



Collaborating to Serve Trans Students

Trans, trans, and transgender are meant to describe a diverse and complex set of experiences and identities across the spectrum of gender identity and gender expression.*

GOALS

1. Integrate existing campus and community medical and mental health services and wellness infrastructure to support trans inclusive care
2. Prepare medical and mental health providers to work with students across the gender spectrum
3. Align services at UHS with the World Professional Association for Transgender Health Standards of Care v7 which provides a framework for gender non-conformity and trans inclusive care

BACKGROUND

1. Gaps exist in insurance coverage for medical services for gender affirming hormone initiation/continuation, supportive mental health care and access to letters of referral for hormones
2. A limited number of medical and mental health providers exist in the Madison area who are trained and competent in providing trans inclusive health care
3. Queer Emerging Leaders Program (QUELP) feedback (Spring 2013) found UHS was inconsistent in use of preferred names and fell short of providing a positive environment for trans health care

IMPROVEMENTS

LGBT Campus Center

Division of Student Life

- Gender Identity/Expression 101 training
- Trans trainings for UHS staff
- Preferred name system
- Social transition resources (e.g., map of all-gender restrooms on campus)
- Gender Explorers discussion group

Trans Inclusive Health Care

Mental Health Services

- Trans-affirming training for all staff
- Advanced training for identified staff to provide supportive counseling and author letters of referral for hormones
- Process for writing letters of referral for hormones (Gender Identity Consultations)
- Care documents, e.g., sample letters, hormone information, electronic health record visit templates

Primary Care Medical Services

- "Trans 101" training for all staff
- Identified medical providers trained in medical assessment and in prescribing gender confirming hormones
- Informed consent process for feminizing/masculinizing hormones

OUTCOMES

1. >30 Gender Identity Consultation appointments (>15 students served) in Mental Health (Fall 2012–Spring 2015)
2. >12 letters of referral for hormones written
3. >30 individual students seen in Primary Care for specific trans related health care needs
4. Improvements noted by 2014 QUELP feedback regarding UHS use of preferred names and a more positive environment for trans health care

ONGOING AND FUTURE IMPROVEMENTS

1. Include trans training in orientation of trainees and new staff
2. Make relevant care documents available on UHS website and intranet
3. Continually update trans health care documents as terminology and guidelines evolve

Relevant Guidelines and Standards used in this improvement project are available in a handout

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