



**Massachusetts
Transgender
Political
Coalition**

WORKING FOR LIVED EQUITY

2019 Community Needs Assessment Report

**+ Share
Your
Voice**

**Shape +
The
Future**

Prepared by

**TRANS*FORMATIONAL
CHANGE**

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Table of Contents

| | |
|----------------------------------------------------------------------|-----------|
| About the Massachusetts Transgender Political Coalition | 4 |
| Mission Statement | 5 |
| Vision | 5 |
| Values | 5 |
| We Work To | 5 |
| Introduction | 6 |
| Methodology | 6 |
| Limitations | 6 |
| The W4LE Respondents | 7 |
| Location | 7 |
| Age Ranges | 8 |
| Gender | 8 |
| Race and Ethnicity | 10 |
| Disability Status | 10 |
| Families | 11 |
| Employment, Incarceration, and Student Status | 11 |
| Basic Needs | 13 |
| MTPC's Role | 14 |
| Safety | 15 |
| MTPC's Role | 15 |
| Health Needs | 17 |
| MTPC's Role | 18 |
| Access to Other Services | 19 |
| MTPC's Role | 20 |
| Legal Needs | 21 |
| MTPC's Role | 22 |
| Social Support | 22 |

| | |
|---------------------------------------------------------------------|----|
| MTPC’s Role | 23 |
| Community Development | 24 |
| Training and Support | 26 |
| Educational | 26 |
| Healthcare..... | 27 |
| Business and the Workplace | 28 |
| Government | 29 |
| Other Services and Agencies | 30 |
| LGBTQ Organizations..... | 30 |
| All Others | 31 |
| Partnerships and Collaborations | 32 |
| LGBTQ and Other Identity-Based or Social Justice Organizations..... | 32 |
| Health Care | 33 |
| Education | 34 |
| State, Local, and Non-Governmental Agencies | 34 |
| The Legal System..... | 35 |
| All Others | 36 |
| Conclusion | 36 |

About Massachusetts Transgender Political Coalition

Founded in 2001, the Massachusetts Transgender Political Coalition (MTPC) is an advocacy, education, and community-building organization that works to end discrimination on the basis of gender identity and expression. This includes working towards the empowerment of all persons who have been, or are being, or might be deprived of equal rights and/or fair treatment because of their gender expression or identity. MTPC is a fiscally sponsored 501c3 non-profit with one full-time staff, active Steering Committee, and dedicated volunteers.

MTPC does not engage in campaign or electoral politics.

MTPC is governed by a Steering Committee (SC), made up of persons of all ages who self-identify as transgender/gender variant/genderqueer/intersex (majority) as well as non-transgender family members, partners, friends, and allies (minority). SC members, elected on an annual basis by the voting membership, oversee its executive director and direct policy and priority, as captured in a mission statement and bylaws. The SC also performs much of the work of MTPC in the absence of adequate paid staff.

MTPC provides a consistent voice to key decision makers about the lives of transgender youth and adults and their families. While there are many legal, advocacy, and social organizations focused broadly on lesbian, gay, bisexual, and transgender (LGBT) community, there are very few that are led by and created specifically for the transgender community and in Massachusetts MTPC is that organization.

The aim of MTPC's programming is to improve the lives of the Massachusetts transgender youth, adults, and their families by:

1. Organizing and empowering transgender people to advocate for themselves;
2. Developing leadership within transgender communities through community education and opportunities;
3. Educating the public, the media, and institutions about issues facing transgender communities;
4. Increasing the awareness of policy makers about the needs of transgender communities; and
5. Advocating for equal access through policy changes at the institutional, state, and local levels.

Mission Statement

MTPC works to ensure the wellbeing, safety, and lived equity of all trans, nonbinary, and gender expansive community members in Massachusetts. We educate the public; advocate at state, local, and national levels; and through collective action we mobilize community, engage in capacity building, and advance community wellness and prosperity.

Vision

We envision a world where all trans, nonbinary, and gender expansive people

- are valued and celebrated;
- fully participate and thrive in all areas of society;
- actualize our full potential and self-determination to shape the future.

We Work To

Build broad-based participation and community power;
Support the development of leaders and coalitions;
Draw strength from diverse experiences and identities;
Learn from our history and evolve consciously;
Value the experience and voices of elders and youth;
Include those who are not fully visible;
Be accountable to the communities in which we work.

Introduction

This report represents the findings of the Working for Lived Equity (W4LE) community needs assessment conducted by MTPC and based on responses from 339 individual survey participants between December 2019 and March 2020. It serves as a follow-up of a 2009 community needs survey, which guided MTPC's programming.

While much has changed since then, there is still significant work to be done to address the needs and priorities of trans communities in Massachusetts. The W4LE survey serves to collect updated data to better understand the specific needs of trans and non-binary youth, adults, and families in the state, and their thoughts on MTPC's role in helping to address those needs. The survey also demonstrates that one of MTPC's assets is the trans community itself as demonstrated by many respondents' repeated expressed desire to get involved and offer peer support and resources.

Limitations

The survey was administered only in English, making it inaccessible many non-English speakers. Although the survey was readily available online, many community members across the state lack access to a computer, smart device and/or the internet. To ensure robust qualitative data, MTPC scheduled focus groups (4) across the state. Unfortunately, these focus groups were canceled due to the COVID-19 pandemic, and time constraints of the community needs assessment challenged efforts to move to online platforms. Additionally, MTPC received surveys with several missing pages from incarcerated trans people in different correctional facilities across the state. Some respondents indicated that they received the survey with pages already missing. In this case, it is accurate to assume that Corrections Officers removed several pages of the survey either before or after reviewing the survey participant's responses.

Methodology

The survey instrument, hosted on SurveyMonkey, was comprised of two sections. The first section, comprised of 15 mostly closed-ended questions and additional opportunities for comments, explored a wide range of topics and issue areas that impact transgender people's lives, such as basic needs, safety, health and health care, legal needs, community development, education, and other services.

The second section, comprised of 8 questions and room for additional comments, collected demographic data to help strengthen MTPC's intersectional approach and tailor efforts to the needs of the different communities it serves.

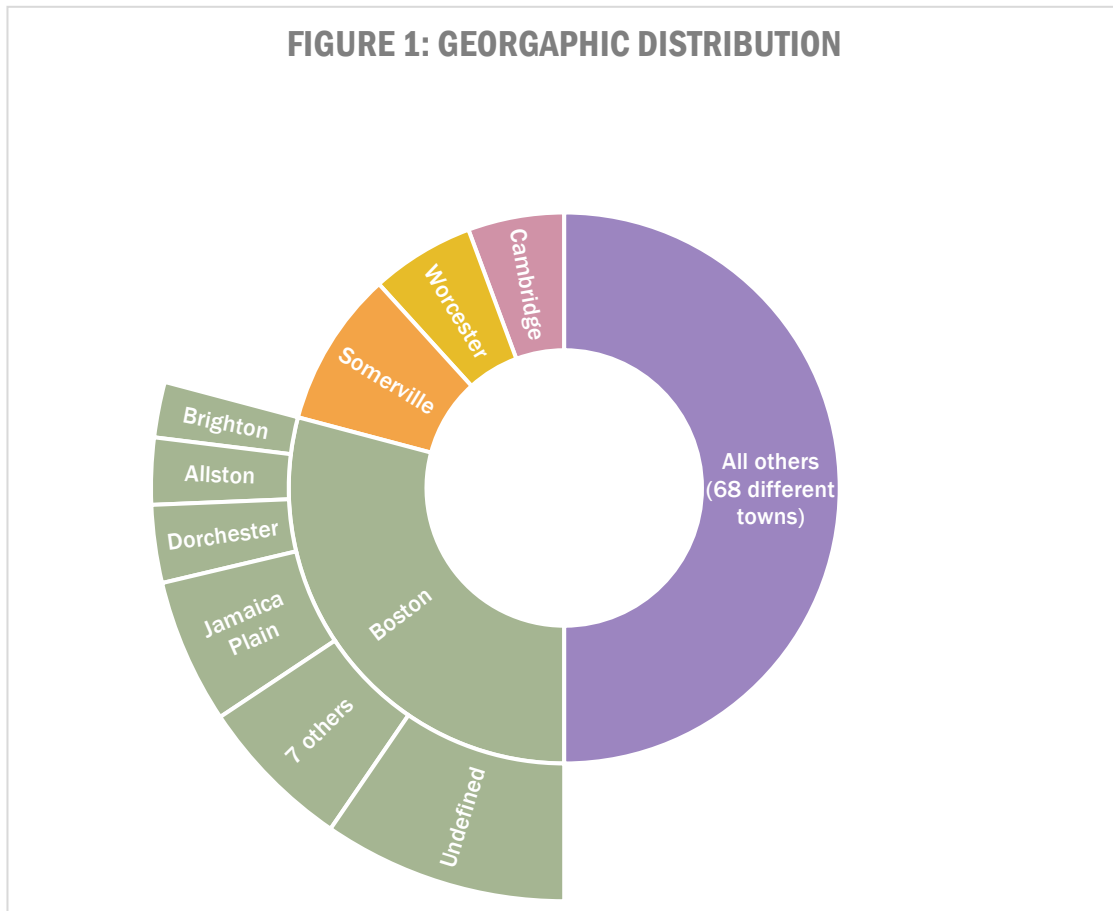
The second section was optional. 26 individuals chose not to provide their demographic information and are not reflected in the section on The W4LE Respondents (pp. 7-12).

