2021

cincyTEA

survey

report

results from the first transgender and non-binary needs assessment conducted in the greater cincinnati area

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Survey Instrument

Appendix 14.1

Collaborators and Funders

The Transgender Advocacy Council (TAC)

TAC is incorporated in the state of Ohio and has 501(c)(3) status. TAC formed to act as an umbrella organization supporting transgender individuals, as well as extant grassroots support organizations, in the greater Cincinnati area in the areas of policy advocacy, direct services, outreach to encourage culture change, community organizing, and other key strategies.

The Cincinnati Project (TCP) at the University of Cincinnati (UC)

The Cincinnati Project is a research initiative housed in the College of Arts and Sciences. Faculty formed The Cincinnati Project to equitably partner with local organizations and to translate academic work into action that improves people's lives in Cincinnati. The network of The Cincinnati Project harnesses the resources of University of Cincinnati faculty and the local knowledge and experience of community members to conduct research that will directly benefit marginalized people in Cincinnati.

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Chapter 1. Executive Summary

The Cincinnati Transgender Essentials Assessment (CincyTEA) Survey was a collaborative project developed between graduate student researchers at the University of Cincinnati and the Transgender Advocacy Council (TAC). The Cincinnati Project at the University of Cincinnati and TAC financially supported the project. The needs assessment tool for this study gathered demographic and experiential data on transgender and non-binary people in the greater Cincinnati area. "Transgender" is an umbrella term that describes people whose gender identity does not align with their sex of assignment at birth. "Non-binary" is also an umbrella term describing gender identities outside of binary gender (e.g., does not identify as a man or woman). Some, but not all, non-binary people also identify as transgender.

KEY FINDINGS

Gender Identity

- 82.8% of respondents identified as transgender, with 51% of those people also self-identifying as non-binary.
- 17.8% of participants identified as non-binary but not transgender.

Race and Ethnicity

- 70% of respondents identified as White, 11.7% did not answer, 7.8% self-identified as multiracial, 2.8% as Black or African American, and 2.8% as Latinx or Hispanic.

Age

- Respondents were 18 to 68 years old.
- The majority (68.3%) were between 20 to 40 years old, with an average age of 34.

Geography and Housing

- 58.9% of respondents lived in Hamilton County (where the city of Cincinnati is located), 8.3% in Warren County (OH), 7.8% in Clermont County (OH), 6.7% in Butler County (OH), 5.6% in Kenton County (KY), and 13.3% in another county.
- 40.3% of respondents were renters, and 21.5% were homeowners. 11% said they lived with their family, while 7.7% said someone else pays for their housing. In addition, 1.1% of people lived in university housing, 1.7% at a shelter or group home, and 0.6% said they lived on the street, in a car, or in an abandoned building.
- 2.8% of people reported being evicted in the last year.
- In addition, 5% of people experienced homelessness in the previous year.

Household Income

- 7.2% of respondents reported having no steady income.

- 25.5% of people said they had no savings, 11.7% said they had less than $1,000 in savings, and 55.6% reported having less than $10K in savings.
- 9.4% of respondents indicated that more than half of their income goes to paying their rent or mortgage.

Educational Attainment

- 53.3% of respondents had completed a bachelor's degree or higher; 37.2% of people had completed an associate degree or less (e.g., technical school, some college, high school).

Discrimination

- All participants experienced significant discrimination levels over their entire lifespan and the past year.

Health

- 80.4% of folks were insured, with 60.6% reporting having insurance through an employer.
- 16.9% of people were on Medicaid.
- 5.5% of folks were uninsured.
- Only 42% of respondents indicated that they had a primary care physician.
- 64.4% of people said they delayed or avoided care in their lifetime.

Policy

- More than 80% of participants who answered this question ranked the policy issues of "employment discrimination" (79.8%), "transition-related health insurance" (84.3%), and "access to trans sensitive healthcare" (80.6%) as very important.

Chapter 2. Introduction

A 2015 survey on the experiences of Ohio's transgender residents found that 26% of respondents in Ohio were living in poverty. In addition, 34% also reported being fired or experiencing some form of workplace mistreatment related to their gender identity or expression.[1] According to this study, Ohio's trans residents reported discrimination in education, housing, police interactions, and health. Local context matters, however, as laws and services vary significantly from city to city within the state of Ohio.

