

## Questions and Issues About Gender Identity and Gender Role

1. Remember that both biological males and biological females can seek a contragender role. It may not be a full-time role change. Their goals and the way they will try and reach them will vary and differ from gender to gender and person to person. They frequently have different perspectives and agendas.
2. You will want to learn where each Transperson believes they are in the continuum. Are they fixed in one place? Or moving to a different one? Over what period of time and with what planning? Are those plans realistic?
3. Some Transpeople will never move to Transsexuality; they will only crossdress.
4. Some may want hormone therapy to only partially feminize or masculinize. Some may request surgery but only body contouring and not genital reconstruction.
5. Some may want it all and choose to continue to live in their birth gender role.
6. Be aware that all paths do not lead to a full and permanent contragender role.
7. When you are caring for a Transsexual who is either about to enter transition or is in the process, determine what they understand about the value of the mental health assessment. Will they work in the process with knowledge of its importance to gain success and comfort?

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## Additional Resources

Pennsylvania/MidAtlantic AIDS Education  
and Training Center  
130 DeSoto Street, A453 Crabtree Hall  
Pittsburgh, PA 15261  
Phone: 412-624-1895 • FAX: 412-624-4767  
[www.pamaaetc.org](http://www.pamaaetc.org)

Persad Center, Inc.  
5150 Penn Avenue  
Pittsburgh, PA 15224  
Phone: 412-441-9786  
[www.persadcenter.org](http://www.persadcenter.org)

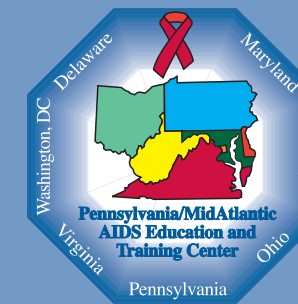
### SELECTED WEB SITES

Health Resources and Services Administration	<a href="http://www.hrsa.gov">www.hrsa.gov</a>
Centers for Disease Control and Prevention	<a href="http://www.cdc.gov">www.cdc.gov</a>
AIDS Action	<a href="http://www.aidsaction.org">www.aidsaction.org</a>
Gay and Lesbian Medical Association	<a href="http://www.glma.org">www.glma.org</a>
Pennsylvania Department of Health	<a href="http://www.health.state.pa.us">www.health.state.pa.us</a>
National AIDS Education and Training Center	<a href="http://www.aidsetc.org">www.aidsetc.org</a>
Gay Men's Health Crisis	<a href="http://www.gmhc.org">www.gmhc.org</a>
National Transgender Advocacy Coalition	<a href="http://www.ntac.org">www.ntac.org</a>
Gender Public Advocacy Coalition	<a href="http://www.ntac.org">www.ntac.org</a>
Human Rights Campaign	<a href="http://www.hrc.org">www.hrc.org</a>
Gender Education & Advocacy	<a href="http://www.gender.org">www.gender.org</a>
Pennsylvania/MidAtlantic AIDS Education and Training Center	<a href="http://www.pamaaetc.org">www.pamaaetc.org</a>
Persad Center, Inc.	<a href="http://www.persadcenter.org">www.persadcenter.org</a>

# CLINICAL TRANSGENDER RISK ASSESSMENT



## A QUICK REFERENCE GUIDE



The Pennsylvania/MidAtlantic AIDS Education  
and Training Center, University of Pittsburgh  
Graduate School of Public Health  
Pittsburgh Local Performance Site  
and  
Persad Center, Inc.

