informally tested the questionnaire to attempt to identify and correct problems with specific questions before we fielded the survey. We would have liked more time and resources to test questions more robustly.

Imperfections in the posing of questions emerged during our data analysis phase. Here, we discuss each of the survey questions, provide any notable information about how we analyzed the data that came from the question, and, when relevant, note what we would recommend be changed or could be changed about the question.
The Questionnaire

“Transgender/gender non-conforming” describes people whose gender identity or expression is different, at least part of the time, from the sex assigned to them at birth.

1. Do you consider yourself to be transgender/gender non-conforming in any way?
   - Yes
   - No. If no, do NOT continue.

Anyone who answered “No” to this first question was excluded from our sample. Anyone who left this question blank was included or excluded based on their answers to other questions. We intentionally included respondents in the sample who did not identify as transgender because we wanted to include gender non-conforming people. We understood that by gathering data on gender identity/expression across a broad spectrum, and posing questions in a manner that would make it possible to distinguish transgender and gender non-conforming respondents for analysis, we could discover and report on differences across the spectrum when considerable or relevant.

2. What sex were you assigned at birth, on your original birth certificate?
   - Male
   - Female

See note after question 3.

3. What is your primary gender identity today?
   - Male/Man
   - Female/Woman
   - Part time as one gender, part time as another
   - A gender not listed here, please specify _______________________________

 Anyone who chose one sex/gender for Question 2 and a different sex/gender for Question 3 was included in the sample as a transgender person. Those who marked the same gender for both questions, or chose the “part-time” or “gender not listed here” options in 3, were classified as transgender or gender non-conforming, depending on their answers to other questions.

Going through the write-in answers to Question 3 was time-consuming, but very helpful. We found hundreds of “genders-not-listed-here” among our respondents. We had anticipated that using the answers to Questions 2 and 3 would more easily help us categorize our respondents into MTF transgender, FTM transgender, and gender non-conforming categories. However, we had to rely heavily on questions 4 and 7 to better determine how to fit respondents into these constructs. This showed the value of asking more complicated, qualitative questions about gender identity.

4. For each term listed, please select to what degree it applies to you.

<table>
<thead>
<tr>
<th>Term</th>
<th>Not at all</th>
<th>Somewhat</th>
<th>Strongly</th>
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<tbody>
<tr>
<td>Transgender</td>
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<td></td>
</tr>
<tr>
<td>Transsexual</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FTM (female to male)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MTF (male to female)</td>
<td></td>
<td></td>
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<tr>
<td>Intersex</td>
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<tr>
<td>Gender non-conforming or gender variant</td>
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<tr>
<td>Genderqueer</td>
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<tr>
<td>Androgynous</td>
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<tr>
<td>Feminine male</td>
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<tr>
<td>Masculine female or butch</td>
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<tr>
<td>A.G. or Aggressive</td>
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<td></td>
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<tr>
<td>Third gender</td>
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<td></td>
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<tr>
<td>Cross dresser</td>
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<td></td>
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<tr>
<td>Drag performer (King/Queen)</td>
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<tr>
<td>Two-spirit</td>
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<td></td>
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<tr>
<td>Other, please specify</td>
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</table>
We used the answers to this question to better craft the categories of MTF and FTM, and transgender and gender non-conforming. In our analysis, we found it very valuable to have asked questions about cross-dressing and living in one’s gender part-time (Question 3) because the experiences of people living part-time in one gender and part-time in another, and those of cross-dressers, are often trivialized and little studied.

At the stage of analysis, these multilayered responses provided challenges but also a wealth of opportunities for interpretive work. Asking more simplified identity questions would create more simplified categories. As a project with limited staff resources and seemingly indefatigable volunteers, we found our dedication to nuance and complexity extremely challenging and, in most cases, very worthwhile. We realize that within the LGBT movements, our two study partner organizations collectively have much larger resources to draw from than most state or local community-based organizations. We would caution others to consider these costs when choosing between simple and more complex ways of asking these questions.

5. People can tell I’m transgender/gender non-conforming even if I don’t tell them.
- Always
- Most of the time
- Sometimes
- Occasionally
- Never

We included this question so that people who are identifiable as transgender or gender non-conforming by strangers or acquaintances because of how they look or sound could be tracked throughout the study. We used this question to develop the concept of “visual conformers” and “visual non-conformers.” We grouped “never” and “occasionally” into the “conforming” category, and the other answers into the “non-conforming” categories.

6. I tell people that I’m transgender/gender non-conforming. (Mark all that apply.)
- Never
- People who are close friends
- Casual friends
- Work colleagues
- Family
- Everyone

The inclusion of “everyone” as an answer choice left some ambiguity as to which people in the respondents’ lives they have actually told, because it is possible that a respondent did not have people of all the listed types in their lives at the time of the survey. See also the note after question 7.

7. How many people know or believe you are transgender/gender non-conforming in each of the following settings? Mark all that apply.

<table>
<thead>
<tr>
<th>Setting</th>
<th>None</th>
<th>A few</th>
<th>Some</th>
<th>Most</th>
<th>All</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>At home</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>On the job</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>In private social settings</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>In public social settings</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>When seeking medical care</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

We used the answers to Questions 6 and 7 to divide respondents into “generally out” and “generally closeted.” People who were out to “most” or “all” on the job, at school, or “in public social settings,” (Question 7) or who said they tell casual friends, work colleagues, or “everyone” they are transgender or gender non-conforming (Question 6) were identified as “generally out.” Everyone else was identified as “generally closeted.” We only found a small number of respondents who were only out to close friends and family members.

Our analysis indicated that the six answer options for each of the six settings in Question 7 was unnecessarily complex.

We also used the answers in Question 7 to determine who was out when seeking medical care, on the job, and at home.

In the questionnaire, there was a typographical error in the question about “medical” care so that it reads “medial.” We do not believe this mistake impacted responses.
8. To the best of your ability, please estimate the following ages, if they apply to you. Mark “N.A.” if not applicable or if you have no desire to transition. Please mark each line.

<table>
<thead>
<tr>
<th>Event Description</th>
<th>Age in Years</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age you first recognized that you were “different” in terms of your gender.</td>
<td>185</td>
<td></td>
</tr>
<tr>
<td>Age you first recognized your transgender/gender-non-conforming identity</td>
<td>185</td>
<td></td>
</tr>
<tr>
<td>Age you began to live full time as a transgender/gender non-conforming person.</td>
<td>185</td>
<td></td>
</tr>
<tr>
<td>Age that you first got any kind of transgender-related medical treatment.</td>
<td>185</td>
<td></td>
</tr>
<tr>
<td>Your current age</td>
<td>185</td>
<td></td>
</tr>
</tbody>
</table>

We used this question to determine current age. We also used the age that a person “began to live full time” as the age that a person transitioned.

The answer field should be limited to accept only numerical data with ages as choices, which was not done here so we needed to clean these data. In addition, it may have been better to list current age at the beginning, to increase response rates.

There is a veritable treasure trove of information here for understanding the trajectory of coming into one’s gender identity and living as one’s preferred gender alongside such issues as health outcomes, family acceptance and discrimination. For example, future researchers could use these data to determine how recently respondents transitioned or when they transitioned by decade.

9. Do you or do you want to live full-time in a gender that is different from you gender at birth?
   ❍ Yes, I currently live full-time in a gender different from my birth gender.
   ❍ Not full-time yet, but someday I want to.
   ❍ No, I do not want to live full-time.

We used this answer to determine who had transitioned, who wanted to, and who did not want to. If they had transitioned, we put them in the transgender category, regardless if they did not use that term to describe themselves in Question 4.

10. What is your zip code?
    ZIP __________

We used this information to determine respondents’ state of residence and region, as well as whether they were “urban” or “rural” using the RUCA system. We did not use the rural/urban classification to analyze our data but future researchers may do so. 

11. What is your race/ethnicity? (Mark all that apply.)
    ❍ White
    ❍ Black or African American
    ❍ American Indian or Alaska Native (enrolled or principal tribe)
    ❍ Hispanic or Latino
    ❍ Asian or Pacific Islander
    ❍ Arab or Middle Eastern
    ❍ Multiracial or mixed race

We intentionally deviated from the Census-style race question here for the purpose of brevity. Thus, we don’t have exact Census categories to match our sample with the nation as a whole, but we do have a set of categories we can align with Census data. It is usually simpler for comparative purposes to draw on existing questions in federal surveys, but we continue to believe we made the right decision.
12. What is the highest degree or level of school you have completed? Mark ONE box. If you are currently enrolled, please mark the previous grade or highest degree received.

- Elementary and/or junior high
- Some high school to 12th grade
- High school graduate - high school Diploma or the equivalent (for example: GED)
- Some college credit, but less than 1 year
- Technical school degree (such as cosmetology or computer technician)
- One or more years of college, no degree
- Associate degree (for example: AA, AS)
- Bachelor’s degree (for example: BA, AB, BS)
- Master’s degree (for example: MA, MS, MEng, MEd, MSW, MBA)
- Professional degree (for example: MD, DDS, DVM, LLB, JD)
- Doctorate degree (for example: PhD, EdD)

We primarily used these data after grouping respondents into categories. We developed the categories of “no high school diploma,” “high school diploma,” “some college” (which included Associate degrees and technical degrees) “college degree,” and “graduate/professional degree.” For other surveys, it may be simpler to ask about condensed categories like these. However, we opted for a question that used more specific categories so that future researchers will be able to make more precise comparisons with general population data from federal surveys. We would encourage future researchers to design questions in such a way as to best meet their needs for comparative data.