At the national level, trans and gender non-conforming individuals experience significantly higher poverty rates, health disparities, unemployment, and houselessness.[2] For instance, the National Transgender Discrimination Survey found that 63% of participants reported experiencing a serious act of discrimination due to gender bias. Such incidents included but were not limited to eviction, physical and sexual assault, denial of medical services, homelessness, or incarceration.[3]

Cincinnati, Ohio, has some of the country's most LGBTQ-inclusive nondiscrimination laws. Despite this, there is very little data on whether these laws and other services in the city meet the needs of Cincinnati's transgender and gender non-conforming residents. Additionally, legal equality does not always translate into lived equality. Obtaining a snapshot of the experiences of trans and non-binary people in the Greater Cincinnati area is thus imperative to understand the lived experiences of these populations.

The Transgender Advocacy Council is interested in establishing a program to give micro-grants to transgender and non-binary people in need in the greater Cincinnati area. However, to determine what specific help local folks need, TAC had to know more about the demographic makeup of these populations and their life experiences. The Cincinnati Transgender Essentials Assessment 2021 (CincyTEA 2021) was thus developed through collaboration between the Transgender Advocacy Council (TAC) and a research team of graduate students from the University of Cincinnati's Department of Sociology (UC Sociology) funded by The Cincinnati Project. This collaboration resulted in developing a survey to assess the general needs (e.g., health, transportation, etc.) of the transgender community in the greater Cincinnati metro area.

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1 National Center for Transgender Equality, *2015 US Transgender Survey: Ohio State Report*, (Washington, DC: National Center for Transgender Equality, 2017), http://www.transequality.org/sites/default/files/docs/usts/USTSOHStateReport%281017%29.pdf.

2 Elijah A. Edelmen et al., *Access Denied: Washington, DC Trans Needs Assessment Report* (Washington, DC: DC Trans Coalition, 2015), https://dctranscoalition.files.wordpress.com/2015/11/dctc-access-denied-final.pdf.

3 Jaime M. Grant et al., *Injustice at Every Turn: A Report of the National Transgender Discrimination Survey*, (Washington, DC: National Center for Transgender Equality and National Gay and Lesbian Task Force, 2011), https://www.transequality.org/sites/default/files/docs/resources/NTDS_Report.pdf.

Chapter 3. Methods

An initial draft of the study protocol was created in April 2021 and sent to all partner organizations (TAC and TCP) for approval. The final version was sent to UC's Institutional Review Board (IRB) for approval in June 2021. Once IRB approval was received, the CincyTEA research team began research in July 2021.

3.1 Research Design

This project is the first to study transgender and non-binary people's experiences in the greater Cincinnati area. The goal of the project was to collect basic demographic and experiential information. The decision to use an online survey was both convenient and a way to be responsive to the ongoing COVID-19 pandemic. The research team designed a brief survey that participants could complete in 5 to 15 minutes using a convenience sampling design. Non-binary identities were included as a research demographic because some non-binary people also identify as transgender. The survey was fielded from July 10, 2021, to October 16, 2021.

3.2 Survey Instrument

The CincyTEA survey was modeled on other transgender population surveys, like the 2015 US Transgender Survey (USTS)[4] and the Washington, DC Trans Needs Assessment Report.[5] Regional relevance was established in The CincyTEA survey by adapting questions from the 2021 Community Health Needs Assessment for the Greater Cincinnati/Dayton region.[6] In addition, the CincyTEA survey included a psychometrically-validated measure of discrimination experiences among trans people, including the complete set of questions from the Trans Discrimination Scale: TDS-21.[7] The team, which included UC Sociology students and TAC members, agreed upon all survey questions. The survey underwent several rounds of revision and alteration over a few months. TAC also paid a local Black trans woman well known in the community to review the study because the research team lacked racial diversity regarding Blackness. In addition, the research team and TAC wanted to ensure the tool was responsive to and respectful of, Black transgender and non-binary identities and experience.

The final survey consisted of 62 questions. Chapter 14.1 contains the complete list of questions. These questions covered 8 domains:

1. Screening questions (to ensure only adults - 18 years of age or older - who considered themselves transgender or non-binary and lived in the Greater Cincinnati area, determined by county residence, would be able to complete the survey)

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4 Sandy E. James et al., *The Report of the 2015 US Transgender Survey,* (Washington, DC: National Center or Transgender Equality, 2016, https://transequality.org/sites/default/files/docs/usts/USTS-Full-Report-Dec17.pdf .

5 Elijah A. Edelmen et al., *Access Denied: Washington, DC Trans Needs Assessment Report* (Washington, DC: DC Trans Coalition, 2015), https://dctranscoalition.files.wordpress.com/2015/11/dctc-access-denied-final.pdf.