The W4LE Respondents

This section provides an overview of the 313 respondents who consented to providing their demographic information. Not all demographic questions were answered by all of the 313 respondents, and this is reflected in the totals.

Location

Geographically, respondents placed themselves in 72 different towns or cities in Massachusetts¹. Significantly, half of all respondents (115 out of 230) came from only 4 locations – Boston (67), Somerville (21), Worcester (14), and Cambridge (13). Almost 30% of respondents lived in Boston. Out of 11 Boston neighborhoods specified, Jamaica Plain had the highest number at 13 respondents (Figure 1).

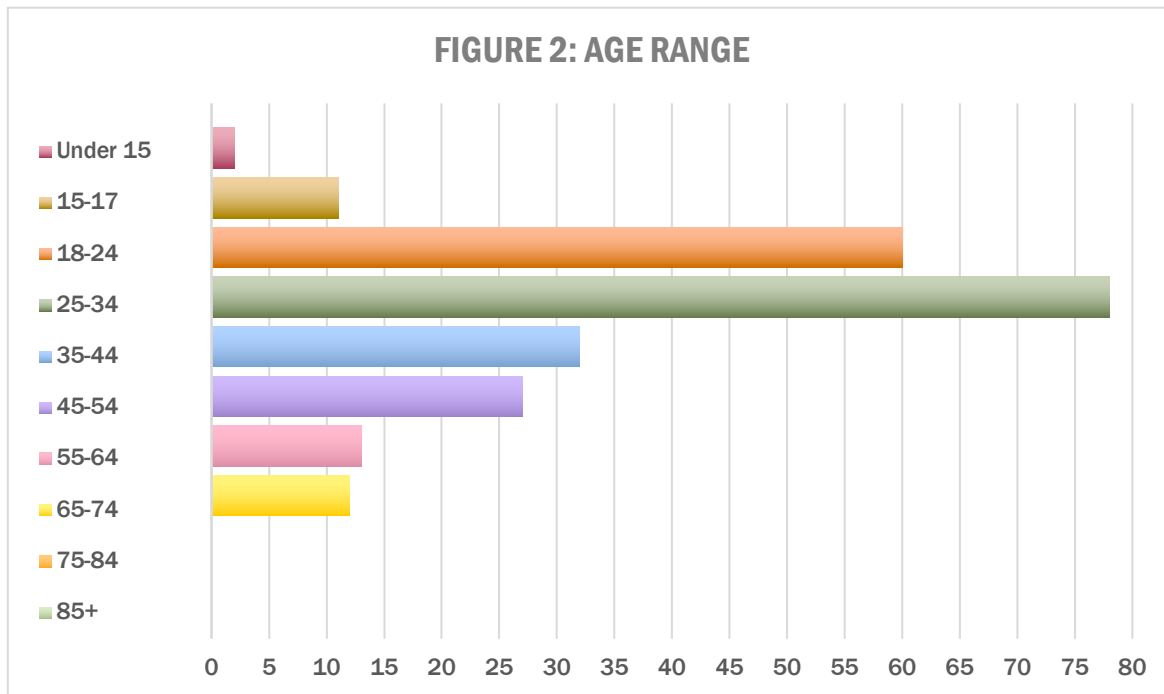


Note: 8 respondents were located in Bridgewater, 4 of whom disclosed that they were incarcerated at the time (with 1 individual naming Springfield as their hometown).

¹ 2 respondents who responded as living outside of the state of Massachusetts are not reflected in these numbers.

Age Range

More than half of the 245 respondents who shared their age (56%), were between 18 and 34 years old, with another fourth (24%) between the ages of 35 and 54. 13 individuals (5%) were under 18, with only 2 below the age of 15. Notably, no respondents were identified at 75 years old or above, and only a total of 35 individuals (14%) were between the ages of 55 and 74 years old (Figure 2).



Gender

The W4LE survey allowed respondents to write-in the terms they use to describe their genders rather than choose from a pre-selected list, which made for a beautiful cascade of terminology and self-descriptors. This does limit the survey's ability to make conclusive statements and analyze the data by gender breakdowns without making some, potentially inaccurate, assumptions. However, there are still some things we can learn about the survey's respondents from this question as well.

The vast majority of respondents did use variations of trans/transgender, nonbinary, gender nonconforming, and other associated terms to describe their genders. 16% (40 individuals) used only male/man or female/woman. However, it cannot be assumed that all 40 of these respondents are cisgender, and it is likely that there are those who live as a gender other than the own they were assigned at birth among them and choose not to use language associated with trans communities. Additionally, 4 of the 40 did specify that they

were cisgender, signaling that the term is beginning to become familiar to more than just trans people.

Gender and language used to describe it is becoming increasingly expansive. Among the 199 respondents (82%) who used language associated with trans communities, 117 (48%) used trans or transgender, 115 (46%) used terms such as nonbinary, agender, bigender, gender fluid, genderqueer, gender nonconforming, and so on, and 35 (14%) among them used both. 14 among those 35 identified as both nonbinary and trans masculine/trans men, while 4 identified as both nonbinary and trans feminine/trans women.

32 individuals (13%) described themselves as trans women, trans female, trans feminine, and/or transgender male-to-female, whereas 45 individuals (18%) described themselves as transgender men, trans masculine, trans male, and female-to-male, and 5 (2%) only used trans/transgender. 4 respondents (1.6%) can be described as questioning their gender (“Who knows. AFAB”, “trans questioning”, “unknown”, and “Non-binary or agender or 🧑”)

Many respondents used multiple terms to describe their gender, with some naming context as a deciding factor (e.g., “male, if I have to disclose for a medical reason, I say I am a male who is trans”). Among those who self-described themselves as non-binary, genderqueer and fluid/genderfluid were the two terms most commonly used. Others expressed additional specifications such as “boy-adjacent” or “femme-leaning”



Photo from Canva

Race and/or ethnicity

Similar to the gender question, the question on race and/or ethnicity was left open-ended. Based on what respondents shared here, it is relatively easier to group individuals.

| Race and/or Ethnicity | Respondents | % | with Multiracial ² |
|-----------------------------------|-------------|-------------|-------------------------------|
| White | 185 | 78% | 195 (85%) |
| Latinx/o/a | 11 | 5% | 16 (7%) |
| Black | 7 | 3% | 10 (4%) |
| Asian / Asian American | 6 | 3% | 10 (4%) |
| Native American / Native Hawaiian | 2 | <1% | 7 (3%) |
| Middle Eastern | 2 | <1% | 2 (<1%) |
| POC ³ | 1 | <1% | 3 (1%) |
| Multiracial / Mixed | 22 | 9% | x |
| Total | 236 | 100% | >100% |

Table 1: Respondents' Race and Ethnicity Numerically and in Percentages

Disability Status

112 of the respondents (33%) disclosed having a disability. That number may in fact be higher as 26 survey participants opted not to fill out the demographic portion and an additional 69 survey participants who did fill out the demographic portion, opted to skip this question.