13. What is your current gross annual household 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
- $80,000 to $89,999
- $90,000 to $99,999
- $100,000 to $149,999
- $150,000 to $199,999
- $200,000 to $250,000
- More than $250,000

We asked respondents only about household income, not individual income. Therefore, we do not know to what extent our respondents had access to the income they reported. The income ranges presented in the survey instrument vary slightly from increments commonly reported by the U.S. Census Bureau in tables and fact sheets created from the American Community Survey (ACS) and the Current Population Survey (CPS). We utilized the CPS public use data to construct income ranges that matched ranges reported on our survey instrument, allowing us to compare our sample’s household income to that of the general population.

This way of asking the question did not allow us to say who was above or below the poverty line. Poverty lines are determined separately for individuals and families of various sizes, but our questions did not capture household size nor did the survey ask about income with enough specificity for us to determine whether a given household was above or below the line. This would have been important data.

Asking about household income likely slightly compromised our ability to detect the effect of discrimination on income. For example, if a transgender person who was fired from his or her job lives with a spouse who is working, all we can look at is their joint income. Or, if a gender non-conforming person was fired, and has moved back in with parents, the parents’ income might be included, which would also be misleading.

Future research would get a clearer picture by looking at both individual and household income.

14. How many people live in your household?

Number ________

These data were unusable because we did not clarify whether the person should include his or herself in the answer (thus, an answer of 1 might mean they live alone or it might mean they live with one other person).
15. How many children currently rely on your income?
   Number ________

This question was inartful at best. First, because of the phrase “rely on your income,” this question did not gauge how many children our respondents were raising or had raised in the past. Second, it technically doesn't even refer to any parental status — children relying on income could refer to a grandchild or niece/nephew or anyone. Simpler, standard questions relating to parental status, number of children and child-rearing responsibilities should be used. It might also be helpful include a question about adult dependants, such as elderly parents.

See note on Question 20 for how we determined parental status.

16. What is your relationship status?
   - Single
   - Partnered
   - Civil union
   - Married
   - Separated
   - Divorced
   - Widowed

This question met our analytic needs because we grouped together all of those in a relationship. Other researchers may desire to further specify “domestic partnership.” Others may also be interested in whether marriages were performed with a marriage license, which is not made clear with the question as written.

**Important Note:** When we say: “Because you are transgender/gender non-conforming, has one or two of these things happened to you,” we do not mean that your gender identity or expression is causing bad or abusive things to happen. We are trying to find out if people are treating you differently because you are transgender or gender non-conforming.

Notes in the text of questionnaires are generally to be avoided. We added this note after receiving feedback during testing of the questionnaire that the phrase, “because you are transgender/gender non-conforming,” was distressing to some respondents because its meaning and implication was unclear and could be interpreted as blaming a person’s gender identity and expression for societal reactions. We used the phrase throughout the survey so that we could report with confidence on the connection between the discrimination reported and a respondent being targeted based on gender identity or expression. Thus we added this note to clarify our intended meaning.

17. Because I am transgender/gender non-conforming, life in general is:
   - Much improved
   - Somewhat improved
   - The same
   - Somewhat worse
   - Much worse
   - In some ways better, in some ways worse

18. Because I am transgender/gender non-conforming, my housing situation is:
   - Much improved
   - Somewhat improved
   - The same
   - Somewhat worse
   - Much worse
   - In some ways better, in some ways worse

This question could have been improved by including a not applicable option for those who have not come out as transgender/gender non-conforming.

19. If you are or were employed, how has the fact that you are transgender/ gender non-conforming changed your employment situation?
   - Much improved
   - Somewhat improved
   - Stayed the same
   - Somewhat worse
   - Much worse
   - In some ways better, in some ways worse
   - Not applicable. I was never employed

The not applicable answer could have been improved by also noting that the question may not apply to people who have never come out to their employer.
20. Because you are transgender/gender non-conforming, how has your situation changed as a parent?

- Much improved
- Somewhat improved
- Stayed the same
- Somewhat worse
- Much worse
- In some ways better, in some ways worse
- Not Applicable, I am not a parent.

We used “Not Applicable, I am not a parent,” from this question to determine parental status. Those who marked other answers were presumed to be a parent. See note in Question 15 for why this was helpful.

21. What are your current living arrangements?

- Homeless
- Living in a shelter
- Living in a group home facility or other foster care situation
- Living in a nursing/adult care facility
- Living in campus/university housing
- Still 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 the housing
- Living in house/apartment/condo I RENT alone or with others
- Living in house/apartment/condo I OWN alone or with others

Although this question worked for our analysis, others may be interested in what type of shelter people were in when they chose the “Living in a shelter” option.

22. Because you are transgender/gender non-conforming, have you experienced any of the following housing situations? Please mark "Not applicable" if you were never in a position to experience such a housing situation. For example, if you have always owned your home as a transgender/gender non-conforming person, you could not have been evicted.

<table>
<thead>
<tr>
<th>Situation</th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>I moved into a less expensive home/apartment.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I became homeless.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have been evicted.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was denied a home/apartment.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I had to move back in with family members or friends.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I had to find different places to sleep for short periods of time, such as on a friend’s couch.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I had to use sex with people to sleep in their bed/at their homes or to pay rent.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I had to use equity in my home to pay for living expenses.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Given the high rates of youth homelessness due to parental rejection, it would have been helpful if we had added options like “I was kicked out of my family home before the age of 18” and “I was kicked out of my family home over the age of 18.”

We also believe we should have asked if respondents had ever been homeless for any reason (not necessarily because they were transgender or gender non-conforming).

Additionally, we could have differentiated between those who were denied a rental home/apartment and those who encountered bias when they attempted to buy a house.

23. If you have experienced homelessness, did you go to a shelter?

- Yes
- No [Go to Question 25]
- Not applicable, I never experienced homelessness [Go to Question 25]
24. Because you are transgender/gender non-conforming, did you experience any of the following when you went to a shelter?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>I was denied access to a shelter.</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I was thrown out after they learned I was transgender.</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I was harassed by residents or staff.</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I was physically assaulted/attacked by residents or staff.</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I was sexually assaulted/attacked by residents or staff.</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I was forced to live as the wrong gender in order to be allowed to stay in a shelter.</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I was forced to live as the wrong gender in order to be/feel safe in a shelter.</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I decided to leave a shelter even though I had no place to go because of poor treatment/unsafe conditions.</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

The phrase “forced to live as the wrong gender” used above is somewhat ambiguous. Those marking “yes” could mean either “shelter staff required me to dress or live as the wrong gender in order to stay” or “I dressed/lived as the wrong gender so that I could stay at the shelter because I felt it was necessary.” We suggest future researchers clarify which is desired.

25. What is your current employment status? (Mark all that apply.)

- [ ] Full-time
- [ ] Part-time
- [ ] More than one job
- [ ] Self-employed, own your business
- [ ] Self-employed, contract worker
- [ ] Unemployed but looking
- [ ] Unemployed and stopped looking
- [ ] On disability
- [ ] Student
- [ ] Retired
- [ ] Homemaker or full-time parent
- [ ] Other, please specify ___________________________________

Our set of responses deviated from those used in surveys of the general population, so we did our best to develop categories that matched available data and met our differing analytic needs. For the purposes of this report, we developed the following categories:

“Employed,” which included both part- and full-time workers (because the U.S. Department of Labor does so in their data), and also included those who checked “more than one job.” This also included both self-employed categories if respondents did not also check “unemployed but looking.”

“Unemployed,” which included those who said they were “unemployed but looking” and contract workers, students, retirees, people on disability, and homemakers if they also checked “unemployed but looking.” To calculate unemployment rates, those who checked “unemployed and stopped looking” were not considered unemployed (and were considered “Out of the Workforce” instead) but for purposes of evaluating harassment and discrimination elsewhere in the study, those who checked “unemployed and stopped looking” were kept in the unemployed category.

“Out of the Workforce,” which included students, retirees, people on disability, and homemakers who did not check “unemployed but looking.” Those who checked “unemployed and stopped looking” were in this category if they also checked student, retiree, on disability, or homemaker. When calculating unemployment rates, those who checked “unemployed and stopped looking” were included in this category.

We also classified those who answered “Other” into the appropriate category above based on their write-in answers. For example, respondents who said they had any kind of job, such as seasonal, part time, under-employment or periodic contract work, or were about to start a job, were categorized as “employed.” Respondents who said they had been fired, were looking, or said they were doing street work were categorized as “unemployed.” Respondents who indicated they were care-giving, were on disability, were waiting for disability, had chronic illnesses, were students with no other evidence of paid work, had inherited wealth or trusts, or were in unpaid intern or volunteer positions were categorized as “out of the workforce.”

We do not have a specific recommendation about how this question should be worded for future research, and we suggest looking at Department of Labor surveys for question design.

We also recommend considering a question about union membership.
26. Have you done any of the following to avoid discrimination because you are transgender or gender non-conforming? If you are/were not employed, mark not applicable.

