

Transgender denied! Healthcare stigma & discrimination in rural America

"There are so many studies out showing that access to gender-affirming care ... simply *saves lives* ... Whenever you have access to gender-affirming care, you are able to feel safe and at home in your body." – *Ash Orr*

911. What's your emergency?

America's healthcare system is broken and people are dying.

Welcome to **Code WACK!**, where we shine a light on America's callous healthcare system, how it hurts us and what we can do about it. I'm your host, **Brenda Gazzar**.

(music)

This time on **Code WACK!** What unique challenges do transgender individuals face when it comes to accessing health care in rural Appalachia? Why is gender-affirming care considered potentially life saving for trans and nonbinary individuals? To find out, we spoke to **Ash Orr**, a trans organizer from West Virginia and press relations manager for the <u>National Center for Transgender Equality</u> or **NCTE**. Ash is also a National Storyteller for Planned Parenthood, leveraging their personal experiences with abortion care and transition-related health care to help dispel societal stigmas around these topics.

Welcome to Code WACK! Ash!

Orr: Thank you. Thank you for bringing us on here and for your flexibility with us.

Q: Of course. We're so excited to talk to you. So, first of all, tell us about yourself and your background. How did you get involved in the fight for transgender rights?

Orr: Absolutely. Yeah. So my name is Ash. I am from West Virginia, and I really got started in my activism in organizing around trans issues, I would say, around the 2012 elections is when I really started becoming more vocal and stepping out of my comfort zone. And at that point in time, I was not out as a trans person fully, I was still living just as a simply a queer person. So during that time, I was doing a lot of activism around the entire LGBTQ-plus community and in general. And then as time progressed and as I finally came out as trans, that's when I really hit the ground running and started getting into the hills and hollers here in West Virginia and throughout Appalachia to work on the ground with other trans communities and to really start finding where are these gaps here in West Virginia and in Appalachia between the trans community and our elected officials.

The reality is here in West Virginia and throughout a lot of Appalachia, we've lost access to abortion, we're seeing trans bans popping up left and right, but despite all of this, there is such a wonderful group of trans individuals and our allies who have really started stepping up and finding ways to keep our community safe. So I kind of just got my start just doing basic organizing, working my way up. I'm very passionate about who I am as a person, as well as protecting the trans community, especially trans community members within red states, especially misrepresented states like here in West Virginia and yeah, now I'm at NCTE. I truly love working with this organization. It's wonderful to be a part of a trans-led organization, especially during such a wild time <laugh> for the trans community. So I'm very, very thankful for the journey that I've had. It's led me to here.

Q: You said something about misrepresented states. What do you mean by that?

Orr: Yeah, and I'm happy to expand on that. So, you know, here, I'm in West Virginia, I'm very passionate about my home state. We are often misrepresented here, you know, we, the reality is the people that we are putting forward do not

represent our best interests. And often individuals, especially outside movements, look down upon states like West Virginia, or they simply just do not bring us into the movement. And that's really disappointing because, you know, we have such, you know, in Appalachia, we really take pride on our organizing skills, on our sense of community, on the way that we uplift mutual aid efforts. So there has been so much overlooked in terms of the movement here in West Virginia and other Appalachian states that simply is just misrepresented by the media, by elected officials, by outside groups. So I have been doing my best using, you know, both my professional and my personal lived experiences to rewrite those narratives around Appalachia and other small red states throughout the country. Because again, there are trans people here, there are rural trans individuals, and we are all fighting the same fight. And I am just doing my best to make sure that we are not looking down upon or leaving out these Appalachian states.

Q: Wow, that's great. So what exactly Ash is gender-affirming care and why is it so important to the wellbeing of people who are non-binary?

Orr: So gender-affirming care, as defined by the World Health Organization, encompasses a range of social, psychological, behavioral, and medical interventions that is "designed to support and affirm an individual's gender identity" when it conflicts with the gender that they were assigned to at birth. And these interventions help trans individuals, including non-binary folks, align various aspects of their lives, be it emotional, interpersonal, and biological, with their gender identity. So something that I want to really emphasize here is some, but not all trans or non-binary people undergo medical treatments to make their bodies more congruent with their gender identity and help them to live happier, healthier lives.

And when they do this, this is called a medical transition. And while transition related healthcare is critical and lifesaving for many trans and non-binary folks, not all trans and non-binary people will transition medically and that's often due to personal choices, lack of access to medical care, like healthcare deserts or insurance issues, lack of support, and a variety of other reasons. However, a trans or non-binary person is still trans or non-binary regardless of whether or not they undergo medical transitions. So yeah, it's very important that we keep access to

gender-affirming care and unfortunately, we are seeing a lot of attacks across the country that is working to strip away our access to gender-affirming care.