Photo from The Gender Spectrum Collective

² This column represents how the numbers and percentages change, when multiracial/mixed individuals are counted amongst their monoracial peers. For example, the 5 Afro Latinx respondents were added to both the Latinx/o/a and the Black respondents.

³ This individual did not specify their race and/or ethnicity other than to indicate that they are a person of color (POC)

Families with Children

Respondents were asked both whether they have any children, as well as whether they are the parent or guardian of a gender expansive or gender creative child. Of the 244 who completed the demographic section and responded to these questions, 56 (23%) have children, including 21 (8.6%) who have at least one child who is gender expansive or gender creative.

Employment, Incarceration, and Student Status

Respondents were also asked to indicate whether they were employed, retired, currently students, incarcerated, and/or on disability. 184 (76%) indicated they had either full-time (138 or 57%), part-time (51 or 21%), or both full- and part-time (5 or 2%) employment. 19 respondents (8%) were unemployed, 8 (3%) were on disability, and 10 (4%) were retired. Among the unemployed, one respondent indicated that despite being “ruled disabled by the state,” they were being denied benefits, while another said that they were

currently not really working [because] of chronic illness, trying to apply for disability, occasional freelance or art commissions.



Photo from The Gender Spectrum Collective

Several respondents indicated that they were self-employed. One such respondent also shared that it was because

Since coming out I find it hard to get hired as a full-time employee even though I have a college degree, experience, and references.

Almost a quarter of the respondents (55 or 23%) were current students, with at least one indicating they were a part-time student. Additionally, 11 (4.5%) indicated they were incarcerated. One of the respondents who indicated they were incarcerated commented that they

can't get hired by [the Massachusetts Department of Corrections] in this facility, because I'm transgendered. I've been waiting over 4 years for a job, but they say we aren't hiring, or we have no job slots available, and hire others over me, who haven't been here as long as I have.

Basic Needs

At least half of all respondents identified (i) Employment, (ii) Housing stability and Homelessness, and (iii) Paying bills and Emergency funds, as among their top 3 concerns regarding basic needs, with (iv) Gender affirming resources (such as clothing, wigs, binders, makeup, haircut, etc.) trailing closely behind.

| | # | % |
|-----------------------------------------------|-----|--------|
| Employment | 211 | 63.36% |
| Housing stability/ Homelessness | 176 | 52.85% |
| Paying bills/ emergency funds | 166 | 49.85% |
| Gender affirming resources | 152 | 45.65% |
| Access to education/ educational resources | 105 | 31.53% |
| Food/groceries | 92 | 27.63% |

Table 2: Top 3 Basic Needs Concerns



Photo from The Gender Spectrum Collective

70 respondents provided additional comments, with over half (38) identifying **health care** as a major basic need priority. This included access to competent and gender-affirming health care, financial support, insurance coverage and navigation, mental health care, reproductive care and disability resources, and so on. Another 8 respondents named **community**, in the form of social and support groups and events, as a basic need.

4 respondents spoke to the impact of incarceration on their basic needs, such as **lack of privacy and space**, **access to educational resources**, and **access to gender affirming resources**. Other financial needs identified included transportation fare assistance, student loan debt repayment, and access to free or low-cost legal representation. Other basic needs identified included protection from violence, safe housing (including shelters), safe and affirming avenues through which to engage with politics and government, advocacy and assistance around name change processes, and understanding state laws.

MTPC's Role

| | # | % |
|----------------------------------------------|-----|-------|
| Advance policy and legislation | 234 | 71.12 |
| Provide services and resources | 203 | 61.7 |
| Provide information and referrals | 185 | 56.23 |
| Advance community development and engagement | 175 | 53.19 |
| Provide education and training | 150 | 45.59 |
| Provide employment or financial assistance | 135 | 41.03 |

Table 3: MTPC's Role Regarding Basic Needs

Respondents envision MTPC to play a multi-pronged role in meeting the basic needs of trans communities in Massachusetts, with (i) advancing policy and legislation, (ii) providing services and resources, and (iii) providing information and referrals selected most often.

Some of the policy and legislation respondents suggested MTPC should get involved in included the effort to lift the ban on rent control; access to sports for trans people, particularly trans women; and name change processes. Respondents who were incarcerated suggested offering re-entry programs; providing services and information for incarcerated trans people; education and advocacy with the **Massachusetts Department of Corrections to rectify a hostile culture** and attend to the safety of transgender people; and advocating for ending discrimination against incarcerated and formerly incarcerated individuals. Other services and resources, as well as referral suggestions included financial assistance for trans individuals returning to school; housing resources; “one stop” shops for referrals; a guide to transgender-informed healthcare providers; and legal support and advocacy connections. One respondent specifically named **Ropes & Gray LLP's ID project** as an example of initiatives to provide. Additional suggestions included networking opportunities to **break down isolation** and provide peer support and hosting a “**Big Sibling**” program for donating used or new binders, wigs, and other gender-affirming materials.

Safety

When it comes to safety, public harassment was by far respondents' top concern with 77.5% selecting it among their top 3 concerns. This was followed by suicide (60%), sexual violence (46.5%), and bullying (41%). Over a quarter of respondents (28%) were concerned about abuse by a family member or caregiver, while 17% identified partner abuse as concerning.

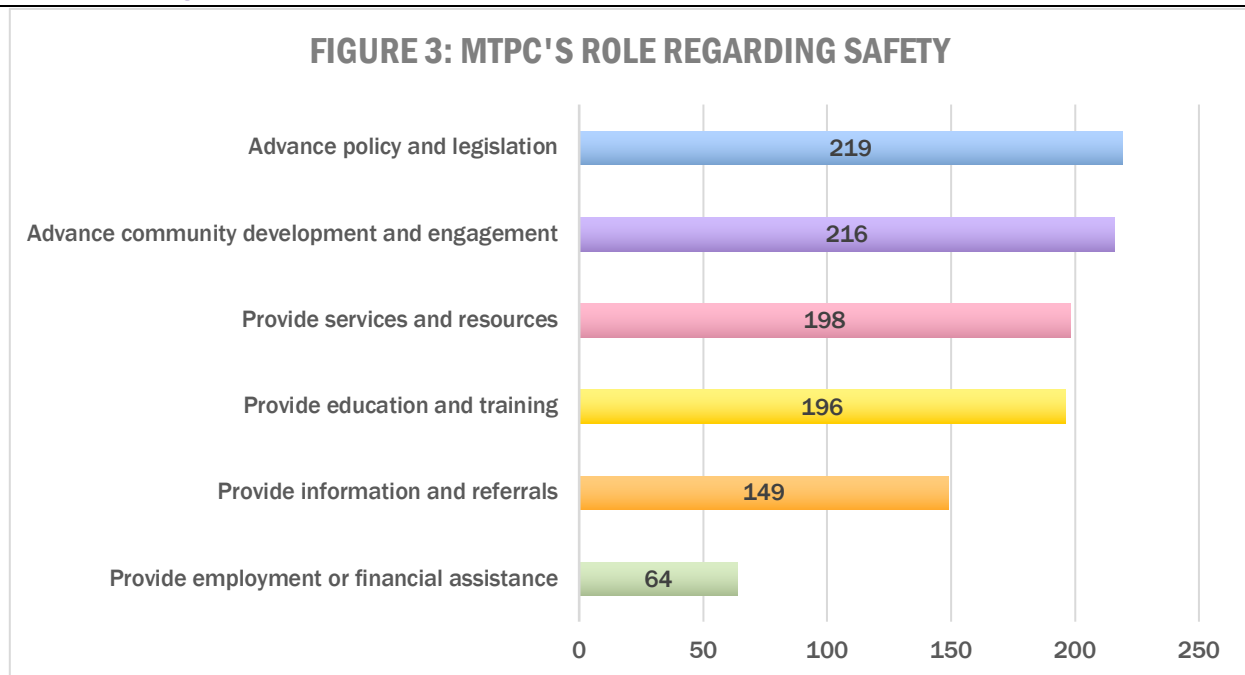
Some respondents went further to name specific forms (e.g., physical violence), contexts, or targets of violence as particularly concerning to them. **Workplace harassment was the most often repeated comment (6 comments), as well as violence by police and/or healthcare providers (5), and harassment and violence in prisons (3).** A person concerned with having to work in trans-hostile environments, also named “having to travel through those areas, and on public transportation” as accompanying safety issues. One respondent was particularly concerned with safety for trans youth as

child welfare, juvenile justice, police, schools, etc. marginalize and harm trans youth at a much higher rate than their cis peers. Trans children and youth in child welfare are NOT safe.