<table>
<thead>
<tr>
<th>Experience</th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stayed in a job I’d prefer to leave</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Didn’t seek a promotion or a raise</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Changed jobs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Delayed my gender transition</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hid my gender or gender transition</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have not done anything to avoid discrimination</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

27. Because of being transgender/gender non-conforming, which of the following experiences have you had at work? Please mark each row.

<table>
<thead>
<tr>
<th>Experience</th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel more comfortable and my performance has improved</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I did not get a job I applied for because of being transgender or gender non-conforming</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am or have been under-employed, that is working in the field I should not be in or a position for which I am over-qualified</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was removed from direct contact with clients, customers or patients.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was denied a promotion.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I lost my job.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was harassed by someone at work</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was the victim of physical violence by someone at work.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was the victim of sexual assault by someone at work.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was forced to present in the wrong gender to keep my job.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was not able to work out a suitable bathroom situation with my employer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was denied access to appropriate bathrooms.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was asked inappropriate questions about my transgender or surgical status.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was referred to by the wrong pronoun, repeatedly and on purpose.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supervisors or coworkers shared information about me that they should not have</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Generally, this question yielded extremely important results.

We could have included, “I was fired from my job” as an additional query, because “lost my job,” although very informative, also included layoffs that were targeted toward an employee because of bias. This left us unable to directly answer the question of how many people were “fired.” We do believe that the vast majority of those who “lost their job” were fired. However, especially because this survey was conducted just as the economic downturn of 2008-2009 was starting, it would have been helpful to have asked respondents to differentiate between, “I was fired” and “I was laid off due to bias.” If drawing these distinctions, we do believe it is important to still ask about job loss, overall, because other bias-related job losses may not fall neatly into those two categories.

We could have asked more directly about demotions, which could be implied by the “removed from contact” selection but was not entirely captured.

For the first query, “I feel more comfortable and my performance has improved” may have provided us with more specific information if it had been limited to people who had transitioned while in the workforce. It might have been worded “Since I transitioned gender, I feel more comfortable and my performance has improved at work.” (Those for whom it did not apply would then choose “not applicable.”). This could include more specific questions about how respondents’ performance or comfort has improved, such as “morale has improved,” “less distracted,” “less worried about being fired,” etc. One might even ask an open-ended question in which respondents are given the opportunity to describe how their situation has improved for the purpose of qualitative analysis rather than quantitative findings. In addition, future researchers may be interested in asking a series of questions about the experience of transitioning on the job.

The query “forced to present in the wrong gender to keep my job” is also somewhat ambiguous. Those marking “yes” could mean either “my boss required me to present as the wrong gender when I told him I intended to transition” or “I presented as the wrong gender at
work so as to avoid potential firing.” Because the first is what we meant, and the second meaning was covered by options in Question 26, we recommend that future researchers alter the wording of this query.

Last, the “not applicable” option could have been clarified, like most of our other n/a options in the survey, to indicate that the person had not been out as transgender/gender non-conforming on the job, or had not applied for a job, or had not ever been a part of the workforce.

28. Because of being transgender or gender non-conforming, have any of the following people close to you faced any kind of job discrimination?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spouse or partner</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Children or other family member</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

The wording of this question could be improved by clarifying that we were referring to the respondent’s transgender or gender non-conforming status, not that of the partner or child. The current wording could be interpreted to mean that we were asking if the respondent’s partner or child was transgender or gender non-conforming and experienced discrimination on that basis.

29. If you have ever worked for pay in the street economy, please check all activities in which you have engaged.

- Sex work/sex industry
- Drug sales
- Other, please specify ____________________________
- Not applicable. I have never worked for pay in the street economy.

We wanted to know how many of our respondents were forced into the underground economy that leaves them at risk for arrest and other negative outcomes. Although we believe that the majority of respondents understood the question, the phrase “street economy” may not be the best phrasing. An untested alternative might be “work for money on the street.” We avoided using the terms “illegal” or “criminal,” and “prostitution” in this question because they might cause discomfort for those respondents to whom it applied; we believed that the “street economy” phrase implied that this question was about such activities.

Furthermore, in the first answer choice, “sex industry,” was included next to “sex work.” The term “sex industry” especially, but also the term “sex work,” was potentially interpreted by respondents to include work at strip clubs or in the adult entertainment industry that might not correlate with the same vulnerabilities of criminalized work. This type of legal employment may come with its own risks and could be the subject of another question or could be included in this question as a separate answer choice from the choice more clearly about prostitution, such as “Prostitution” or “sex for pay” or “sex for pay or food.”

Other activities that could have been included are busking (performing on the street for money) and panhandling.
30. Based on being transgender/gender non-conforming, please check whether you have experienced any of the following in these public spaces. (Mark all that apply.)

<table>
<thead>
<tr>
<th>Category</th>
<th>Denied equal treatment or service</th>
<th>Verbally disrespected</th>
<th>Physically attacked or assaulted</th>
<th>Not applicable I have not tried to access this</th>
<th>Not applicable I do not present as transgender here</th>
<th>Not applicable I did not experience negative outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retail store</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Hotel or restaurant</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Bus, train, or taxi</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Airplane or airport staff/TSA</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Doctor's office or hospital</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Rape crisis center</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Domestic violence shelter/program</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Mental health clinic</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Drug treatment program</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Ambulance or EMT</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Govt. agency/official</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Police officer</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Judge or court official</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Legal services clinic</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

We used the answers to these questions for access to health care, public accommodations, and to develop our data on bias-motivated violence. In retrospect, it would have been more valuable to differentiate between being “denied service” and being denied “equal treatment or service.” For the vast majority of these categories, we do not have data on refusal to serve altogether. (Later in the health section, with Question 33, we do ask about denial of treatment by doctors and other medical providers, so we do have data for that category alone.)

Our category, “Ambulance and EMT,” could have been “Ambulance/EMT/Medics” in order to designate a wider range of possible responders.

Also, our inclusion of three “not applicable” options may have been confusing. This is important because when calculating our results, we generally removed respondents for whom a question was not applicable from the analysis of that question. For this question, the second “not applicable” option, “Not applicable, I did not experience these negative outcomes,” should have simply been about facing no negative outcomes without a “not applicable” label in front of it. It should also have been placed before, “Not applicable, I have not tried to access this.” Additionally, the two remaining “not applicable” responses could have been combined.

This question also did not ask (nor did any other question) about harassment/assault that may have happened as the respondents were spending time in public generally, as opposed to in one of the specific places. Had we done so, we would have been able to have a better overall sense of harassment and hate crimes. Also, hate crimes can be broader than harassment and violence — for example, vandalism. When the survey was designed, we made the decision not to ask a series of questions on hate crimes and instead limited the questionnaire to broader instances of discrimination. Therefore, the survey data do not give a full picture of hate crimes committed against transgender and gender non-conforming people, which is unfortunate given the paucity of data on this severe problem.

31. Have you ever interacted with the police as a transgender/gender non-conforming person?
   - Yes [Go to Question 32]
   - No [Go to Question 33]

Depending on the purpose of additional research, researchers may want to differentiate between interactions where the respondent was a crime victim, an alleged perpetrator or some other interaction.
32. Because of being transgender/gender non-conforming, which of the following experiences have you had in your interaction with the police? (Mark all that apply.)
   - Officers generally have treated me with respect
   - Officers generally have treated me with disrespect
   - Officers have harassed me
   - Officers have physically assaulted me
   - Officers have sexually assaulted me

33. As a transgender/gender non-conforming person, how comfortable do you feel seeking help from the police?
   - Very comfortable
   - Somewhat comfortable
   - Neutral
   - Somewhat uncomfortable
   - Very uncomfortable

34. Because of being transgender/gender non-conforming, have you ever been arrested or held in a cell?
   - Yes
   - No

This question could be clarified to allow respondents to indicate if they were not committing a crime and were arrested/held anyway, or if they were targeted for additional scrutiny by police because they were transgender or gender non-conforming.

35. Have you ever been sent to jail or prison for any reason?
   - Yes [Go to Question 36]
   - No [Go to Question 38]

In this question, we did not explore a) why respondents were in jail, b) when in the course of their transgender journey it happened and c) whether it was related to their being transgender or gender non-conforming. This is an area ripe for additional research.

To have better data for comparison to general population incarceration rates, it would be helpful to break out jail and prison. Prison data for the general population is much more readily available for comparison.

36. How long were you in jail or prison, total?
   - Under six months
   - Six months to a year
   - One to three years
   - Three to five years
   - Five to ten years
   - Ten or more years

37. If you were jailed or in prison, have you ever experienced any of the following because of being transgender/gender non-conforming? (Mark all that apply in each category.)

<table>
<thead>
<tr>
<th></th>
<th>Harassed</th>
<th>Physically or attacked</th>
<th>Sexually assaulted or attached</th>
<th>Denied hormones</th>
<th>Denied mental health care</th>
</tr>
</thead>
<tbody>
<tr>
<td>From other inmates</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>From correctional officers or staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

38. Have you attended school at any level (elementary school or higher) as a transgender/gender non-conforming person?
   - Yes [Go to Question 39]
   - No [Go to Question 41]

We used this question to determine whether or not a respondent was out as transgender or was openly expressing gender non-conforming appearance or behavior at school. If the respondent indicated “no” but still answered question 39, we excluded their answers.

