Overcoming Obstacles

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For Maya Montaperto, a 51 year-old trans woman, a question about being considered a “survivor” caught her off guard.

The thought had never even crossed her mind, but the response unsurprisingly rolled off her tongue.

“I never considered that before,” she thought for a minute and looked bewildered. “I don’t think about stuff like that. Well, yeah... I guess, when I look back and see everything I’ve been through, it hasn’t been easy.”

Life is far from easy for anyone who belongs to the transgender community.

In a gender binary society where everyone is supposed to fit into the "female" “male” category in forms and surveys, transgender people are commonly left feeling like they don’t belong anywhere. Sometimes, as they explain it, they are caught in an “in between” group making it hard for people to classify them thus becoming victims of constant ridicule and abuse.

They feel like their body parts, or biological sexes, aren't in alignment with their sexual identities and as a result are subjects to high levels of scrutiny that affect their daily lives.

Sadly, their days are filled with many frustrating experiences that cause them to make the kinds of decisions that may end up influencing their life expectancy.

For example, coming into contact with a culturally inadequate and uninformed physician will make them hesitant about seeking medical help the next time around. Or being referred to a specialist who isn't necessarily sensitive towards transgender and gender non-conforming individuals sparks an unavoidable anxiety that will also in many cases keep them away from receiving the proper medical help that they might need.

The health disparities within the transgender community are commonly overlooked.

Two seasons of the comedy-drama series Orange is the New showing actress and female transgender Laverne Cox having difficulties when accessing medical services in jail has brought the topic to the forefront. Cox portrays Sophia Burset, an imprisoned black transgender female, who is denied by her prison guards her needed dosage of hormone therapy.

Although a fictional scenario, she uses this opportunity to show her newly-captivated and curious audience the many untold stories and hardships that transgender people face, but that rarely make it to mainstream television.
The transgender community has been considered a forgotten minority for years, even within the LGBTQ population, and alike any other minority group, they face additional challenges—some especially pertaining to their group—such as postponing care, refusal of care, uninformed doctors, or the denial of medical services due to bias, that may threaten to end their lives.

This, along with other hardships including suicide, a lack of family acceptance, homelessness and unemployment leads some experts, advocates and even transgender women of color themselves to believe that their lifespan is only of about 35 years-old.

“My life expectancy was no more than 35,” said Cecilia Gentili, a trans health coordinator for APICHA, an LGBT community center in Chinatown, when asked if she ever thought she would live until middle age.

“I remember when I had my first conversation with another transgender woman and expressed wanting to be her. The first thing she told me was: ‘you will be a prostitute, you will do drugs and you will die young. Are you okay with this? I said yes, and she responded: then... I will help you.’”

Gentili, a male-to-female transgender and a political asylee from Argentina, is now well into her 50’s. She says people usually don’t understand what a “trans identity” is, consequently fearing the unknown. In many occasions, she has felt like ending her own life unable to see a brighter future ahead.

According to her, ignorance is the biggest obstacle she has ever faced while dealing with the health care system.

“Providers were unable to understand my body and clearly expressed their discomfort with it, asking uncomfortable questions, offering help to make my life ‘better’ and change it,” said Gentili.

She’s not alone in the world.

Fifty percent of about 6,450 transgender and gender non-conforming people reported having to teach their medical providers about transgender care, according to a survey conducted by the National Center for Transgender Equality, NCTE, and the National Gay and Lesbian Task Force in 2011.

Though considered understudied, numerous transgender experts rely heavily on this data set.

“This is a really consistent experience across the board that a lot of trans folks have,” said Sasha Alexander, through a phone interview, about the alarming numbers.
Alexander is the director of membership at the Sylvia Rivera Law Project, an organization working to make sure that all people are free to self-determine their gender identity and expression.

“People experience so much discrimination that they don’t go [to the doctor], they don’t receive health care, they let things go in their own bodies, which is terrible,” added Alexander.

In fact, 28 percent of the survey participants reported postponing medical care due to discrimination when they were sick or injured, and 19 percent said they were refused care due to their transgender or gender non-conforming status, according to the same NCTE survey.

“People have died because they didn’t receive service--because people didn’t know where to put them, or didn’t know what to do with them, or didn’t want to touch them because they were trans,” commented Alexander, when asked about these statistics.

The discrimination comes at the hands of nurses, administrators, and doctors who make them feel unwelcome in many instances, discouraging them to come forward and freely express their identities.

Failing to obtain preventive care is subsequently known to lead to long-term health outcomes thus a purported shorter lifespan.

Primary doctors often fail to prescribe pap-smears to screen for cervical cancer for female-to-male transgender people, for example, which might lead to a late-stage cancer diagnosis.

Willy Wilkinson, a mixed heritage, Asian-American transgender man and social movement leader, has been advocating for marginalized populations since the early days of the HIV/AIDS epidemic.