A few respondents also made references to the impact that **federal and political discourse, discrimination by public officials, legislative efforts, appointments of trans-hostile judges, and “the rise of fascism in the U.S.”** have had on their sense of safety. Commenters also ranged from those who believed themselves to be “lucky” in not experiencing harassment and violence to those who lived “in constant fear of public harassment and sexual assault.”

MTPC's Role

Figure 3 demonstrates respondents' desire for MTPC to address safety through a multitude of avenues. The top 4 modes – (i) advancing policy and legislation, (ii) advancing community development and engagement, (iii) providing services and resources, and (iv) providing education and training – were all selected by between 59 and 66% of respondents. 45% also selected providing information and referrals, while only 19% in comparison selected providing employment and financial assistance.



Although not the most selected option, suggestions around providing **education and training** showed up the most in additional comments respondents offered. Their comments pointed to the need to particularly target certain groups for education, such as **police, fire department, correction officers, and the Massachusetts Department of Corrections**. Additionally, one respondent pointed out that

Education and training to systems employees and admins is valuable, but they need ongoing coaching and improvement measures over time - not one-off sensitivity training (we know that doesn't work).

Two respondents pointed to the **need for alternative-to-the-police responses** to issues of safety. One was also concerned with police contributing to the lack of safety and suggested holding **classes for transgender people on how to stay safe when police are called**, while the other shared the following:

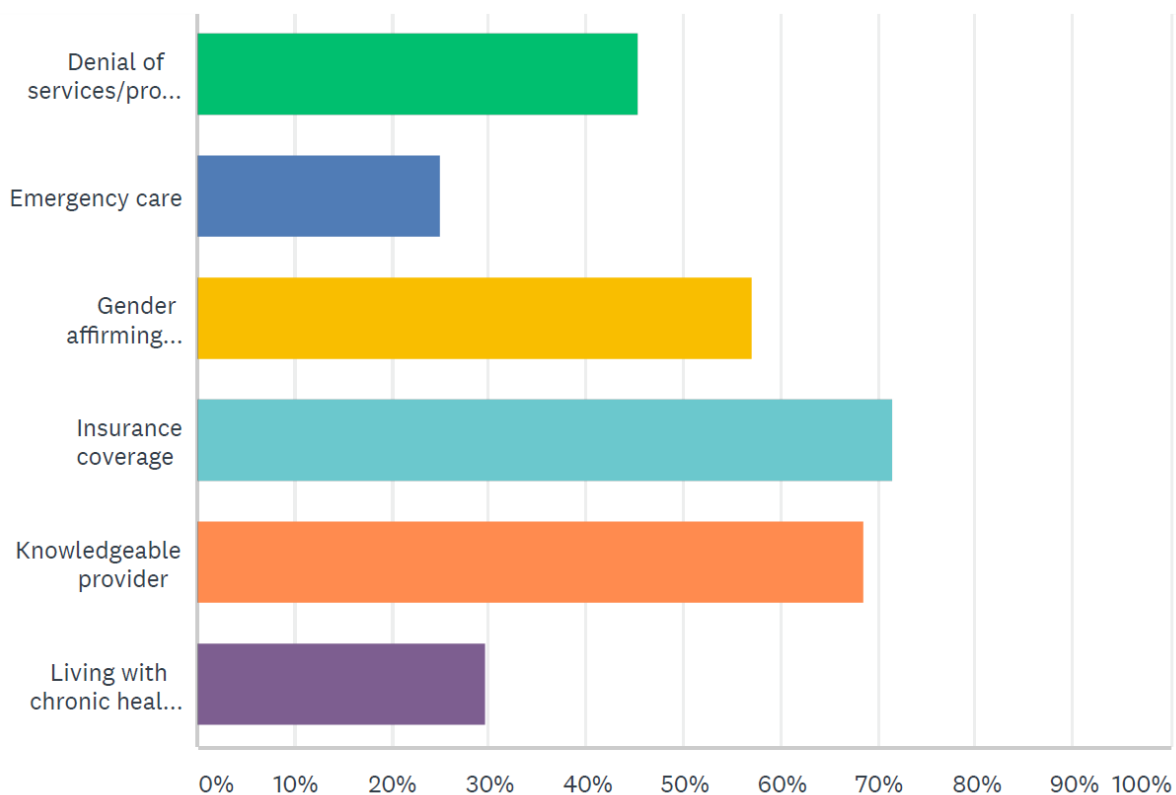
I was attacked in a hate crime last year. I wish a restorative justice option would have been available had I called the police. Instead, I chose not to report because I don't think that arrest or incarceration helps people become less angry.

Additionally, **access to safe housing** was mentioned 3 times with one comment particularly speaking to those escaping violence and one for formerly incarcerated individuals. Finally, a respondent pointed to the **importance of collecting transgender-inclusive and/or transgender-specific data when researching gender-based violence** for the purposes of education and outreach.

Health Needs

Health care concerns had already shown up repeatedly in respondents' comments to the questions on basic needs and safety, underlining the significance of access to trans-affirming and competent health care for transgender people in Massachusetts. When asked to identify their top 3 concerns in this area, insurance coverage (71.6%) and having a knowledgeable provider (68.7%) came up most. This was followed by access to gender affirming hormones and/or surgery (57%) and concern for the denial of services/procedures (45.5%). Almost 30% also selected living with chronic health issues, while a quarter of respondents chose emergency care.

FIGURE 4: RESPONDENTS' TOP HEALTH NEEDS



Respondents also specified the **need for knowledgeable providers and access to gender-affirming hormones and surgery for those who are incarcerated**. Several barriers named by respondents further exasperating affordability and access issues included:

- Restrictions on testosterone vial sizes
- Surgeons charging cosmetic fees when performing surgery
- Lack of information and research about non binary hormone options
- Sizeism and providers' unwillingness to perform surgery on transgender people based on their BMIs
- Providers not knowledgeable on procedures such as how to safely inject
- Lack of trans competent providers outside of Fenway Health
- Lack of trans health care providers
- Need for assistance with transportation to surgery and care afterwards for those living by themselves

Beyond gender-affirming care, many respondents also mentioned the need for trans competent (i) mental health care providers and services; (ii) dental care and services; (iii) specialists for chronic illness, eating disorder treatment, cancer, and so on; and (iv) emergency care providers, including competencies around caring for folks who have undergone gender-affirming surgery without having to explain their entire medical history. Others discussed wanting to be **treated with dignity** and not like an oddity, and shared **being misgendered at Fenway Health**.

MTPC's Role



Photo from [The Gender Spectrum Collective](#)

In the area of health care, respondents envision MTPC's primary roles to be about advancing relevant policy and legislation (69.5%) and providing information and referrals (65.4%). This is followed by the provision of education and training (59%), providing services and resources (50%), and advancing community development and engagement (45%). Some also see the need for MTPC to provide employment and financial assistance (20.5%).

Within prisons, respondents are seeking advocacy to lessen the time they have to wait for gender-affirming surgeries, such as by accessing medical evaluations outside MDOC and discern deficiencies with those providing mental health care. In terms of trans competent providers, **respondents are seeking information on trans competent providers outside of Fenway Health** and which providers or health centers to avoid, as well as a way for educators to connect with providers who need training. Additionally, respondents are looking for models of care and access, support groups for those who are HIV+ and/or mental health needs, and for transgender people of color to be represented and treated with dignity.