When it came time to analyze the data, we realized that we could not distinguish whether respondents were self-reporting a transgender identity at school, or whether they were gender non-conforming, regardless of their identity today. Furthermore, it is possible that some answered “yes” even though they were not out or expressing any gender non-conformity at all. While some nuances were lost, these data nonetheless provided valuable information about school-based discrimination our respondents faced. An untested alternative would be, “While attending school, did you (a) openly identify as transgender, (b) express gender non-conformity, or (c) did not openly identify as transgender or express gender non-conformity.”
The data generated by this chart was extremely valuable and very complex to analyze. It may have been easier to have used simplified categories. Also, to determine whether respondents were openly transgender versus gender non-conforming at each school level, a more complex set of responses would need to be developed.

Like Question 30, the “not applicable” responses here may have been confusing. We treated “did not attend such a school” and “not out as transgender or gender non-conforming at that point,” as the true “not applicable” responses, taking those who marked them out of the analysis for that part of the question altogether, but factored in (counted as “no” responses) those who marked “Not Applicable, I did not experience these negative outcomes.”

Last, it may have been clearer to change the words “you are” in the beginning of the question to “I am/was”) because some people are thinking of past experiences to answer this question.

This question was very valuable. However, it did not distinguish between K-12 and college/technical/graduate school, though some questions like housing and scholarships are more applicable to higher education. For simplicity, it might have been better to separate these questions by school level.

We should have included a question about whether or not “teachers or professors, repeatedly and on purpose, failed to call me by my chosen name or pronouns” and one that asked “I was required to wear clothing that did not match my gender identity.”
41. 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 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
- Military health care/Champus/Veterans Administration/Tri-Care
- Student insurance through college or university
- Other public (such as state or county level health plans, etc.)
- Other, please specify __________________________

We believe it might have been helpful to have clarified the Medicaid choice as “medicaid/public insurance you get from your state” since in many states, people may know it by a state-specific name, such as MediCal.

42. What kind of place do you go to most often when you are sick or need advice about your health? (check one)

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

For our purposes, the answers to this question were primarily important in terms of those who answered “Emergency room,” because we lacked comparable information about the general population for most other answer choices. Future researchers may look more deeply into these data.

43. Because you are transgender/gender non-conforming, have you had any of the following experiences? (Please check an answer for each row. If you have NEVER needed medical care, please check “Not applicable”)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have postponed or not tried to get needed medical care when I was</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>sick or injured because I could not afford it.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have postponed or not tried to get checkups or other preventive</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>medical care because I could not afford it.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have postponed or not tried to get needed medical care when I was</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>sick or injured because of disrespect or discrimination from doctors</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>or other healthcare providers.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have postponed or not tried to get checkups or other preventive</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>medical care because of disrespect or discrimination from doctors or</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>other healthcare providers.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A doctor or other provider refused to treat me because I am</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>transgender/gender non-conforming.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I had to teach my doctor or other provider about transgender/gender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>non-conforming people in order to get appropriate care.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
44. Please mark below if you received health care related to being transgender/ gender non-conforming.

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Do not want it</th>
<th>Want it someday</th>
<th>Have had it</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Hormone treatment</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Top/chest/breast surgery (chest reduction, enlargement, or reconstruction)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Male-to-female removal of the testes</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Male-to-female genital surgery (removal of penis and creation of a vagina, labia, etc.)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Female-to-male hysterectomy (removal of the uterus and/or ovaries)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Female-to-female genital surgery (clitoral release/metoidioplasty/creation of testes)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Female-to-male phalloplasty (creation of a penis)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

In this question, we tried to balance medically precise and politically acceptable terms with language that would be accessible to all. Although our final questions were not always consistent, we still believe that the inclusion of medical terms along with more general descriptions of the various surgeries was valuable. In retrospect, the terms vaginoplasty and orchietomy should have been included. We also used the term “genital surgery” in conjunction with clitoral release and creation of testes, which may have implied that other surgeries we listed, including the creation of a penis, the removal of ovaries, and the reduction or enlargement of breasts, are not also genital surgeries.

We should have asked about facial feminization surgery in this question. There are also a range of other procedures that we also should have asked about, such as “laser hair removal or electrolysis” and “surgery to create a more feminine or masculine shape elsewhere on the body.”

We did not differentiate between respondents who acquired hormones without a prescription (such as purchasing them online or on the street) and those who did, and it would be helpful to know this information. (This could have been done by having two hormone categories: “hormone treatment, from a doctor” and “hormone treatment, from online street or other sources.”)

We didn’t ask about medical treatments that are not supervised by licensed/trained medical professionals, another question that would have been valuable. These queries could have been made in this question, or could have been made in a different question that centered around non-medically supervised care, such as the following untested question: “I have acquired the following care NOT supervised by doctors, such as online or buying it on the street: 1) hormones, 2) silicone injections, 3) chest/breast (top) surgeries, 4) lower/bottom surgeries.”

45. Please tell us how much the following procedures have cost if you have had them, or mark the box that says I have NOT had this procedure.

<table>
<thead>
<tr>
<th>Service Description</th>
<th>My insurance paid for all of this and my out of pocket cost was:</th>
<th>My insurance did NOT pay for this and my out of pocket cost was:</th>
<th>I have NOT had this procedure</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hormone treatment , average MONTHLY cost</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Visits to the doctor to monitor hormone levels, average YEARLY cost</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Chest/breast/top surgeries and reconstructions/reductions/enhancements TOTAL cost</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Genital/bottom surgeries TOTAL cost</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Facial surgeries TOTAL cost</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Other transition-related health care TOTAL cost. Please describe type of care here. Other</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

This question was confusing for respondents and for analysts alike. At this point, we have not attempted to tabulate the data for it, although we do think there is usable data that could be gleaned from it. We recommend that future researchers develop a different way of capturing these data and test the question extensively before putting it in the field. Also, a simpler question meant only to determine whether insurance companies were covering transition-related care could have been utilized.
Those interested in deeper analysis around gender-related mental health diagnoses may want to capture whether respondents’ desired to receive a diagnosis or why they sought it out (for example, because some doctors and surgeons provide care only to patients who have received a gender identity diagnosis after evaluation by a mental health professional). These patients may request a diagnosis from a mental health provider, and may receive it, without the clinician or patient truly seeing it as a mental health diagnosis. The perceived stigma attached with mental health diagnoses may impact the treatment patients seek and their response to this question.

Questions 47 and 48 were not standard questions used on federal surveys and we suggest future researchers investigate questions used more widely.

Future researchers may also want to add another question series to differentiate between disabilities that might be a result of, or aggravated by, discrimination (e.g. depression, anxiety, HIV, etc.) For example, it may be useful to ask a question along these lines (although we are not suggesting this particular wording): “Do you have or did you have any of these health or mental health conditions because of discrimination/rejection because you are transgender or gender non-conforming, or stress from that discrimination/rejection: 1) anxiety, 2) clinical or severe depression, 3) alcohol abuse, 4) drug abuse, 5) heart conditions, 6) weight problems, 7) anorexia, 8) auto-immune problems, 9) smoking, 10) HIV”

We also could have asked about a range of health, including mental health, conditions NOT necessarily connected to discrimination.

Note that we did not ask how people knew of their HIV status, for example, whether or not they have been tested.

Future researchers may be interested in asking about general usage of alcohol and drugs that was not connected to discrimination that respondents face in order to better compare with general population data. Also, we could have asked separately about alcohol and drugs.

Furthermore, those who are interested in delving deeper into this topic may ask whether drinking (or using drugs) increased or decreased after transition, or if it was connected to a major life event, such as losing a job, getting divorced, etc.

We selected these and the following standard smoking-related questions, working with the Network for LGBT Tobacco Control, replicating questions on federal and state tobacco surveys and allowing us to compare the prevalence of smoking in our sample with the general population.
52. Do you now smoke daily, occasionally, or not at all?
- Daily
- Occasionally
- Not at all

53. If you now smoke, would you like to quit?
- Yes
- No
- Not applicable, I do not smoke now

54. Have you ever attempted suicide?
- Yes
- No

Some of the most devastating and most important results from the survey came from this question, which was almost not included because we knew we could not delve deeply enough into the topic and because it made the institutional review process more difficult because the question conceivably could trigger or retrigger thoughts of suicide among respondents. Thus, we included, at the beginning of the survey, a suicide resource, The Trevor Project, which agreed to serve both adult and youth callers. And, in fact, we did receive two calls from respondents who were distressed from filling out the survey and were able to appropriately refer them; we are not sure how many may have called The Trevor Project.

We are incredibly grateful that we included this question. We recommend that future researchers carefully consider how to construct a more complex set of questions about suicidality by looking at federal and other surveys. We recommend that future questions differentiate between attempts at different stages of a respondent’s life. Additionally future studies might differentiate between attempts in the last year as opposed to over a person’s life span to compare to the many studies that only ask about the last year. Furthermore, it would be helpful to ask about ideation and connection with depressive episodes or other mental health conditions.

55. Because of being transgender/gender non-conforming, have you lived through any of the following family issues? If a situation does not apply to you, please mark “Not applicable.”