He says gender culturally competence training and medical competence training for providers is key, including training for medical schools and regular staff at all levels--from major health institutions to small community health programs.

Wilkinson, who is now an active voice in California pushing for medical competency, has also been a victim of inequity, prejudice and unfair situations at times.

“There have been times where I’ve accessed care and not disclosed my trans status because I didn’t want to deal with the potential hassle of having to explain it to people or being treated differently once I disclosed [it],” Wilkinson explained, over the phone.
The NCTE data suggests that the discriminatory events that transgender people commonly face in their daily lives, as described in the report--from not having health insurance to losing a job because of bias--puts them at increased risks for HIV infection, smoking, drug and alcohol use and suicide attempts.

“[There’s] an immense amount of employment discrimination,” explained Julian Padilla, a community organizer for GLOBE, during an in-person interview in his office in Bushwick, Brooklyn.

Padilla leads the work on trans healthcare for Make the Road New York, a community organization that works through policy innovation and transformative education. He says health care, or the lack thereof, is undeniably connected to other areas of people’s lives.

“What you have is a lot of people who are unable to find above ground professions, and people turn into survival work, like trading sex, or anything that they can to find the money to provide for their health care,” added Padilla.

“Someone who is unable to get hormones through their doctor may look to find them in an underground black market that is dangerous, they won’t be seeing an endocrinologist, so they won’t have any medical testing.”

Transgender people face double the rate of unemployment than the average population. Ninety percent reported having experienced harassment, mistreatment or discrimination in the workplace, and another 47 percent 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.

Unemployment drives transgender people to prostitute themselves, as Padilla described, putting their lives at much higher risks.

The Centers for Disease Control and Prevention CDC has estimated that in the United States transgender communities are among the groups at highest risk for HIV infection.

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

Suicide is also extremely high and common among transgender individuals. Forty-one percent of the over 6,000 respondents admitted to have attempted suicide at some point in their lives.

“I’ve thought about suicide thousands of times. Thousands and thousands. There were times were every day all day for months at a time, all I could think about was suicide,” said Maya Monterperto.
That’s because family acceptance is a huge factor to living a happy life. As the NCTE report describes, family acceptance had a tremendous effect against many threats to an individual’s well-being.

Montaperto grew up in the sixties in a primarily Italian-American family where she was given the name of Michael.

At age six, she was already secretly getting into her mom’s clothes “just like any other little girl,” with every chance she got, Montaperto explained. She knew right there and then that she was “inherently a woman, a female,” and that her sex had nothing to do with the way she perceived herself. But it took 43 years of repression to let it off her chest.

She always knew and she wished for it to go away.

But knowing how her family was not going to be accepting discouraged her from ever transitioning while growing up.

“I knew before the 70's what was going on with me, but I was terrified because I knew what people’s reactions were going to be if I came out with it,” Montaperto said, “so I stuffed it, I pushed it down trying to do as many masculine and macho things as I possible could.”

She lifted weights, she took martial arts classes, she even did heavy construction work, all while her true identity patiently awaited to come out. She was taught to glorify and look up to her uncle, Johnny, a leader of a street gang in the 50’s, who fought with chains, bats and zip guns, she explained.

Montaperto is just one of many who deal with the harsh realities of not having familial support while going through this. Fifty-seven percent of those surveyed experienced significant family rejection making their existence even more difficult.

Zander Keig, a trans-man, award winning speaker and writer, who specializes in transgender issues, explained over the phone that the more adverse childhood experiences someone has, the higher the probably they are going to become an alcoholic, a drug addict, homeless, a smoker or even obese.

“Growing up in a family, religion, community and society that denigrates, fears and shames children who exhibit any deviance from the expected gender norms: boys must be masculine and girls must be feminine, takes a toll of those young people and that trauma impacts their experiences into adulthood.”

While Americans are beginning to somewhat understand gender identity and the complexities of the gender spectrum, there is still so much work to be done.
On December 16, Governor Andrew Cuomo and the New York State Department of Health gave the transgender community an early Christmas present by presenting a new regulation that would end the 16 year-old exclusion of transgender health care under the Medicaid program.

For them, this means that this regulation will drastically improve their lives by making sure they receive the hormone therapy and transition-related services they need to lead healthy lives.

The new regulation, however, still does not address all of their medically necessary care, as well as leaving out the transgender youth.

But it’s a start to achieving their health care goals, and as Padilla says, together, they will fight until the very end until discrimination and exclusion are no longer an issue. He says he admires their brilliance and resilience that keeps them going everyday despite their hardships.

“Trans [people] aren’t helpless victims for whom everything goes wrong...they survive, everyday and [find] incredibly creative ways to take care of themselves and each other,” Padilla proudly said about the people he represents.