Access to Other Services

As it was already brought up by multiple respondents in several previous sections, it is likely not surprising that 87% and 73% of respondents selected mental health and counseling/support groups as among their top 3 concerns when asked about access to other services. Almost half (47.6%) also chose public accommodations, while non-health emergency (27.5%), child and youth services (27.5%), and elder services (19.4%) garnered less selections. This is more likely to be due to the **overwhelming need for mental health care and support groups** rather than the lack of need for these other services. This was reflected in several comments made by respondents alluding to all options provided being important concerns.

Respondents also mentioned the need for specific groups to be trans-inclusive, such as **grief and substance abuse groups**, as well as support groups for cisgender partners of trans people. As one respondent commented

Cis/trans relationships turn out to be hard, and losing relationships is a HUGE issue for trans people. I've seen so much loss and pain and grief in my relatively brief time in the community. Loss is a serious mental health issue. If you want to support trans people, help support their partners too, and let's all work to build and maintain strong relationships.

Additionally, there is a lack of trans-competent mental health services and support groups in prisons and outside of Boston. In speaking to the issue of lack of trans competent providers, one respondent suggested funding the education of transgender people to become providers themselves.



Photo from The Gender Spectrum Collective

Trans-specific support groups and opportunities to meet others appeared to be limited by age for both older adults (e.g., for those accessing medical transition at an older age, those in their late 30s, non-students) and youth (e.g., for children of transgender parents).

Other unmet needs included having services be **accessible to those with disabilities**, advocacy within the social security office, trans competent crisis supporters, trans competent career counselors, and family planning (such as adoption, fostering, fertility, parenting groups, and so on).

MTPC's Role

Other than providing employment or financial assistance, which only 16.4% of respondents envisioned to be way for MTPC to address access to other services, all other options appeared to be fairly equally selected, with 63.6% at the top for providing information and referrals, following closely by 63% for providing services and resources, 59.5% for advancing community development and engagement, 56% for advancing policy and legislation, and 55% for providing education and training. One respondent suggested MTPC provide a **mentorship program**, while another described leading a lonely life and not needing friends.

Legal Needs

78% of respondents selected name and gender marker changes on identity documents as among their top 3 legal needs. One respondent also shared that they are less concerned with the actual process of changing their identity documents as they are about how they would be treated after getting the “X” nonbinary marker on their drivers’ license. This fear is reflected in another respondent’s experience with **medical personnel refusing to acknowledge their legal gender status even when provided with valid documentation.**

Accessing legal help (66.3%) and concerns with police interaction (55.8%) were also important considerations. Specific needs named included disability law resources, legal help with accessing gender-affirming medical services, recourse for employment discrimination, and understanding their rights and how proposed/new laws and policy changes affect trans people. **Being profiled, targeted, and treated disrespectfully by police** also came up.

Almost a third of respondents are concerned about incarceration and court involvement, while voter registration (22%) and immigration (19%) appeared to be among less people’s most important needs. Concerns relating to families were also included in respondents’ comments, such as (i) protection from abuse, (ii) parental rights, and (iii) second-parent adoption. One respondent expressed concern that

if I ask for a divorce, my gender status will be used against me by the court even if my spouse does not feel that is to blame or a valid reason to deny me my rights to our resources and property.



Photo from Canva

MTPC's Role

According to 76% of respondents, MTPC would best serve them by advancing policy and legislation. Providing services and resources (58.5%), information and referrals (56%), and education and training (56%) were also deemed important roles for MTPC. 52% of respondents sought MTPC to advance community development and engagement, while far less (22.5%) believed providing employment or financial assistance was MTPC's role here.

One respondent shared that they found the name and gender marker change guide on MTPC's website to be "super helpful!" With the **Massachusetts name change process being "incredibly confusing and frustrating,"** one respondent believed legislation could simplify the process, while another suggested direct assistance to "help walk them through [the process] step by step." Respondents wanted to get connected to lawyers who are knowledgeable and trans competent around harassment, Title IX, discrimination in education, the workplace, and sports, civil suits, and second-parent adoption (including those who are willing to provide pro-bono assistance). A currently incarcerated person expressed a need for magazines and other literature **"so I can be an activist"** and **"help me get out of prison."**

Social Support

When asked specifically what their top 3 concerns were regarding social support, most respondents included connection to others with shared identities (71.5%) and connection to groups, programs, and organizations (67.5%). Specific identities and groups mentioned included **neurodivergent people, formerly incarcerated people, trans women, trans parents and families, those above 30, and support groups outside of Boston.**

Isolation concerned almost half of the respondents, while 43% wanted to connect to social justice movements and 42% sought peer and family support. Just over 30% also sought support with dating and relationships, with one respondent seeking help with working on stable relationships.



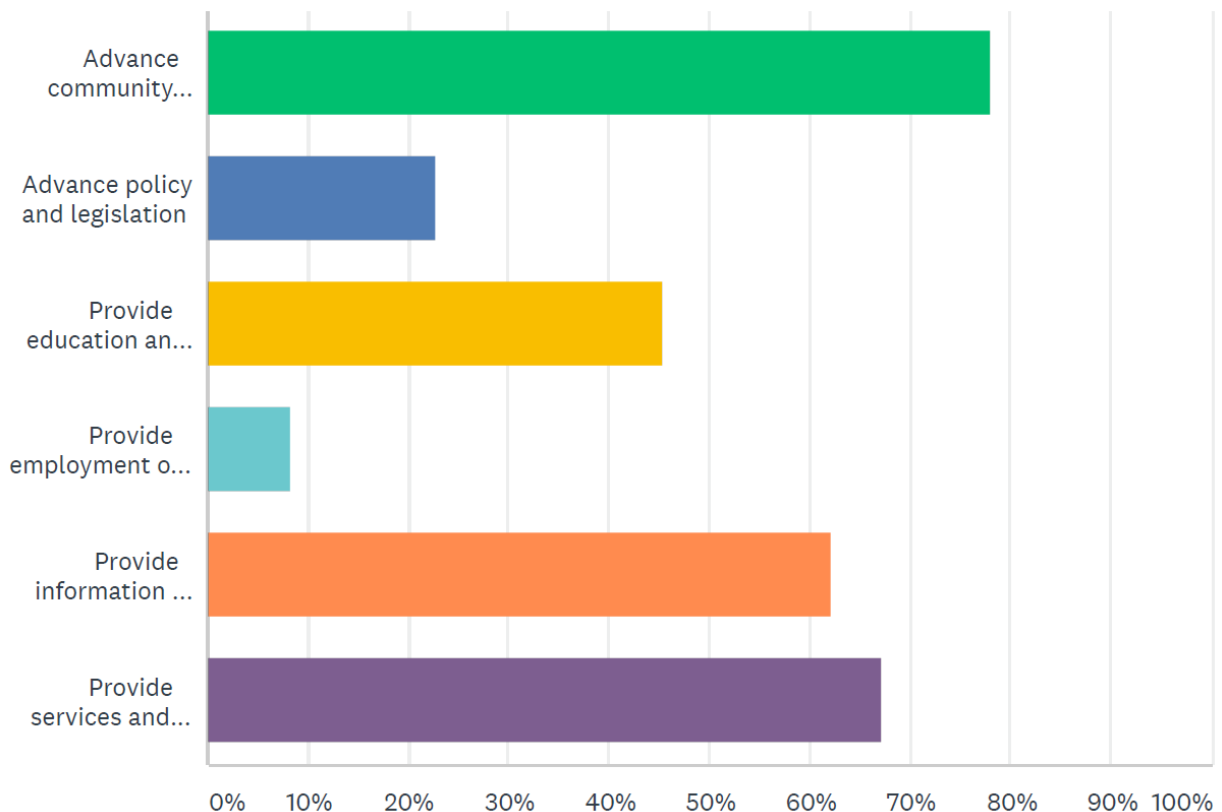
Photo from [The Gender Spectrum Collective](#)

MTPC's Role

Given the topic, it is perhaps unsurprising that 78% of respondents prioritized advancing community and engagement as MTPC's primary role in this area, followed by the provision of services and resources (67%) and information and referrals (62.1%), with close to half also including education and training in envisioning MTPC's role. Far less selected advancing policy and legislation (23%) and providing employment or financial assistance (8.3%).