<table>
<thead>
<tr>
<th>My family is as strong today as before I came out.</th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>My family relationships are slowly improving after coming out.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My relationship with my spouse or partner ended.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My ex limited or stopped my relationship with my children.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A court/judge limited or stopped my relationship with my children.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My children chose not to speak with me or spend time with me.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My parents or family chose not to speak with me or spend time with me.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was a victim of domestic violence by a family member.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have lost close friends.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

As mentioned in relation to Question 22, we didn’t ask whether respondents’ parents or guardians forced them to leave the family home for being transgender or gender non-conforming. This question could be included in this batch of questions as opposed to in the housing question.

The statement “my relationship with my spouse or partner ended” could have been clarified to indicate “when I came out to them or when I transitioned.”

The statement “I was a victim of domestic violence by a family member” did not distinguish between violence at the hands of parents, siblings and other family members, and intimate partners. Nor did it ask about violence not motivated by bias. If the ability to compare to general population data is desired, this question needs to be further divided.

In a couple of these questions, respondents might be confused whether or not they should mark “no” or “not applicable.” For example, for “A court/judge limited or stopped my relationship with my children” a respondent might indicate “no” when they were divorced by mutual agreement with their spouse, which included agreement about custody of children, but never went in front of a judge to decide custody. We would want them to choose “not applicable” in that scenario but they may have chosen “no.” Thus, redoing the entire structure of this question might better assist respondents to select the appropriate answer choices.
56. Please mark the appropriate response about adoption and foster parenting as a transgender/gender non-conforming person.

<table>
<thead>
<tr>
<th>Response</th>
<th>Yes, my partner's child on birth certificate</th>
<th>A child related to me</th>
<th>Yes, a child was mistakenly listed as male/female on the document</th>
<th>No, I have not tried</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have successfully adopted or fostered a child.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>I tried to adopt or foster a child and was rejected.</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
</tbody>
</table>

This question could be improved by specifying whether respondents are to report only official adoptions and foster care placements or unofficial assumption of the parental role. Furthermore, we suspect that those who adopted or fostered a child before they came out as transgender or gender non-conforming may have answered yes. Altering the wording of this question should be able to capture whether the adoption or placement happened before or after coming out and/or transition. Also, the question did not distinguish between adoptions arranged by agencies versus those prompted through changing family circumstances. For these reasons, we made the difficult decision to not report on the results of this question because we believe our respondents misunderstood what turned out to be a poorly-worded question.

57. 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 “Not applicable” if you have no desire to change the gender on the document listed.

<table>
<thead>
<tr>
<th>Document</th>
<th>Yes, changes allowed</th>
<th>No, changes denied</th>
<th>Not tried</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth certificate</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Drivers license and/or state issued non-driver ID</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Social Security records</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Passport</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Work ID</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Military discharge papers (DD214 or DD215)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Health insurance records</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Student records</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Professional licenses or credentials</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
</tbody>
</table>

From examining the data, we suspect that many respondents chose “not tried” when likely they did not have that particular document and “not applicable” would have been a more accurate choice. Part of this could be due to our instructions asking respondents to “mark ‘not applicable’ if you have no desire to change the gender on the document listed.” We should also have said to mark “not applicable” if they did not have such documents as passports or military discharge papers. However, we also suspect that many may have simply checked the same box (yes on everything, no on everything, etc.) due to the form of this question, which lends itself to repetitive answers as opposed to carefully considered ones for each line.

Those able to do deeper analysis may be interested in whether or not respondents were able to update names on these IDs and records and may want to expand the list to include credit reporting agencies and name on credit card.

58. Have you or your employer ever received notice that the gender your employer has listed for you does not match the gender the government has listed for you?

☐ Yes
☐ No
☐ Not applicable

The relevancy of this question in future studies depends on whether the Social Security Administration continues or ceases such notifications to employers.
59. Have you ever received notice from your state motor vehicle agency that the gender on your driver’s license does not match the gender the federal government has listed for you with Social Security?
   - Yes
   - No
   - Not applicable

60. Thinking about all of your IDs and records, which of the following statements is most true?
   - All of my IDs and records list the gender I prefer.
   - Some of my IDs and records list the gender I prefer.
   - None of my IDs and records list the gender I prefer.

61. When I present documents with my name and gender (like a driver’s license or a passport) that do not match the gender I present as: (Mark all that apply.)
   - I have been harassed.
   - I have been assaulted/attacked.
   - I have been asked to leave.
   - I have had no problems.
   - Not applicable. I have only presented documents that match.

62. Please check what you believe are the four most important policy priorities affecting transgender/gender non-conforming people in the U.S.
   - HIV prevention, education and treatment
   - Better policies on gender and identity documents and other records
   - Passing anti-bullying laws that make schools safer
   - Transgender/gender non-conforming prisoner’s rights
   - Immigration policy reform (such as asylum or partner recognition)
   - Allowing transgender/gender non-conforming people to serve in the military
   - Access to transgender-sensitive health care
   - Protecting transgender-related health care covered by insurance
   - Protecting trans/gender non-conforming people from discrimination in hiring and at work
   - Protecting transgender/gender non-conforming people from discrimination in housing
   - Passing laws that address hate crimes against transgender/gender non-conforming people
   - The right of transgender/gender non-conforming people to parent, including adoption
   - The right to equal recognition of marriages involving transgender partners

This question was added as a way to at least superficially gauge respondents’ policy priorities. Because there was only one question on this topic, the findings to this question are interesting, but cannot be considered to be an accurate representation of community or individual priorities. It might also be helpful in future studies to allow participants to rank their choices or write in other options.

63. What is your U.S. citizenship status?
   - U.S. citizen
   - Documented non-citizen
   - Undocumented non-citizen

64. Are you registered to vote?
   - Yes
   - No

This question could be expanded or altered to ask about participation in the last presidential election or last election.

65. Have you ever been a member of the armed forces?
   - Yes [Go to Question 66]
   - No [Go to Question 67]
   - I was denied entry because I am transgender/gender non-conforming [Go to Question 67]

66. Were you discharged from the service because of being transgender/gender non-conforming?
   - Yes
   - No or still in the military

The answer choices for this question could have separated out “no” and “still in the military.”
67. What are your household’s current sources of income? (Mark all that apply.)
- Paycheck from a your or your partner’s job
- Money from a business, fees, dividends or rental income
- Aid such as TANF; welfare; WIC; public assistance; general assistance; food stamps or SSI
- Unemployment benefits
- Child support or alimony
- Social security, workers comp, disability, veteran’s benefits or pensions
- Inherited wealth
- Pay from street economies (sex work, other sales)
- Other, please specify ___________________________________

We did not report on the results of this question but future researchers may find these data useful. If we were constructing a shorter survey, this question would be a candidate for deletion.

Note that we did not have a question numbered 68.

69. What is your sexual orientation?
- Gay/Lesbian/Same-gender attraction
- Bisexual
- Queer
- Heterosexual
- Asexual
- Other, please specify ___________________________________

Having the “other, please specify” option cost resources to be spent re-categorizing certain people based on their response which future researchers may want to avoid. There were very few true “others” that didn’t approximate the concepts that were listed. On the other hand, this option allowed us to capture a sense of diversity in respondents’ sexual orientations and the language used to describe them.

70. Anything else you’d like to tell us about your experiences of acceptance or discrimination as a transgender/gender non-conforming person?

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

This question generated over 200 pages of text. Excerpted quotes were included throughout the report. We believe these narratives brought the data to life in a way that was invaluable.
Other Questions

There were a few other questions, other than those in the survey instrument and suggested above, that we believe should be considered by future researchers. We will not go into the long list of questions that ended up not being used, but instead offer a few other areas for potential research:

- **Religion** We wish we had asked about what religion (if any) respondents were raised and what their current religious affiliation (if any) was. We especially wanted to know how this question correlated with or had a protective affect against suicidality, family rejection, and poor health outcomes. Those who are interested in delving deeper may want to ask about being out in and acceptance in religious communities as well as rejection by religious communities, potentially both in the communities respondents were raised in or those they participate(d) in since then.

- **Child abuse, including sexual abuse** Future researchers might ask about these traumatic childhood experiences, separate from and/or motivated by a child’s transgender identity or gender non-conformity.

- **Physical and sexual assault** We asked about physical and sexual assault in a variety of contexts (in high school, in medical settings, etc.), but not in general, so we do not have overall rates of physical and sexual assault. We also did not ask about assault not motivated by a person’s transgender or gender non-conforming status. Future researchers may want to do so.

Endnotes

1. We plan to provide the dataset to additional researchers to perform deeper or different analysis.

2. For more information about the RUCA system, see [http://depts.washington.edu/uwruca/](http://depts.washington.edu/uwruca/).
APPENDIX C:
THE SURVEY INSTRUMENT (PAPER COPY)

Before using questions from the survey instrument, please read Appendix B: Survey Instrument – Issues and Analysis.
National Survey on Transgender Experiences of Discrimination in the U.S.

**Purpose**
You are invited to participate in a research project regarding transgender and gender non-conforming people in the United States. Your responses will be part of an important report on transgender people’s experiences of discrimination in housing, employment, health care and education.

**Procedures**
You will be asked to complete the attached survey. Your participation and responses are confidential. Please answer the questions as openly and honestly as possible. You may skip questions. The survey will take about 20 minutes to complete. You must be 18 years of age or older to participate. When you have completed the survey, please return it in the enclosed envelope directly to:

Susan Rankin, Ph.D
Research Associate, Center for the Study of Higher Education
Pennsylvania State University
University Park, PA 16802
814-863-2655

Comments provided will be analyzed using content analysis and submitted as an appendix to the survey report. Quotes from submitted comments will also be used throughout the report to give “voice” to the quantitative data.

