



I HAVE A NEW TRANSGENDER CLIENT...NOW WHAT?

By: Loree Cook-Daniels, Policy Director, FORGE Transgender Aging Network for The National Resource Center on LGBT Aging

It's becoming more and more common: someone who provides services to older adults finds out or gets told that a person they are (or soon will be) serving is transgender. This fact sheet will answer some common questions about working with transgender clients.

What does transgender mean?

There are many different ways of being transgender. Some people who were raised as boys now live as women (sometimes called male-to-female, MTF, or transwomen) or were raised as girls who now live as men (sometimes called female-to-male, FTM, or transmen). Some dress in the clothes of the "opposite" gender some or all of the time (sometimes called cross-dresser). Some say they aren't male *or* female, but something different. Your client may share with you how they think of themselves, or they may not. What matters is that you treat them as they want to be treated: as a man, as a woman, or (rarely) as someone in between.

What will he or she look like?

Many transgender people look no different from other men and women; no one would ever guess they had a different gender history than most people. Sometimes there are visible features that are a little unusual, such as a low voice or an Adam's apple on a woman, or very small hands or extremely smooth facial skin on a man. In some cases, transgender people look like a mix of both male and female. Some transgender people choose this sort of mixed appearance, while others are simply unable to make themselves look more like they would like to look. However your client appears, you will soon get beyond their looks to who they are as a person.

What name do I call her or him?

Like everyone else, transgender older adults have a right to be called by their preferred name. You can find out how to address your new client by simply introducing yourself and asking, "What name would you like me to call you?" This practice works for people who are not transgender as well, since some clients prefer more formal forms of address like Mrs. Smith, while others prefer nicknames like Bob or Kathy.

Many transgender people prefer a name other than what is on their insurance cards, other forms of identification, or even intake forms. Family members may call the person by another name. In general, stick to calling your client what he or she wants to be called; this practice will ensure you have a much friendlier and more cooperative relationship. [Note: some clients may ask that you use one name when their family is present, but another name when they are not.]

Do I refer to this person as he, she or what?

Many older transgender people are very careful to select a name and clothing that are either clearly “female” or clearly “male.” If this seems to be the case with your client, you are probably safe using the pronoun that matches – “he” for those who have a masculine name and style of clothes, “she” for those who have a feminine name and style of dressing. If you are unsure, you can ask your client: “Do you go by ‘she’ or ‘he’?” [Note: *Never* call a person “it,” “he/she” or “she-male.”] Always use the pronoun your client prefers when you are talking about him or her, even if your client is not present.

I have to help this person bathe, dress or toilet. What should I expect?

As is the case with all your older clients, you usually don’t know what scars and other physical features a person has until you have seen them undressed. Keep this in mind as you think about your transgender client; you don’t generally need to know ahead of time what their body will look like undressed. You simply need to be professional and discreet and work with whatever body your client has. *Most* transgender older adults have not had surgery on their genitals, although the shape and function of the genitals may be a little different from other people’s due to the effects of hormone medications (if your client uses or used them), so be prepared for any size shape, or function of genitals. Chests can likewise have been changed by surgery, hormones, or silicone, or they may look like “original equipment.” In rare cases, transgender people who were unable to afford or get permission for surgery have attempted surgery on themselves. In those cases, and in cases where people have cut themselves as a way of coping with discrimination or abuse, there may be unusual scars.

Until you know what your client calls her or his body parts, try to use names that aren’t linked to male or female, like “genitals” instead of “penis” or “vagina,” and “chest” or “torso” instead of “breasts.” Don’t be surprised if your client calls their body parts by the “opposite” or a creative name; that’s both common and enhances the transgender person’s sense of well-being.

What am I supposed to do about grooming?

Nearly everyone feels much happier when they feel they look good. Looking good may be even more important to the transgender older adult than it is for their peers, because good grooming can help others recognize their correct gender. Accordingly, you may need to help a transgender woman shave her face and put her wig on straight, or help a transgender man flatten his chest with a binder or put a tie on even for casual events. These efforts will be well rewarded by a much happier client and a much better caregiver/client relationship.

What do I say to other staff or clients?

When talking to others about your transgender client, remember his or her rights to privacy and confidentiality. You definitely *do not* want to volunteer that your client is transgender; that not only is no one else’s business, but it violates your client’s privacy and could even put him or her at risk of discrimination or violence. On rare occasions, even family members do not know that a person is transgender. If your client never told them, it is important to honor their family relationship by not discussing the matter, either.

If other clients realize or know that someone is transgender and they are disrespectful or upset, you may need to step in or ask a supervisor for help. Ideally, your workplace has a “no bias” rule that requires people to treat others respectfully, even if they disagree with or do not like them. If your workplace has this rule, by all means gently remind your upset client that your agency serves a wide variety of people and that everyone has a right to be respected there. If your agency doesn’t have this rule, you may want to suggest it so that every client feels safe and welcome. If the problem is with a roommate, treat it as you would any other roommate conflict or prejudice.

I work in a facility with separate male and female bathrooms and/or bedrooms. Where does my client belong?

So far there are no government rules about this issue. However, a growing number of courts and federal agencies have found first, that transgender people are protected under laws forbidding discrimination on the basis of sex and second, that transgender people should be treated as what they say they are – men or women – regardless of what their body looks like or what is on their identification. So while there may not be a legal requirement that you do so, you are probably better off legally – and *certainly* better off with your client – allowing them to use their preferred bathroom and matching them with a roommate of their own gender. Do remember that if you work in a congregate setting, you should be following privacy practices that keep others from seeing your client’s unclothed body or medical records. You can also minimize problems by following privacy and confidentiality rules and never talking about your client’s body or gender history or identity in front of others. It also helps if you set an example of respectful caring.

My religion is opposed to transgender people; what can I do?

Just like your transgender client, you have a right to have your beliefs respected. At the same time, if you work for an agency that serves the general public or a wide range of clients, you are expected (and in some places, required by law) to respectfully serve all clients, including transgender ones. You will probably need to keep your religious objections to yourself in order to do your job effectively.

What else should I know?

One of the most important things to realize is that transgender people have often had many experiences with service providers’ discrimination, prejudice and even violence. Your client may therefore be very wary of new people, and slow to build trust. Knowing this may help you continue to be kind and caring even when she or he is reserved or even challenging. Another important thing to know is that transgender people are all too often asked personal questions that they feel are rude or insensitive. For this reason, we advise you to *not* ask about someone’s genitals, their former name or other personal questions that are not absolutely necessary for you to do your job. Remember that you are there to serve your client; your client is not there to educate you or answer your curiosity.

But I am curious! How do I find out more?

Your transgender client doesn’t have to be your primary source of information; there are many, many books and Internet resources from which you can learn much more about transgender people. This fact sheet is a joint effort of the National Resource Center on LGBT Aging, which maintains a huge bank of resources about older LGBT people at www.lgbtagingcenter.org, and the FORGE Transgender Aging Network, which makes available many articles specifically about transgender older adults at www.forge-forward.org/aging. You may also be interested in a book written by a home health nurse about her experience with a transgender client, *The Color of Sunlight* (2010), written by Michelle Alexander and published by CreateSpace.

What’s the most important thing I need to remember?

Your transgender client is a unique person worthy of respect, just like every other client, just like you.