Q: Right, great points. So transgender people face a variety of unique health challenges. You mentioned some. What else can you tell us about that?

Orr: Oh, I have a lot to say about this <laugh>. So, yeah, you know, as I stated, some folks, but not all folks will undergo medical treatments, but those who do, we see different trans people may need different types of care different types of gender-affirming care, and people should be able to make these decisions about their care based on their individual needs. And these types of procedures can, you know, look like hair growth or removal treatments, hormone therapy, various surgeries to help one be more in line with one's gender identity and while not everyone needs transition-related medical treatments, there is an overwhelming consensus within the medical community that they are medically necessary for many trans people. It should be covered by private and public insurance. So one of the issues that we run into, and I think we'll talk about this here later, is the lack of health care or health insurance access.

We are also seeing health insurances denying individuals access to gender-related health care. And another issue that we really run into in states such as mine, which we do lack, you know, reliable health care, we have a lot of health care deserts here, as many trans people in rural areas also experience frequent mistreatment by both their healthcare providers and among us who do have insurance, their healthcare insurers.

And matter of fact, I believe, so according to the 2015 United States Trans Survey, the USTS, nearly one quarter of trans people reported that they did not seek healthcare that they needed in the year prior to completing the survey due to fear of being mistreated as a trans person. And 33% did not go to a healthcare provider when they needed it, because they couldn't afford it. And all of these issues, they intersect, especially when you look at rural and red areas or even trans folks in more accepting states. It's difficult to obtain health insurance and if you do have health insurance, finding a doctor that is well versed within trans healthcare and that is not discriminatory is also another hurdle that folks have to jump over a lot of these issues while they seem separate, they all do intersect.

And it is unfortunate that it is such a struggle for trans individuals to find reliable and safe health care.

Q: Oh, wow. That is unfortunate. Can you share an example?

Orr: Yeah, I mean, we have folks here. I won't give names <laugh>, but I did talk to one individual prior to our interview here, and they are here in West Virginia. They are a trans adult who has been seeking gender-affirming care for quite some time now. They finally secured a job that provided wonderful insurance, and unfortunately the healthcare provider they have been seeing is incredibly transphobic. So whatever this person stated, I am wanting to start hormone therapy, I'm eventually wanting to have gender-affirming surgery, rather than helping their patient obtain these things, things that they want to be in control of with their own bodies, they were met with transphobia. So now they are having to start the whole process over of finding a medical care provider that is knowledgeable in trans health care that is not transphobic, and that takes their insurance.

So, and you know, especially post COVID, I mean, we are still unfortunately in a pandemic, but really now that we have started to try to go back to normal, we are still seeing the impacts that the pandemic has had on the healthcare system. So even prior to COVID, it was difficult to find a decent healthcare provider, especially one that was trans knowledgeable. But now you have to start the whole process over when there's fewer doctors, when everybody's spread thin, when there's a lot of wait lists for providers who are trans knowledgeable.

So it's this huge process that they now have to start over again simply because their doctor was transphobic. So they did all the right things, you know, they're working, they've got health insurance, they're ready to take these next steps in their life on their journey, and they're having to start completely over again simply because of transphobia.

Q: Wow, what a letdown. So how did the doctor communicate this?

Orr: I'm not entirely sure of all of the details that were involved there. I do know that there was a lot of frequent misgendering, failing to acknowledge this person

as a trans individual, kind of making light of their journey as a trans person and just being overall dismissive of their journey and coming out. You know, it's very vulnerable already to come out as a trans person to your loved ones and your peers, but then let alone you have to do it again, you know, sometimes in a professional workplace or in the medical field. So to have to put yourself in such a vulnerable position where you are coming out to your medical care provider and you are telling them like, 'I want you to help me obtain this health care so I can feel at home in my body' and just to be met with transphobia is so disappointing. And it's such a struggle. Again, you have to start the whole process over and that weighs on you. That weighs on your mental and emotional wellbeing for sure.

Q: Yes, absolutely - it certainly would! So what now? What resources are there for this patient?

Orr: Yeah, so we are very lucky here in West Virginia, you know, despite the ongoing legislative attacks that we have faced here. We have such a strong network. We've got great resources at WVU Medicine. We have the West Virginia Trans Coalition. We have the Women's Health Center, so the Women's Health Center and, and Planned Parenthood. These types of organizations also help with gender-affirming care and we are very thankful that we've been able to source this person out to these resources and they have started making steps in starting their journey to obtain hormone therapy and to obtain gender-affirming surgeries. So we are very lucky that we have resources. However, those resources are limited, you know, especially now that we are seeing healthcare bans happening here in West Virginia. While those resources are wonderful, they are limited and folks do get stretched then. But yes, thankfully this person is in a much better place now. A lot of folks have chipped in to help put them on the right path to get them into a safe doctor's office and to be able to start their journey.