**Discomforts and Risks**
There are no risks in participating in this research beyond those experienced in everyday life. Some of the questions are personal and might cause discomfort. In the event that any questions asked are disturbing, you may stop responding to the survey at any time. Participants who experience discomfort are encouraged to contact:

**The Trevor Project**
866-4-U-TREVOR
The Trevor Helpline is the only national crisis and suicide prevention helpline for gay, lesbian, bisexual, transgender and questioning youth; the Helpline can also help transgender and gender non-conforming adults. The Helpline is a free and confidential service that offers hope and someone to talk to, 24/7. Trained counselors listen and understand without judgment.

**Benefits**
The results of the survey will be part of an important report on discrimination against transgender people by the National Center for Transgender Equality and the National Gay and Lesbian Task Force to help create better opportunities for transgender and gender non-conforming people. We are grateful to Penn State University’s Center for the Study of Higher Education for hosting the survey and maintaining the integrity of our data.

**Statement of Confidentiality**
You will not be asked to provide any identifying information, such as your name, and information you provide on the survey will remain confidential. In the event of any publication or presentation resulting from the research, no personally identifiable information will be shared. Please also remember that you do not have to answer any question or questions about which you are uncomfortable.

**Voluntary Participation**
Participation in this research is voluntary. If you decide to participate, you do not have to answer any questions on the survey that you do not wish to answer. **Individuals will not be identified and only group data will be reported** (e.g., the analysis will include only aggregate data). By completing the survey, your informed consent will be implied. Please note that you can choose to withdraw your responses at any time before you submit your answers. Refusal to take part in this research study will involve no consequences.
Right to Ask Questions

You can ask questions about this research.

Questions concerning this project should be directed to:

Justin Tanis
National Center for Transgender Equality
1325 Massachusetts Avenue, NW Suite 700
Washington, DC 20005
202-903-0112
jtanis@nctequality.org

OR

Susan Rankin, Ph.D
Research Associate, Center for the Study of Higher Education
Pennsylvania State University
University Park, PA 16802
814-863-2655
sxr2@psu.edu

Completion of the survey indicates your consent to participate in this study. It is recommended that you keep this statement for your records.
Directions

Please read and answer each question carefully. For each answer, darken the appropriate oval completely. If you want to change an answer, erase your first answer completely and darken the oval of your new answer. You may decline to answer specific questions.

“Transgender/gender non-conforming” describes people whose gender identity or expression is different, at least part of the time, from the sex assigned to them at birth.

1. Do you consider yourself to be transgender/gender non-conforming in any way?
   - Yes
   - No. If no, do NOT continue.

2. What sex were you assigned at birth, on your original birth certificate?
   - Male
   - Female

3. What is your primary gender identity today?
   - Male/Man
   - Female/Woman
   - Part time as one gender, part time as another
   - A gender not listed here, please specify ___________________________________

4. For each term listed, please select to what degree it applies to you.

<table>
<thead>
<tr>
<th>Term</th>
<th>Not at all</th>
<th>Somewhat</th>
<th>Strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transgender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transsexual</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FTM (female to male)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MTF (male to female)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intersex</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender non-conforming or gender variant</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Genderqueer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Androgynous</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Feminine male</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Masculine female or butch</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A.G. or Aggressive</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Third gender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cross dresser</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drag performer (King/Queen)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Two-spirit</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other, please specify</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. People can tell I’m transgender/gender non-conforming even if I don’t tell them.
   - Always
   - Most of the time
   - Sometimes
   - Occasionally
   - Never
6. I tell people that I’m transgender/gender non-conforming. (Mark all that apply.)

- Never
- People who are close friends
- Casual friends
- Work colleagues
- Family
- Everyone

7. How many people know or believe you are transgender/gender non-conforming in each of the following settings? Mark all that apply.

<table>
<thead>
<tr>
<th>Setting</th>
<th>None</th>
<th>A few</th>
<th>Some</th>
<th>Most</th>
<th>All</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>At home</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On the job</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>At school</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In private social settings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In public social settings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>When seeking medical care</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. To the best of your ability, please estimate the following ages, if they apply to you. Mark “N.A.” if not applicable or if you have no desire to transition. Please mark each line.

<table>
<thead>
<tr>
<th>Age in years</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age you first recognized that you were “different” in terms of your gender.</td>
<td></td>
</tr>
<tr>
<td>Age you first recognized your transgender/gender-non-conforming identity</td>
<td></td>
</tr>
<tr>
<td>Age you began to live part time as a transgender/gender non-conforming person.</td>
<td></td>
</tr>
<tr>
<td>Age you began to live full time as a transgender/gender non-conforming person.</td>
<td></td>
</tr>
<tr>
<td>Age that you first got any kind of transgender-related medical treatment.</td>
<td></td>
</tr>
<tr>
<td>Your current age</td>
<td></td>
</tr>
</tbody>
</table>

9. Do you or do you want to live full-time in a gender that is different from you gender at birth?

- Yes, I currently live full-time in a gender different from my birth gender.
- Not full-time yet, but someday I want to.
- No, I do not want to live full-time.

10. What is your zip code?

ZIP ___________

11. What is your race/ethnicity? (Mark all that apply.)

- White
- Black or African American
- American Indian or Alaska Native (enrolled or principal tribe)
- Hispanic or Latino
- Asian or Pacific Islander
- Arab or Middle Eastern
- Multiracial or mixed race
12. What is the highest degree or level of school you have completed? Mark ONE box. If you are currently enrolled, please mark the previous grade or highest degree received.
   - Elementary and/or junior high
   - Some high school to 12th grade
   - High school graduate - high school Diploma or the equivalent (for example: GED)
   - Some college credit, but less than 1 year
   - Technical school degree (such as cosmetology or computer technician)
   - One or more years of college, no degree
   - Associate degree (for example: AA, AS)
   - Bachelor’s degree (for example: BA, AB, BS)
   - Master’s degree (for example: MA, MS, MEng, MEd, MSW, MBA)
   - Professional degree (for example: MD, DDS, DVM, LLB, JD)
   - Associate degree (for example: MD, DDS, DVM, LLB, JD)

13. What is your current gross annual household 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
   - $80,000 to $89,999
   - $90,000 to $99,999
   - $100,000 to $149,999
   - $150,000 to $199,999
   - $200,000 to $250,000
   - More than $250,000

14. How many people live in your household?
   Number ______

15. How many children currently rely on your income?
   Number ______

16. What is your relationship status?
   - Single
   - Partnered
   - Civil union
   - Married
   - Separated
   - Divorced
   - Widowed

**Important Note:** When we say: “Because you are transgender/gender non-conforming, has one or two of these things happened to you,” we do not mean that your gender identity or expression is causing bad or abusive things to happen. We are trying to find out if people are treating you differently because you are transgender or gender non-conforming.

17. Because I am transgender/gender non-conforming, life in general is:
   - Much improved
   - Somewhat improved
   - The same
   - Somewhat worse
   - Much worse
   - In some ways better, in some ways worse
18. Because I am transgender/gender non-conforming, my housing situation is:
- Much improved
- Somewhat improved
- The same
- Somewhat worse
- Much worse
- In some ways better, in some ways worse

19. If you are or were employed, how has the fact that you are transgender/gender non-conforming changed your employment situation?
- Much improved
- Somewhat improved
- Stayed the same
- Somewhat worse
- Much worse
- In some ways better, in some ways worse
- Not applicable. I was never employed

20. Because you are transgender/gender non-conforming, how has your situation changed as a parent?
- Much improved
- Somewhat improved
- Stayed the same
- Somewhat worse
- Much worse
- In some ways better, in some ways worse
- Not Applicable. I am not a parent.

21. What are your current living arrangements?
- Homeless
- Living in a shelter
- Living in a group home facility or other foster care situation
- Living in a nursing/adult care facility
- Living in campus/university housing
- Still 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 the housing
- Living in house/apartment/condo I RENT alone or with others
- Living in house/apartment/condo I OWN alone or with others

22. Because you are transgender/gender non-conforming, have you experienced any of the following housing situations? Please mark "Not applicable" if you were never in a position to experience such a housing situation. For example, if you have always owned your home as a transgender/gender non-conforming person, you could not have been evicted.

<table>
<thead>
<tr>
<th>Situation</th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>I moved into a less expensive home/apartment.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I became homeless.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have been evicted.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was denied a home/apartment.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I had to move back in with family members or friends.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I had to find different places to sleep for short periods of time, such as on a friend’s couch.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have had sex with people to sleep in their bed/at their homes or to pay rent.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I had to use equity in my home to pay for living expenses.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
23. If you have experienced homelessness, did you go to a shelter?
   - Yes
   - No [Go to Question 25]
   - Not applicable, I never experienced homelessness [Go to Question 25]

24. Because you are transgender/gender non-conforming, did you experience any of the following when you went to a shelter?