6 Ashley Auciello, *2021 Community Health Needs Assessment Brings Together Healthcare, Public Health* (Cincinnati: The Health Collaborative, 2022), accessed April 17, 2022, https://healthcollab.org/2021-community-health-needs-assessment/.

7 Laurel B. Watson et al., "The Development and Psychometric Evaluation of the Trans Discrimination Scale: TDS-21." *Journal of Counseling Psychology* 66, no.1 (2018):14–29.

2. Key demographics (gender identity, race/ethnicity, sexual orientation, relationship status, health/dental insurance status, length of time living in the Cincinnati area, and zip code)
3. Housing and Transportation
4. Income
5. Experiences of discrimination (Trans Discrimination Scale: TDS-21) (See Chapter 14.2)
6. Health status
7. Health services utilization
8. Policy priorities

3.3 Ethical Considerations

The research team ensured that questions did not reinforce the structural stigmatization of transgender and non-binary people. Additionally, the research team (comprised of all white people, save one South Asian person) took seriously the challenge of recruiting racial and ethnic minorities to participate in the survey. Due to financial constraints and a lack of multi-lingual research staff, no survey translations were made available for participants with limited English proficiency. Confidentiality was of paramount concern for this project. All survey data were scrubbed of identifying information and stored securely in a password-protected Qualtrics database that required authentication through the University of Cincinnati's dual authentication system. The project was approved by the University of Cincinnati Institutional Review Board (Study ID: 2019-1388).

3.4 Sampling & Recruitment

The CincyTEA sampled from the population of transgender and non-binary individuals in the Cincinnati metro area (Image 3.1). The study did not use a probabilistic sampling design. Our goal was to sample 100 participants from diverse racial, age, and socio-economic backgrounds.
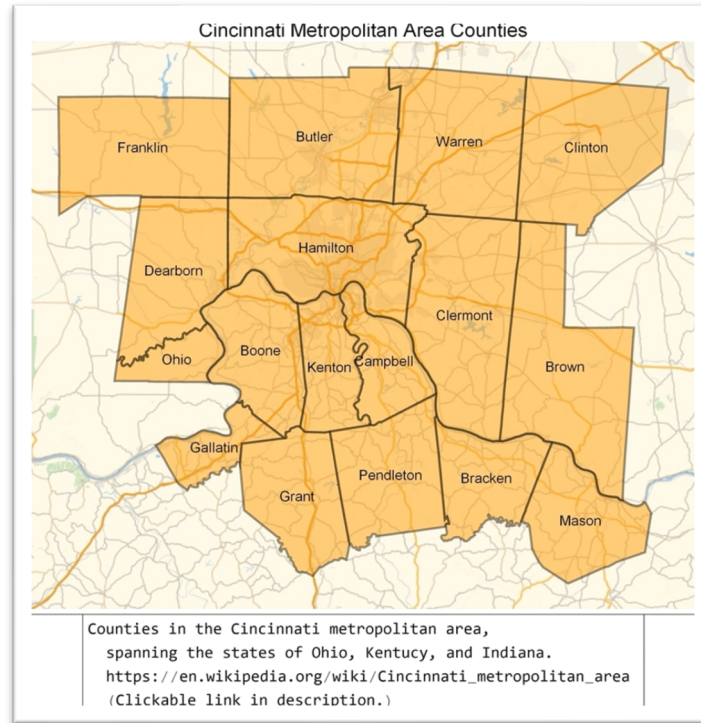
Image 3.1: Cincinnati metro area.

Digital and physical advertisements (Images 3.2, 3.3, and 3.4) were used to recruit participants. They provided access to the online survey via a URL. The CincyTEA research team worked with TAC and other community members to establish a list of businesses and public places to distribute physical flyers. Team members also attended queer and trans events and disseminated flyers. Physical flyers were displayed in health clinics that routinely offered trans-affirming healthcare and local LGBTQ+-focused social service organizations. Digital flyers were distributed online via Instagram, Facebook, and Twitter by the CincyTEA research team, TAC, and social media influencers in Cincinnati's transgender and non-binary communities.

Image 3.2: Facebook advertisement.

Image 3.3: Instagram advertisement.

Image 3.4: Physical advertisement (postcard and 11 x 8.5 flyers).

Survey participation was incentivized with an opportunity to win one of five $100 Target gift cards. TAC paid for these incentives. When the data collection period concluded, these gift cards were raffled off to individuals who completed the survey. Personally identifiable information for the raffle was collected separately from the survey data. Participants were also given the option to opt-in to receiving future e-mails from TAC to support advocacy efforts in the region.