## General Transgender Interview Guidelines

1. It is necessary to be sure that each caretaker of the Transgender person is **without bias**. An important step in this process is for the professional to examine their own feelings about rendering care to this population.
2. It is understandable that many professionals may be aware of their own lack of experience and knowledge in counseling and treating the Transgender individual. It is therefore important to identify a consultant and other sources of information when questions need to be answered and problems need to be discussed.
3. The importance of assuring that a Transgender client is in a comfortable setting **cannot be stressed enough**. Ask how clients want to be addressed and be sure to address them in the appropriate gender.
4. **Establish rapport and assure honesty**. The key in this process is offering strong reassurance about confidentiality.
5. **Avoid challenges and judgment in questions and listen with a minimum of interruption**.
6. **Be frank enough to tell a client when you do not know the answers to specific questions or issues but offer to search for answers or clarification**.
7. Questions should be direct and clear. Use language between you and the client that is understandable. Define medical terms when they are used. Clarify as needed to make sure you both are certain of what is being said.
8. A major goal for the clinician is to establish a partnership for mutual decision making.
9. **Assume nothing!** Transpeople can be single, married, or in a partnership. They may be deeply closeted and may not have shared their contragender feelings and intent with anyone. It may be difficult for them to share with you, in fact. Patience is needed by the clinician.
10. **Ask for their questions**. The client should have a clear understanding of what is possible and what is not as they seek therapy and care. This can lead to equal decision making.
11. **Ask questions about their work and its relationship to their transition and post-operative status**. You need to know about their natal family, acquired family, social integrations, interests, and feelings of spirituality.
12. It is important to remember that a change in gender role is not easy for the client. Individuals must often make sacrifices, take risks, and experience the other self, family, and social system changes in order to make the transition.

## Determining the Transperson's Sexual Risks

1. **With all new clients/patients, a careful sexual risk assessment is essential**. It is important also to inquire about sexual risk and behaviors throughout the course of treatment, therapy, or counseling because lifestyles change and levels of knowledge and education will vary as well.
2. **When possible, directly ask about specific sexual behaviors such as:**
  - When was the last time you \_\_\_\_\_?
  - How often do you \_\_\_\_\_?
  - Have you ever exchanged sex for money or drugs?
3. **At times, it may be useful to ask questions that explore:**
  - Do your friends use condoms? Do you?
  - Do your friends drink alcohol? Do you?
  - How easy is it to get drugs? Do you?
4. It is important to know that some crossdressers when "dressed" will have sex with men or with women who are not in partnerships with them. Learning about their sex partners will provide very important information. Assume nothing.
5. Some Transsexuals, when in transition—that is, before genital reconstruction and after genital surgery—may engage in high-risk sexual behavior.
6. It is important to ask questions to determine the specific details of the behavior and its context (i.e., multiple partners, party sex, and sex to earn money and even to authenticate gender identity, will be some of the motivations).
7. Some male-to-female Transsexuals will have sexual experience only with biological women. Some female-to-male Transsexuals will have experience with biological males. Questions about their partners, and even their health status, are also essential.
8. **Seek clarification of answers to your questions about sexual behavior (i.e., When you say you have sex, what exactly do you mean? Oral? Vaginal? Anal? Protected? Unprotected?)**.
9. **Some specific questions to ask routinely would be:**
  - Do you have sex with men, women, or both?
  - What do you know about the sexual practices of your partner(s)?
  - What do you do to protect yourself during sex?
  - When was the last time you had unprotected sex?
  - Do you use condoms? When? Or, how often?
  - Have you ever had sex with someone you just met or didn't know?
  - Have you any knowledge of STDs in your partners?
  - Have you had any STDs yourself?

## Assessing Drug and Alcohol Use in the Transperson

1. **Ask directly about needle use of any kind, i.e., insulin injection, testosterone injection (FTM), and estrogen injection (MTF), as well as illicit drugs**. What other licit or illicit drugs are being used—prescription, over-the-counter, herbal?
2. **Does the person share needles? Are they clean? How do they know? Do they know the proper methods of cleaning needles and injection equipment?**
3. **Ask directly about other drug use by other routes of administration, i.e., oral, inhalation, sniffing, vaginal, or rectal route**.
4. **Ask specifics about the drug names, dosages, and frequency of use**. It is important to understand the context of drug use, such as, solo usage or in company. With whom?
5. **Look for track marks or injection sites, since they are not always in unexposed body sites**. Ask if the person has had any injection-related infections.
6. **Ask directly about alcohol use**. What do they drink? How much each day? Each week? Monthly? For how many years? Are they drinking more of late? Have they ever been told that their health is being impaired based on lab testing or hospitalization?
7. **Ask if their drug and/or alcohol use has caused impairment of work or school**.
8. **Do they smoke? Or have they ever? How much and for how long? Have they tried to stop?**
9. **Keep in mind drug/substance and alcohol use extends broadly across the socioeconomic board**. Some clients/patients do not think of marijuana and alcohol as substances of harm and injury.
10. **Transpersons, just as all people, may hide the truth or bend it considerably**. Establishing trust with each client is essential and even then you must be alert to clues in presentation and history that could alert to use and abuse of substances.