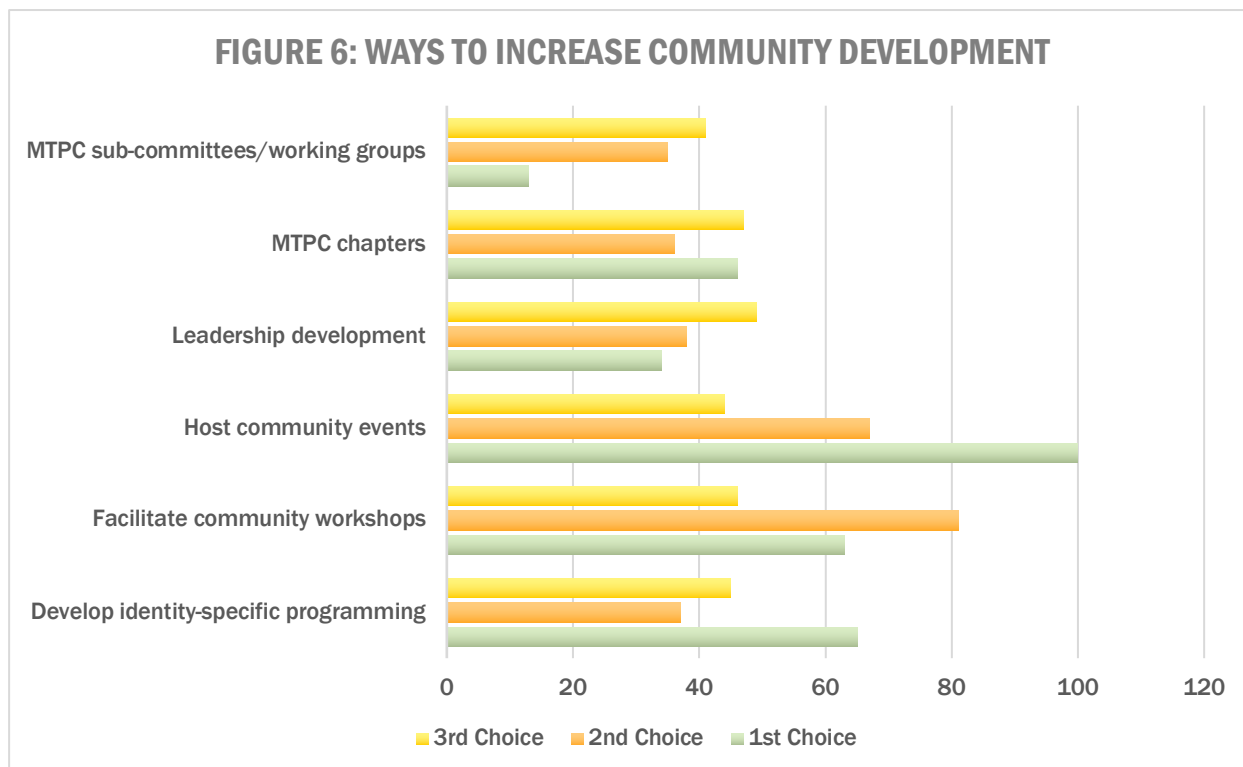
Even so, there were a couple of respondents who commented that they do not seek MTPC as their source of social support, one specifically stating that they **“don't see it being the place of a political coalition to meet my social needs.”**

FIGURE 5: RESPONDENTS' TOP SOCIAL SUPPORT NEEDS



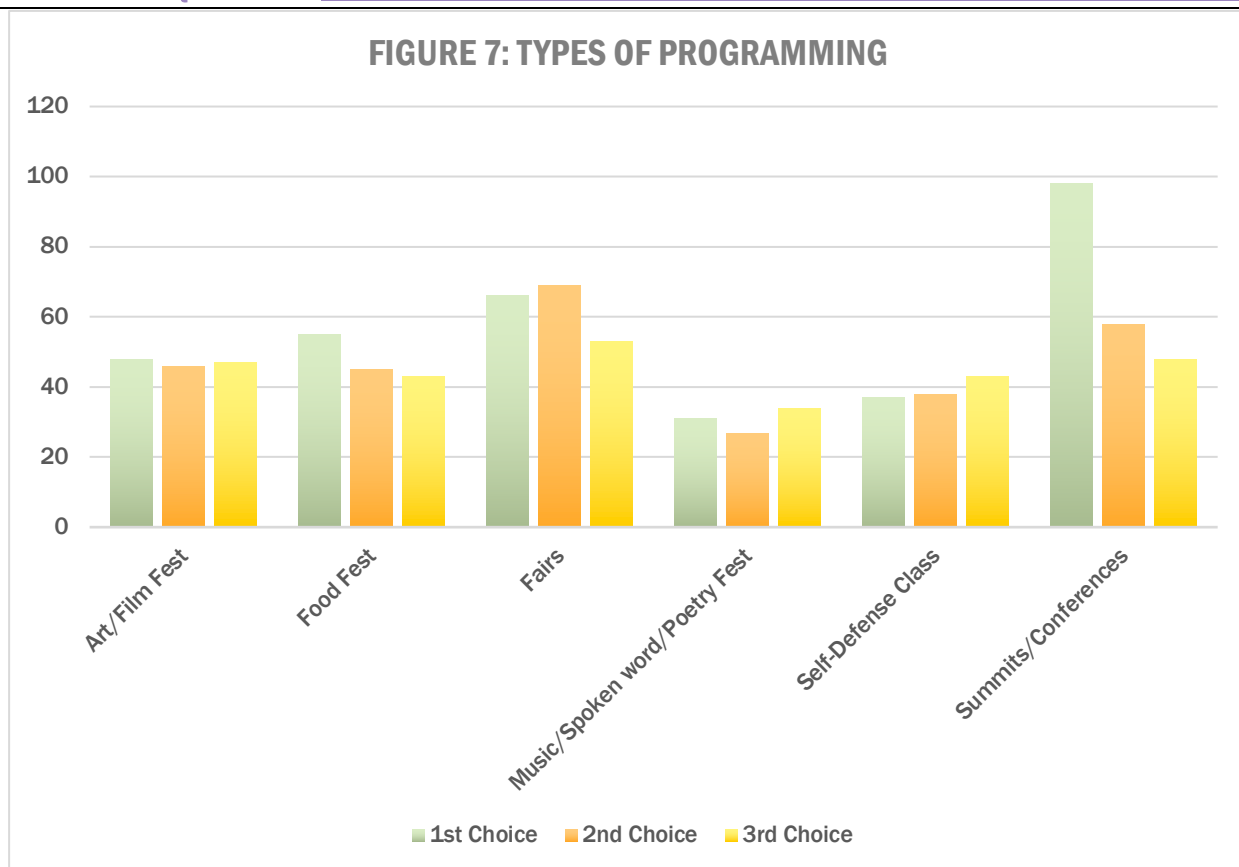
Community Development

76% of respondents identified hosting community events as their top choice for ways MTPC can increase community development, followed by facilitating community workshops (68%) and developing identity-specific programming (53%). Almost half (46%) wanted to see the re-instatement of MTPC chapters throughout Massachusetts, but only 32% wanted MTPC sub-committees and working groups throughout the state re-instated. Approximately 43% wanted MTPC to offer leadership development opportunities.



A couple of respondents commented that they found this question confusing to respond to, making it likely that others did as well, but chose not to articulate it.

Opportunities for peer-to-peer support were offered as suggestions, including **getting the community involved in transgender prisoner release and parole programs**, in order to have safe transitions back into the communities incarcerated individuals return to and connecting transgender people to others who are isolated or alone. A respondent mentioned that **correction officers often hold onto their mail for weeks at a time**, releasing them all at once. Specific outreach to incarcerated individuals through direct prison-based programming and identity-specific programming for people of color, Indigenous people, neurodivergent people, and disabled people were also suggested. A plea for **more community-building in Western Massachusetts** was also made.