Chapter 4. Results Organizational Overview

Data analysis was conducted using Qualtrics reporting software and RStudio Version 2021.09.0. The recruitment goal of 100 participants was exceeded, as 192 surveys were completed by participants. Of the 192, 12 were discovered as duplicates, leaving the final number of surveys at 180. The results are broken into the following chapters (Chapters 5-10) by overarching categories listed below:

- Chapter 5. Participant Demographics
- Chapter 6. Economic Profile
- Chapter 7. Education Profile
- Chapter 8. Discrimination
- Chapter 9. Health Profile
- Chapter 10. Policy

The bulk of the analysis consists of descriptive statical reporting and is given in percentages when possible. However, a few chapters deviate from this reporting mechanism. For example, most of the analysis in Chapter 9 Health Profile is presented in response counts due to the low number of respondents who answered every question in that section. Additionally, Chapter 8 Discrimination consists of questions taken directly from the Trans Discrimination Scale: TDS-21(Watson et al. 2018).[8] Therefore, the analysis deviates from the rest of the report's analysis, showing the statistical significance of discrimination levels reported by survey participants.

Chapter 5. Demographics

Participants were asked several common demographic questions, indicated in Table 5.1 below, which included the following topics: gender, race and ethnicity, age, and time lived in the Cincinnati metro area.

Table 5.1 Participant demographics.

Demographic Variables	n	%
Transgender		
Yes	149	82.8%
No	32	17.8%
Non-binary		
Yes	93	51.7%
No	88	48.9%
Race/Ethnicity		
American Indian or Alaska Native	1	0.6%
Multiracial	14	7.8%

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8 Ibid.

Arab or Middle Eastern	2	1.1%
Asian	3	1.7%
Black or African American	5	2.8%
Hispanic or Latinx	5	2.8%
White or Caucasian	126	70.0%
Another race	1	0.6%
Prefer not to answer	3	1.7%
Missing	21	11.7%
Age		
< 20	7	3.8%
20-29	85	47.2%
30-39	38	21.1%
40-49	24	13.3%
50-59	17	9.4%
60-69	7	3.9%
Missing	3	1.7%
Time lived in Cincinnati		
Less than 6 months	6	3.3%
6 months to a year	4	2.2%
1-2 years	10	5.6%
3 or more years	135	75.0%
Prefer not to answer	3	1.7%
Missing	23	12.8%

5.1 Gender Identity

The survey consisted of three gender identity questions. Two of the questions ("Do you consider yourself transgender?" and "Do you consider yourself non-binary?") were used as screening questions. Participants were required to answer yes or no to each of these questions. If they did not answer yes to at least one out of the two of these questions, they could not participate in the survey. The third gender identity question was not a screening question and instead offered additional gender options and a select all that apply answering mode. The two screening questions show that most survey participants are transgender (82.8%), with 51% of trans people also identifying as non-binary. Only 17.8% of participants indicated they are non-binary but not transgender. When offered additional gender categories to choose from, participants' genders varied (Figure 5.1).