<table>
<thead>
<tr>
<th>Experience</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>I was denied access to a shelter.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was thrown out after they learned I was transgender.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was physically assaulted/attacked by residents or staff.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was sexually assaulted/attacked by residents or staff.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was forced to live as the wrong gender in order to be allowed to stay in a shelter.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was forced to live as the wrong gender in order to be/feel safe in a shelter.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I decided to leave a shelter even though I had no place to go because of poor treatment/unsafe conditions.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

25. What is your current employment status? (Mark all that apply.)
   - Full-time
   - Part-time
   - More than one job
   - Self-employed, own your business
   - Self-employed, contract worker
   - Unemployed but looking
   - Unemployed and stopped looking
   - On disability
   - Student
   - Retired
   - Homemaker or full-time parent
   - Other, please specify ___________________________________

26. Have you done any of the following to avoid discrimination because you are transgender or gender non-conforming? If you are/were not employed, mark not applicable.

<table>
<thead>
<tr>
<th>Action</th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stayed in a job I'd prefer to leave</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Didn’t seek a promotion or a raise</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Changed jobs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Delayed my gender transition</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hid my gender or gender transition</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have not done anything to avoid discrimination</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
27. Because of being transgender/gender non-conforming, which of the following experiences have you had at work? Please mark each row.

<table>
<thead>
<tr>
<th>Experience</th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel more comfortable and my performance has improved.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>I did not get a job I applied for because of being transgender or gender non-conforming.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>I am or have been under-employed, that is working in the field I should not be in or a position for which I am over-qualified.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>I was removed from direct contact with clients, customers or patients.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>I was denied a promotion.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>I lost my job.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>I was harassed by someone at work.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>I was the victim of physical violence by someone at work.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>I was the victim of sexual assault by someone at work.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>I was forced to present in the wrong gender to keep my job.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>I was not able to work out a suitable bathroom situation with my employer</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>I was denied access to appropriate bathrooms.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>I was asked inappropriate questions about my transgender or surgical status.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>I was referred to by the wrong pronoun, repeatedly and on purpose.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Supervisors or coworkers shared information about me that they should not have.</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
</tbody>
</table>

28. Because of being transgender or gender non-conforming, have any of the following people close to you faced any kind of job discrimination?

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spouse or partner</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Children or other family member</td>
<td>☒</td>
<td>☒</td>
<td>☐</td>
</tr>
</tbody>
</table>

29. If you have ever worked for pay in the street economy, please check all activities in which you have engaged.

- Sex work/sex industry
- Drug sales
- Other, please specify ___________________________________________________________________
- Not applicable. I have never worked for pay in the street economy.
30. Based on being transgender/gender non-conforming, please check whether you have experienced any of the following in these public spaces. **(Mark all that apply.)**

<table>
<thead>
<tr>
<th>Public Space</th>
<th>Denied equal treatment or service</th>
<th>Verbally or physically threatened or disrespected</th>
<th>Physically assaulted or attacked</th>
<th>Not applicable. I have not tried to access this</th>
<th>Not applicable. I do not present as transgender here</th>
<th>Not applicable. I did not experience these negative outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retail store</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hotel or restaurant</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bus, train, or taxi</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Airplane or airport staff/TSA</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doctor’s office or hospital</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency Room</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rape crisis center</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Domestic violence shelter/program</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental health clinic</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drug treatment program</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ambulance or EMT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Govt. agency/official</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Police officer</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Judge or court official</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legal services clinic</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

31. Have you ever interacted with the police as a transgender/gender non-conforming person?
- Yes [Go to Question 32]
- No [Go to Question 33]

32. Because of being transgender/gender non-conforming, which of the following experiences have you had in your interaction with the police? **(Mark all that apply.)**
- Officers generally have treated me with respect
- Officers generally have treated me with disrespect
- Officers have harassed me
- Officers have physically assaulted me
- Officers have sexually assaulted me

33. As a transgender/gender non-conforming person, how comfortable do you feel seeking help from the police?
- Very comfortable
- Somewhat comfortable
- Neutral
- Somewhat uncomfortable
- Very uncomfortable

34. Because of being transgender/gender non-conforming, have you ever been arrested or held in a cell?
- Yes
- No

35. Have you ever been sent to jail or prison for any reason?
- Yes [Go to Question 36]
- No [Go to Question 38]

36. How long were you in jail or prison, total?
- Under six months
- Six months to a year
- One to three years
- Three to five years
- Five to ten years
- Ten or more years
37. If you were jailed or in prison, have you ever experienced any of the following because of being transgender/gender non-conforming? *(Mark all that apply in each category.)*

<table>
<thead>
<tr>
<th></th>
<th>Harassed</th>
<th>Physically assaulted</th>
<th>Sexually assaulted or attacked</th>
<th>Denied hormones</th>
<th>Denied regular medical care</th>
</tr>
</thead>
<tbody>
<tr>
<td>From other inmates</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>From correctional officers or staff</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

38. Have you attended school at any level (elementary school or higher) as a transgender/gender non-conforming person?

- Yes [Go to Question 39]
- No [Go to Question 41]

39. Because you are transgender/gender non-conforming, have you been a target of harassment, discrimination or violence at school? *(Mark all that apply.)*

<table>
<thead>
<tr>
<th>School</th>
<th>Did not attend such a school</th>
<th>Not out as transgender at that point</th>
<th>Harassed or bullied by students or staff</th>
<th>Physically assaulted or attacked by students or staff</th>
<th>Sexually assaulted or attacked by students or staff</th>
<th>Expelled, thrown out, or denied enrollment</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elementary school</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Junior high/middle school</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>High School</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>College</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Graduate or professional school</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Technical school</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

40. Because I am/was transgender/gender non-conforming, which of the following statements are true?

<table>
<thead>
<tr>
<th>Statement</th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>I had to leave school because the harassment was so bad.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>I had to leave school for financial reasons related to my transition.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>I lost or could not get financial aid or scholarships.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>I was not allowed to have any housing on campus.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>I was not allowed gender appropriate housing on campus.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>I was not allowed to use the appropriate bathrooms or other facilities.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
41. 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 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
- Military health care/Champus/Veterans Administration/Tri-Care
- Student insurance through college or university
- Other public (such as state or county level health plans, etc.)
- Other, please specify ___________________________________

42. What kind of place do you go to most often when you are sick or need advice about your health? (check one)

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

43. Because you are transgender/gender non-conforming, have you had any of the following experiences? (Please check an answer for each row. If you have NEVER needed medical care, please check “Not applicable”)

<table>
<thead>
<tr>
<th>Experience</th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have postponed or not tried to get needed medical care when I was sick or</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>injured because I could not afford it.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have postponed or not tried to get checkups or other preventive medical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>care because I could not afford it.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have postponed or not tried to get needed medical care when I was sick or</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>injured because of disrespect or discrimination from doctors or other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>healthcare providers.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have postponed or not tried to get checkups or other preventive medical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>care because of disrespect or discrimination from doctors or other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>healthcare providers.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A doctor or other provider refused to treat me because I am transgender/</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>gender non-conforming.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I had to teach my doctor or other provider about transgender/gender non-</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>conforming people in order to get appropriate care.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
44. Please mark below if you received health care related to being transgender/ gender non-conforming.

<table>
<thead>
<tr>
<th></th>
<th>Do not want it</th>
<th>Want it someday</th>
<th>Have had it</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Hormone treatment</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Top/chest/breast surgery (chest reduction, enlargement, or reconstruction)</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Male-to-female removal of the testes</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Male-to-female genital surgery (removal of penis and creation of a vagina, labia, etc.)</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Female-to-male hysterectomy (removal of the uterus and/or ovaries)</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Female-to-male genital surgery (clitoral release/metoidioplasty/creation of testes)</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Female-to-male phalloplasty (creation of a penis)</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

45. Please tell us how much the following procedures have cost if you have had them, or mark the box that says I have NOT had this procedure.

<table>
<thead>
<tr>
<th>Procedure</th>
<th>My insurance paid for</th>
<th>My insurance did NOT pay for</th>
<th>I have NOT had procedure</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hormone treatment, average MONTHLY cost</td>
<td>____________</td>
<td>____________</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Visits to the doctor to monitor hormone levels, average YEARLY cost</td>
<td>____________</td>
<td>____________</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Chest/breast/top surgeries and reconstructions/reductions/enhancements TOTAL cost</td>
<td>____________</td>
<td>____________</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Genital/bottom surgeries TOTAL cost</td>
<td>____________</td>
<td>____________</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Facial surgeries TOTAL cost</td>
<td>____________</td>
<td>____________</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Other transition-related health care TOTAL cost. Please describe type of care here.</td>
<td>____________</td>
<td>____________</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

46. Have you ever received a gender-related mental health diagnosis?
- ○ No
- ○ Yes. My diagnosis: ________________________________

47. Not including any gender-related mental health diagnosis, do you have a disability (physical, learning, mental health) that substantially affects a major life activity?
- ○ Yes
- ○ No [Go to Question 49]

48. What is your disability? (Mark all that apply.)
- Physical condition
- Learning disability
- Mental health condition

49. What is your HIV status?
- ○ HIV negative
- ○ HIV positive
- ○ Don’t know
50. I drink or misuse drugs to cope with the mistreatment I face or faced as a transgender or gender non-conforming person.
   - Yes
   - Yes, but not currently
   - No
   - Not applicable. I face no mistreatment.