Overwhelmingly, 73% of respondents chose having MTPC host summits and conferences in their area as among their top 3 choices for programming, with suggestions for identity-based summits such as ones focused towards trans people with disabilities. This was followed by fairs (health, jobs, etc.; 67%), food festivals, dinners, and brunches (51%), and art and film festivals (50.5%). Self-defense classes (42%) and music, spoken word, and poetry festivals (33%) were less popular choices, although one respondent expressed particular excitement for an LGBT-specific self-defense as the only one they are aware of is not affordable.

Other event suggestions included legal clinics, inside prison collaborations, lobbying and public policy advocacy events, events for families with trans and enby children and young adults, crafting events, a literary festival, and volunteering opportunities, such as food and supply drives. A plea for **intersectional programming** was also made.

Training and Support

Responding to what organizations, companies, businesses, schools, and so on need support or assistance to become trans-affirming, respondents provided both broad categories to focus on, as well as specific entities, with **educational institutions and healthcare providers and centers listed most often**. Other categories included businesses and industry, governmental departments and agencies, public accommodations and resources, LGBTQ organizations, and still others.

Education

Schools, public schools, and universities were each mentioned in general terms 8, 7, and 5 times each. Within the K-12 system, **Boston Public Schools (BPS)** were referenced 5 times, **Lynn Public Schools** twice, and **Framingham** and **Reading Public Schools** once each. Devastatingly, one respondent who student taught in BPS,

was shocked by how transphobic many of the people I worked with were. I gave up on being a teacher because of the transphobia I encountered in public school systems throughout MA.

Others referenced entire regions (“**every school system in the Metrowest area**” and “**all public schools on the Northshore of MA**”), arts focused centers, therapeutic day and residential schools outside of the Justice Resource Institute, as well as specific schools, such as **Lynn English High School**, **Brookline High School**, **Hampshire Regional School**, and **Boston Latin Academy** (twice). **City Year Boston** was also named by a respondent.

Within postsecondary education, two respondents brought up trade schools and another listed **South Shore Regional Vocational Technical School**. **Cape Cod Community College** and **Harvard University** were each named twice, in addition to the following institutions: **Holyoke Community College**, **Middlesex Community College**, **Bridgewater State University**, **Wellesley College**, **Clark University**, **New England School of Law**, **Suffolk University Law School**, **Massachusetts Institute of Technology**, **Simmons University**, **Olin College of Engineering**, **Boston University**, and **Northeastern University**. It was unclear whether the respondents were listing institutions they worked at or attended.

Others still mentioned social work programs, college administration, and job recruiters broadly, while one graduate student highlighted the lack of resources for graduate students as compared to undergraduate students.



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Healthcare

Similar to education, health care was also brought up a considerable amount as an area in need of training and support using both generalized descriptors, as well as by naming specific health care centers or types of providers. Doctors, hospitals, health care, health centers, and other similarly general terms were used over 20 times. Some referenced the need for **everyone to be a trans-competent provider, not just those who provide health care specifically to LGBTQ people**. A respondent who described health care as being their “biggest issue” remarked on the **lack of education that providers had about trans health**.

My doctor should be educated and know that I still need to go to a gynecologist even after [Hormone Replacement Therapy].

Beyond bringing up health care in general, respondents also pointed to specific areas of medicine, staff, and facilities. Emergency rooms, urgent care facilities, pharmacies, mental health facilities, and clinics were examples of the latter. One respondent highlighted the importance of **training front line staff, such as receptionists and intake clinicians**.

Endocrinologists, emergency responders, and dentists were also brought up, as were substance use care facilities.

Below is an alphabetical list of hospitals and health centers and systems specifically identified by respondents as needing training and support to become trans-affirming. The number in parentheses refers to how many times each was brought up:

- Arbour Counseling (1)
- Berkshire Health Systems (3)
- Berkshire Medical Center (1)
- Beth Israel Deaconess Medical Center (4)
- Beth Israel Plymouth (1)
- Beverly Hospital (1)
- Brigham & Women's Hospital (1)
- Cambridge Health Alliance (2)
- Cambridge Health Alliance Victims of Violence Program (1)
- Cambridge Hospital Psychiatric Ward and Emergency Room (1)
- Cape Cod Healthcare (2)
- Community Health Center of Cape Cod (1)
- DotHouse Health (1)
- Emerson Hospital (ER staff) (1)
- Fenway (9)
- Harbor Health (1)
- Lahey Health (1)
- South Bay Community Health (1)
- South Shore Hospital (1)
- Valley Medical Group (1)
- Worcester Family Health Center (1)

Business and the Workplace

Training and education for businesses are needed to assist them in providing safe public accommodations both for patronizing customers, as well as current and potential employees. Respondents mentioned small and local businesses (such as restaurants, banks, real estate agencies, retail businesses, grocery stores, gyms, entertainment and hospitality spaces), larger corporations (e.g., **Target**, **Trader Joe's**, **Spotify**, biotech and pharmaceutical companies, **Walgreens**, **Akamai Technologies**, **Walmart**, and the **Marriott**), non-profit organizations and the government as workplaces, labor unions, and temp agencies as needing educational resources. A number of respondents specifically identified the **need to train businesses and workplaces around non-binary identities and gender nonconforming people**, particularly in contexts with high interaction with the public, such as customer service jobs. As with most other examples, **nightlife venues also need training on how to provide safe public accommodations**. Other potential workplaces include the tech sector, businesses in the **Boston Public Market**, insurance companies, and school bus companies.



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Government and Public Services

Governmental entities, from federal to state to local, were identified as needing education and training, including politicians. **The Massachusetts Registry of Vehicles**, public libraries, public transportation (e.g., **MBTA** and **WRTA**), the **Department of Children and Families (DCF)**, and other child-serving systems were most often brought up, in addition to town clerks, adoption agencies contracted with DCF, family and probate court, housing authorities, and the **Massachusetts Department of Public Health**. One respondent said,

every org/agency I have to interact with as a trans parent because no one realizes that trans people can be adults with children and families.

The survey provided opportunities for individuals who are incarcerated or formerly incarcerated to amplify the discrimination, abuse, and violence transgender people experience within the prison system. Law enforcement was brought up several times, as was the court system and the **Massachusetts Department of Corrections**, as being in dire need of training and education. As had been mentioned earlier on, a respondent

highlighted the need to provide ongoing coaching/support, guiding policies, and improvement measures to evaluate any progress on an ongoing basis.

Other Services and Agencies

Non-governmental agencies were also presented as prime locations in need of education and training with homeless shelters showing up prominently among them. This included Y2Y, Bridge Over Troubled Waters, Rosie's Place, Pine Street Inn, Woods Mullen, Casa Esperanza, and St. Francis. Other organizations included the YMCA, YWCA, adoption agencies, and New England Treatment Access. One respondent said,

I don't feel comfortable naming specific organizations, but there are certainly non-profits (especially local policy-heavy organizations) who I simply won't get involved with because of their clear lack of diversity.

LGBTQ Organizations

LGBTQ organizations, including trans-specific ones, were not missing from the list of places respondents provided in this section. Both the **Boston Alliance of GLBT Youth (BAGLY)** and **GLASS** were brought up twice, in addition to the **Trans Club of New England (TCNE)**, **PFLAG**, the **Intersex Campaign for Equality**, the **Multicultural AIDS Coalition**, and the **Berkshire Stonewall Coalition**.

All Others

Along with LGBTQ specific organizations, other groups focused on civil rights and social justice that were listed included the **Urban League of Springfield**, **VISIONS, Inc.**, and **Living in Freedom Together, Inc.**

The remaining places offered could be said to provide physical, spiritual, and social development for those who are welcome and can participate fully. Some respondents brought up churches, communities of faith, and faith-based organizations such as **Berkshire Interfaith Organizing**. Others mentioned gyms, organized sports, the **Appalachian Mountain Club**, the **Massachusetts State Referee Committee**, and the **Massachusetts Interscholastic Athletic Association**. Other more social groups identified included gender-specific community choruses, such as the **Barbershop Harmony Society**, and the **Theater Offensive**.