Q: So transgender people are more likely to be uninsured. Why is that?

Orr: There are a couple of different reasons for that and most of it is due to, you know, insurance is tied to jobs a lot of the times. And the reality is too, it goes back to like, if you look at the USTS employment info on the USTS survey, the findings show that a large economic disparity between trans people in the survey

and the U.S. population. So, for example, nearly one third of the respondents were living in poverty. When you compare that to 12% in the U.S. population, and a major contributor to that high rate of poverty is likely the respondent's 15% unemployment rate and that's three times higher than the employment rate in the United States population at the time of that survey. So again, like the employment rate among the respondents 15% and one in six respondents had never been employed, or 13% of all those respondents in the sample had reported losing a job because of their gender identity or their gender expression in their lifetime.

And then 30% of respondents who had a job in the past year during that survey reported being fired, being denied a promotion, or experiencing some form of mistreatment related to their gender identity or expression. So the problem is, you know, unfortunately in our country, our insurance – especially good insurance – is tied to your place of employment. And if you do not have a place of employment, you're going to struggle to pay for insurance that's private. And without that insurance, it's hard to obtain health care unless you have a lot of money sitting around floating around that you can drop on health care, it's very difficult. So unfortunately we do see a higher rate of trans people being unemployed and being uninsured in those two absolutely go hand in hand.

Q: Right. So I know that discrimination exists against transgender people, but aren't there employment laws that are supposed to prohibit that?

Orr: I am not an attorney <laugh>. That is, this is probably more of a policy question, so I don't want to misspeak here. But you know, while we do have some laws in place or discrimination laws, unfortunately trans identities are not typically involved in those protections and another issue too is if you are discriminated against, you have to go to court and try to fight and prove your case. And unless you can get an attorney pro bono or you have a lot of funds on standby, you're not going to be able to get legal representation and the reality is too, is a lot of our courts, they will not side with queer or trans individuals. And that's just the unfortunate reality of what we face. So yes, discrimination is unfortunately rampant, but the problem is proving that discrimination, getting accurate representation for that discrimination.

And you need to think too, it's like if you are discriminated against and you do decide to seek action during that time, you could also be without a job, so you're losing out on funding, you were losing out on being able to pay your bills. You could fall behind on your rent, you could fall behind on your utilities. So it's not as simple, you know, you know, a lot of the times we hear it's like, 'oh, if you've been discriminated against, do something about it.' It's just not that simple, especially if you are part of a marginalized community because there are so many other roles that play to address that ongoing discrimination. Right.

Q: So true. According to Healthcare.gov, even when trans people have health insurance, they can have problems with it, like being denied coverage for medically necessary care. Can you give us another example?

Orr: Yeah, I don't have, you know, any other personal stories that I could share with you, but I will say that, you know, while not everyone again needs gender-affirming medical treatments, there is an overwhelming consensus in the medical community that these treatments are medically necessary for many trans people, and they should be covered by private and public insurance. Every major medical organization in our country has affirmed that gender-affirming medical care is safe, it is effective, and that everyone who needs it should be able to access it. But unfortunately, this critical care is often denied by insurance companies and often in spite of state and federal laws. And you know, that also plays into healthcare discrimination and the types of discrimination that trans people face within the medical care system.

Q: Right. And Ash, I think you mentioned a little bit earlier, Ash, that this care can even be life saving. What can you tell us about that?

Orr: Yeah, absolutely. You know, there are so many studies out showing that access to gender-affirming care simply, it, it, it saves, saves lives, you know whenever you have access to gender-affirming care, you are able to feel safe and at home in your body, you are able to get the medical care, just basic check ups that you need because you are able to live your life fully and out as a trans person, you are able to trust your medical care providers. So losing access to gender-affirming care puts so many lives in danger, and there's simply no, no need for that. And, you know, again, every major medical association and our

country has affirmed that this care is safe and effective and that everyone who needs it needs to have access to it. And at the end of the day, we do not need our lawmakers deciding or being in the doctor's room with us. You know, this is not their journey. It is not their bodies, it is not their experiences. These decisions need to be made between the patient, the doctor, or the patient's guardian or parents, should they be a minor. That's really what it boils down to is these decisions need to be left between the patient and the medical care providers and not our politicians.

Thank you, Ash Orr. Stay tuned next time when we continue our discussion with Ash about how best to help trans people access the health care they need.

Do you have a personal story you'd like to share about our 'wack' healthcare system? Contact us through our website at heal-ca.org.

And don't forget to subscribe to Code WACK! wherever you find your podcasts. You can also find us on ProgressiveVoices.com and on Nurse Talk Media.

Code WACK!'s powered by HEAL California, uplifting the voices of those fighting for healthcare reform around the country. I'm Brenda Gazzar.