51. Have you ever smoked 100 cigarettes in your life?
   - Yes
   - No

52. Do you now smoke daily, occasionally, or not at all?
   - Daily
   - Occasionally
   - Not at all

53. If you now smoke, would you like to quit?
   - Yes
   - No
   - Not applicable, I do not smoke now

54. Have you ever attempted suicide?
   - Yes
   - No

55. Because of being transgender/gender non-conforming, have you lived through any of the following family issues? If a situation does not apply to you, please mark “Not applicable.”

<table>
<thead>
<tr>
<th>Issue</th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>My family is as strong today as before I came out.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My family relationships are slowly improving after coming out.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My relationship with my spouse or partner ended.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My ex limited or stopped my relationship with my children.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A court/judge limited or stopped my relationship with my children.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My children chose not to speak with me or spend time with me.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My parents or family chose not to speak with me or spend time with me.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was a victim of domestic violence by a family member.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have lost close friends.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

56. Please mark the appropriate response about adoption and foster parenting as a transgender/gender non-conforming person.

<table>
<thead>
<tr>
<th>Response</th>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, my partner’s child or children</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A child related to me</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes, a child previously unknown to me</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No, I have not tried</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I have successfully adopted or fostered a child.

I tried to adopt or foster a child and was rejected.
57. 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 “Not applicable” if you have no desire to change the gender on the document listed.

<table>
<thead>
<tr>
<th>Document</th>
<th>Yes, changes allowed</th>
<th>No, changes denied</th>
<th>Not tried</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth certificate</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Drivers license and/or state issued non-driver ID</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Social Security records</td>
<td>☐</td>
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<tr>
<td>Passport</td>
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<tr>
<td>Work ID</td>
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<tr>
<td>Military discharge papers (DD214 or DD215)</td>
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<tr>
<td>Health insurance records</td>
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<tr>
<td>Student records</td>
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<tr>
<td>Professional licenses or credentials</td>
<td>☐</td>
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</tr>
</tbody>
</table>

58. Have you or your employer ever received notice that the gender your employer has listed for you does not match the gender the government has listed for you?
- ☐ Yes
- ☐ No
- ☐ Not applicable

59. Have you ever received notice from your state motor vehicle agency that the gender on your driver’s license does not match the gender the federal government has listed for you with Social Security?
- ☐ Yes
- ☐ No
- ☐ Not applicable

60. Thinking about all of your IDs and records, which of the following statements is most true?
- ☐ All of my IDs and records list the gender I prefer.
- ☐ Some of my IDs and records list the gender I prefer.
- ☐ None of my IDs and records list the gender I prefer.

61. When I present documents with my name and gender (like a driver’s license or a passport) that do not match the gender I present as: (Mark all that apply.)
- ☐ I have been harassed.
- ☐ I have been assaulted/attacked.
- ☐ I have been asked to leave.
- ☐ I have had no problems.
- ☐ Not applicable. I have only presented documents that match.

62. Please check what you believe are the four most important policy priorities affecting transgender/gender non-conforming people in the U.S.
- ☐ HIV prevention, education and treatment
- ☐ Better policies on gender and identity documents and other records
- ☐ Passing anti-bullying laws that make schools safer
- ☐ Transgender/gender non-conforming prisoner’s rights
- ☐ Immigration policy reform (such as asylum or partner recognition)
- ☐ Allowing transgender/gender non-conforming people to serve in the military
- ☐ Access to transgender-sensitive health care
- ☐ Getting transgender-related health care covered by insurance
- ☐ Protecting trans/gender non-conforming people from discrimination in hiring and at work
- ☐ Protecting transgender/gender non-conforming people from discrimination in housing
- ☐ Passing laws that address hate crimes against transgender/gender non-conforming people
- ☐ The right of transgender/gender non-conforming people to parent, including adoption
- ☐ The right to equal recognition of marriages involving transgender partners
63. What is your U.S. citizenship status?
   - U.S. citizen
   - Documented non-citizen
   - Undocumented non-citizen

64. Are you registered to vote?
   - Yes
   - No

65. Have you ever been a member of the armed forces?
   - Yes [Go to Question 66]
   - No [Go to Question 67]
   - I was denied entry because I am transgender/gender non-conforming [Go to Question 67]

66. Were you discharged from the service because of being transgender/gender non-conforming?
   - Yes
   - No or still in the military

67. What are your household’s current sources of income? (Mark all that apply.)
   - Paycheck from a your or your partner’s job
   - Money from a business, fees, dividends or rental income
   - Aid such as TANF; welfare; WIC; public assistance; general assistance; food stamps or SSI
   - Unemployment benefits
   - Child support or alimony
   - Social security, workers comp, disability, veteran’s benefits or pensions
   - Inherited wealth
   - Pay from street economies (sex work, other sales)
   - Other, please specify ______________________________________________________________________

69. What is your sexual orientation?
   - Gay/Lesbian/Same-gender attraction
   - Bisexual
   - Queer
   - Heterosexual
   - Asexual
   - Other, please specify ______________________________________________________________________

70. Anything else you’d like to tell us about your experiences of acceptance or discrimination as a transgender/gender non-conforming person?

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
ABOUT THE AUTHORS

Dr. Jaime M. Grant is the founding Executive Director of the Arcus Center for Social Justice Leadership (ACSJL) at Kalamazoo College, where she also serves as an Assistant Professor. ACSJL aims to invigorate social justice scholarship and activism in the academy while nurturing social justice leaders and projects around the globe. Prior to her work in Kalamazoo, she served as director of the Policy Institute at the National Gay and Lesbian Task Force where she spearheaded a Census advocacy campaign, deepened the Task Force’s sexual liberation work, and authored its recent contribution to the field of LGBT aging, *Outing Age 2010*. Grant holds a B.A. from Wesleyan University and a Ph. D. in Women’s Studies from the Union Institute. Her scholarly work has appeared in *Signs*, a feminist journal of culture and society and in Diana E. H. Russell's landmark anthology, *Femicide*. Her critique of racism in the women's and queer movements has appeared in *The Reader’s Companion to U.S. Women’s History* and the journal of the National Women’s Studies Association.

Lisa Mottet, Esq. is the Director of the Transgender Civil Rights Project at the National Gay and Lesbian Task Force, which she has led since 2001. The Project’s primary focus is to assist LGBT activists and allies with passing and implementing non-discrimination laws and policies from the local to the federal level, with a secondary focus of enacting transgender-friendly policies such as those related to driver’s licenses, birth certificates, and health care. Mottet co-authored *Transitioning Our Shelters: A Guide to Making Homeless Shelters Safe for Transgender People*, working with the National Coalition for the Homeless. She also co-authored *Opening the Door to the Inclusion of Transgender People: The Nine Keys to Making Lesbian, Gay, Bisexual and Transgender Organizations Fully Transgender-Inclusive*. Lisa graduated from the University of Washington in 1998 and received her J.D. from the Georgetown University Law Center in 2001.

Dr. Justin E. Tanis is on the staff of the National Center for Transgender Equality (NCTE) and has worked in LGBT organizations for close to 25 years as a community organizer, leader, educator and program specialist. He is the author of *Trans-Gendered: Theology, Ministry, and Communities of Faith* (Pilgrim Press, 2003), which was the result of his doctoral research into the experiences of transgender people in communities of faith. Among his other writing credits, he and Lisa Mottet collaborated on *Opening the Door to the Inclusion of Transgender People: The Nine Keys to Making Lesbian, Gay, Bisexual and Transgender Organizations Fully Transgender-Inclusive*. He holds a bachelor’s degree from Mount Holyoke College, a Master’s degree from Harvard University, and a doctorate from San Francisco Theological Seminary.

Jack Harrison is a Vaid Fellow at the National Gay and Lesbian Task Force Policy Institute, where he has served since 2009. Prior to this report, he contributed to the Task Force publication, *Outing Age 2010: Public Policy Issues Affecting Lesbian, Gay, Bisexual and Transgender Elders* by Dr. Jaime M. Grant. Jack graduated from Georgetown University in December of 2008 and is now pursuing an M.A. in Communication, Culture, and Technology from the same university. He has previously interned for the National Center for Transgender Equality and Khemara, a women’s organization in Phnom Penh, Cambodia.

Dr. Jody L. Herman is a consulting researcher for the National Gay and Lesbian Task Force. She graduated from Illinois State University and now holds a Ph.D. in Public Policy and Public Administration in the field of Gender and Social Policy from The George Washington University, where she also earned her M.A. in Public Policy with a concentration in Women’s Studies. She currently serves as the Peter J. Cooper Public Policy Fellow at the Williams Institute at the UCLA School of Law.

Mara Keisling is the founding Executive Director of the National Center for Transgender Equality. She is considered one of the foremost authorities on discrimination against transgender people in the United States and has almost twenty-five years of professional experience in social marketing and opinion research. A Pennsylvania native and a transgender woman, Mara completed her undergraduate studies at Penn State University and did her graduate work at Harvard University in American Government.
“My mother disowned me. I was fired from my job after 18 years of loyal employment. I was forced onto public assistance to survive. But still I have pressed forward, started a new career, and rebuilt my immediate family. You are defined not by falling, but how well you rise after falling. I’m a licensed practical nurse now and am studying to become an RN. I have walked these streets and been harassed nearly every day, but I will not change. I am back out there the next day with my head up.”

—Survey Respondent