Photo from The Gender Spectrum Collective

Beyond specific organizations, respondents also relayed the need to educate researchers and those in TV and media, as well as to focus on particularly under-served areas, such as Worcester, Lawrence, Hampshire, Holyoke, Fall River, and Lynn, among others.

Partnerships and Collaborations

Respondents suggestions for organizations and community groups for MTPC to work with more closely or build a relationship with were reflective of their responses to the rest of the survey. There was an emphasis again on working with educational institutions, healthcare centers and organizations, and governmental agencies and departments. Here respondents also shared additional organizations and groups not yet named, particularly local and national LGBTQ organizations, ostensibly to collaborate on advocacy and community building efforts.

LGBTQ and Other Identity-Based or Social Justice Organizations



Photo from [The Gender Spectrum Collective](#)

Among LGBTQ specific organizations respondents recommended, **Black & Pink**, **BAGLY/NAGLY**, and **Boston GLASS** were the most often repeated. These are organizations that focus on incarcerated queer and trans people, queer and trans youth, and queer and trans youth of color. Other oft-repeated organizations included **GLAD** (GLBTQ Legal Advocates and Defenders), **TCNE**, and **PFLAG**. **Hampshire Franklin PFLAG** and **Greater Boston PFLAG** were two chapters specifically mentioned, with a staff member of the latter expressing a desire to “**rebuild and foster our relationship with MTPC.**”

Other individual organizations, both local and national, mentioned included the **Transgender Emergency Fund**, the **Sylvia Rivera Law Project**, **Keshet**, **GLSEN**, **HRC**, **Worcester Pride** (particularly **Shades**), **ACLU**, **The Venture Out Project**, **Pride at Work**, **InterACT**, **SouthCoast LGBTQ Network**, **The Network/La Red**, **Berkshire Stonewall Community Center**, **WeThrive**, **Queer Muslims of Boston**, the **Massachusetts Commission on LGBTQ Youth**, and **Boston Area Trans Support (BATS)**. Some of these organizations focus on multiple marginalized individuals (e.g., **Queer Muslims of Boston**), while others might need to be better supported in their efforts to approach their work intersectionally. Referring to collaborating with **BATS**, for example, one respondent said,

so that it could be safe for POC to attend.

Respondents also expressed a desire for MTPC to partner with disability rights groups, groups catering to Latinx and other communities of color, immigrant rights groups and communities, and otherwise intersectionally-focused organizations, as well as activist, social justice, socialist, and queer liberation groups.

Health Care

Many respondents mentioned wanting to see MTPC work with health care providers and health centers across the state, including mental health and counseling services providers, pharmacies, recovery facilities, and health insurance companies and gatekeepers. A few specific centers mentioned included **Fenway Health**, **Boston Medical Center**, **Family Health Center Worcester**, **Harbor Health Services**, and **Riverside Mental Health Services**. One respondent also suggested working with **Thundermist Health Centers**, which although located in Rhode Island,

is a great trans resource for those near the [Rhode Island border] (especially Bristol County, MA) that many may not be aware of practically in their back yard, as opposed to having to travel to Boston.

Several respondents also brought up a number of organizations working specifically with people with HIV/AIDS, something that had not come up thus far. These included the **Boston Living Center**, **Victory Programs Mobile Prevention Team**, the **US Positive Women's Network**, the **Global Network of People Living with HIV/AIDS North America chapter**, and **Advocates**. There may particularly be an opportunity to collaborate with the latter as one respondent who suggested the organizations said,

We serve many diverse groups that have intersectionality with the trans experience, but our staff is not necessarily sensitive and aware of how to be helpful.

Education

Schools and school systems, from K-12 through colleges and universities, were included by several respondents as important partners for MTPC's work, with a particular ask to focus on teachers, faculty, and administrators. Several respondents suggested reaching out to campus-based LGBTQ groups as collaborators, such as **Simmons University's Trans and Nonbinary Collective**. In addition to working with institutions themselves, one respondent also suggested partnering with the **Massachusetts Department of Elementary and Secondary Education's Safe Schools Program for LGBTQ Students**.



Photos from [The Gender Spectrum Collective](#)

State, Local, and Non-Governmental Agencies

State and local departments that bridge this section with the previous two and suggested by respondents as important partners are the **Massachusetts Department of Education**, the **Department of Mental Health**, the **Division of Insurance**, and the **Boston Public Health Commission**. A number of other departments, agencies, and organizations mentioned attend to basic needs (e.g., food pantries, housing, homeless shelters, **Vida Urbana**) and employment concerns (e.g., Social Security, employment agencies, labor unions, the **Pioneer Valley Workers Center**, **Jobs with Justice**), as well as

Organizations to advance financial assistance and services for covering healthcare costs, food pantry services, and non-health related short-term emergencies).

Other public services and entities identified include the **Department of Youth Services**, public transportation, and libraries. Additionally, a few respondents are looking for MTPC to partner with local domestic violence and sexual assault agencies and organizations (e.g., **SafeLink**), and other community-based groups for survivors of homicide and sex work (e.g., **Living in Freedom Together, Inc.**). As MTPC gets involved in policy and advocacy efforts, city halls, city LGBTQ liaison offices, legislators, and political organizations such as the **Women's Political Caucus** were also listed by respondents.

Although in earlier sections of the survey, attention to elder care was sparse, a few respondents included aging services access points and organizations such as **Ethos** and **Elder Services of Worcester** as potential collaborators. Local community centers and city LGBTQ liaison offices would also be potential partners in hosting area-based events.

The Legal System

As evidenced by many of the respondents who shared about their experiences being incarcerated, there is a **need to find collaborators and partners to educate and train those within the legal system, as well as provide resources to and advocate for incarcerated and formerly incarcerated individuals**. Suggestions by respondents varied from abolitionists to police and police unions, which entails some discernment about MTPC's depth and width of relationship building in this area.

Other groups mentioned here included prisoners' legal services, **Greater Boston Legal Services**, the **Massachusetts Department of Corrections**, and a recent commission started in the prisons as referenced by one respondent. There is a need to work with community groups that support the transition out of the prison system and to assure that these groups are also trans competent. There is also an opportunity here to involve those seeking involvement in voluntary efforts to support peers, such as through **Black and Pink**.

All Others

A number of respondents are looking for support in educating and collaborating with their faith communities, such as the **United Methodist Church**, **Old Cambridge Baptist Church**, **Unitarian Universalists**, and **Berkshire Interfaith Organizing**. As one respondent put it, faith-based groups

can be a first line connection for highly rejecting families. Can also be a place for coalition building, open table support for community members, etc.

The only business respondents specifically named here was **Trader Joe's**. Respondents also emphasized **partnering with youth directly in their work, as well as seeking out collaborators in the realm of sports and athletics**. The creation of opportunities for peer support, outreach, and volunteerism was again brought up, as was opportunities to participate in advocacy efforts, such as through visible actions and demonstrations. Lastly, a respondent shared a vote of confidence with MTPC's efforts, stating

I feel like MTPC partners carefully when it makes sense to do so.

Conclusion

Increased visibility of trans populations in Massachusetts, nationally, and globally has led to variable impacts. It has ignited opportunities for connection and support, awareness raising and education, as well as policy change and advocacy. However, trans communities still face considerable levels of violence, engagement with police and prisons, discrimination, unemployment, hostility, and other manifestations of oppression. The survey demonstrates that **every administrative system and institution in the state - from education to health care, government to faith-based institutions - is somehow implicated in the reproduction of or resistance to this oppression**. MTPC is in a unique position to support the ongoing advocacy for and with trans communities in the effort to reform or reconstruct these systems and institutions through its mission, values, work, and collaborations.

Beyond functioning as a call to action, this report also highlights the **deep resilience and commitment to community** many within trans communities hold. Dozens of respondents took the opportunity at the end of the survey to (i) thank MTPC for all the work it has done, is continuing to do, and for eliciting their input in directing the future of that work; and (ii) to reiterate a strongly felt desire to connect with others, to support and promote MTPC's work, and to offer up their skills, resources, and time towards that end.



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Keep up the good work! Still a need for what you have done and are doing so well!

– survey respondent

Working for Lived Equity

2019 Community Needs Assessment Report

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