Figure 5.1 Participants' genders beyond screening questions.
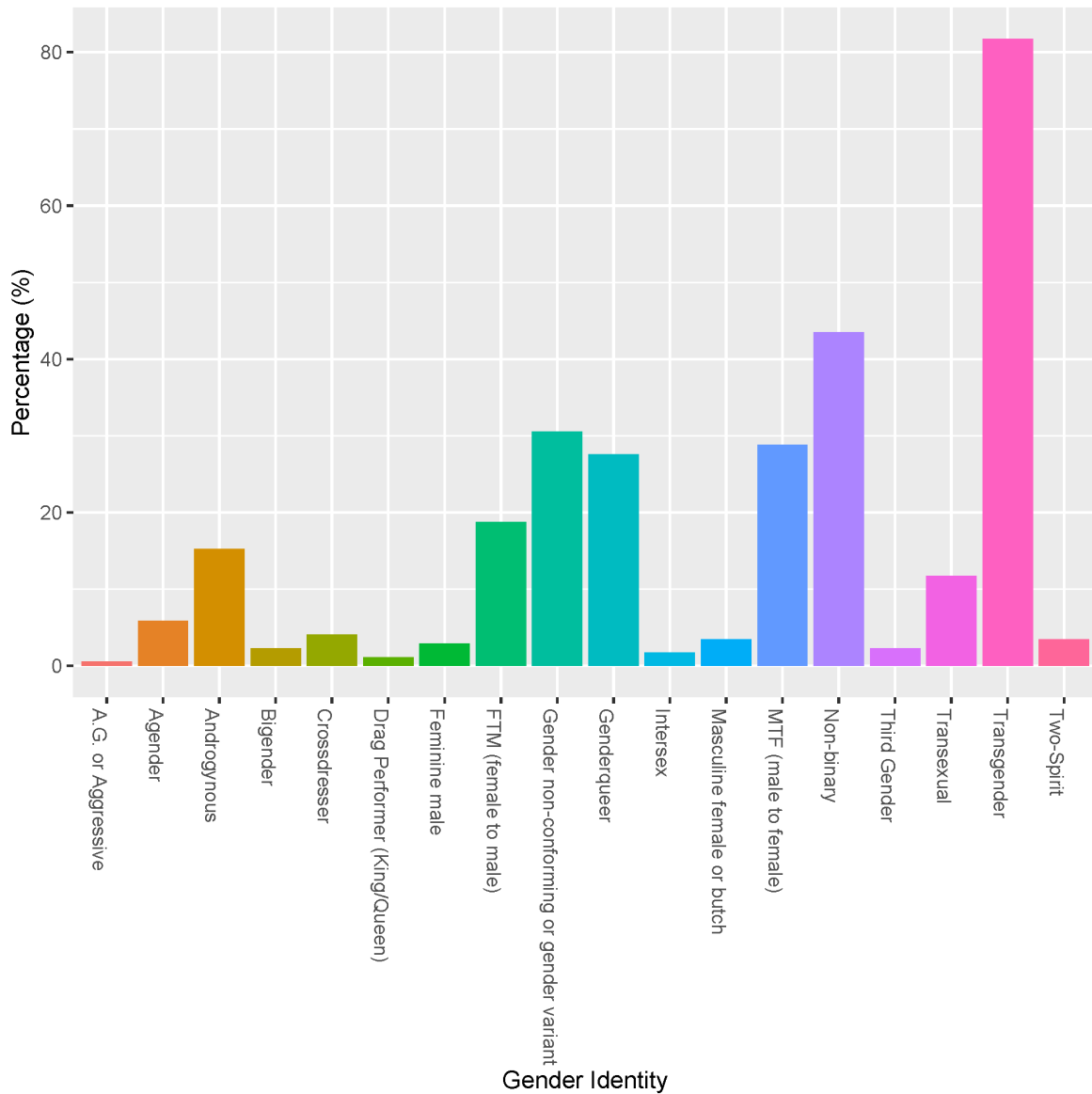
Although many participants still indicated they are transgender and/or non-binary, they also indicated that their gender is more expansive. For example, 31% of participants identified as gender non-conforming or gender variant, 29% as MTF (male to female), and 28% as genderqueer. Additionally, 15% and 19% of participants indicated they are androgynous or FTM (female-to-male), respectively. The diversity in gender identity is unsurprising, as transgender and non-binary are often used as umbrella gender categories.[9] Often, trans and/or non-binary individuals' gender identities are more complex than just those gender identity categories.[10]

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9 "Transgender FAQ," GLAAD, accessed May 25, 2022,

https://www.glaad.org/transgender/transfaq?gclid=CjwKCAjw1ICZBhAzEiwAFfvFhD4Mlk0VlZd7T_HZTSVTch1Ix9X5oy2ASB51o1JwjZK-EB6bGJZS7hoChsoQAvD_BwE.

10 Ibid.

5.2 Race and Ethnicity

Despite recruitment plans attempting to address achieving a racially diverse sample (see Chapter 3.4), most survey participants were white (70.0%). While 11.7% of participants chose not to answer the survey question about race, the next largest racial category chosen by participants were multiracial (7.8%) and Black or African American (2.8%). Only 2.8% of participants indicated they were Hispanic or Latinx.

Table 5.2: Survey participants' race compared to Cincinnati Metro Area residents and participants in the National Transgender Survey.

Race/ethnicity	National Transgender Survey	Cincinnati residents	CincyTEA participants
	n = 6258	n = 138,000	n = 108
White	62%	51%	70%
Black	13%	42%	3%
Asian	5%	2%	2%
American Indian	< 1%	< 1%	< 1%
Multiracial	3%	4%	8%
Other	17%	1%	17%

Table 5.2 compares the CincyTEA survey participants' race proportionately to those of Cincinnati metro residents (US Census Bureau)[11] and those of participants of the US National Transgender Survey (USTS).[12] In all racial categories other than Black, the participant sample size of the CincyTEA survey proportionally compares with participants races in the National Transgender Survey and Cincinnati residents as a whole. Black participants in the CincyTEA survey, however, are severely underrepresented (by 10%) compared to Black participant numbers in the USTS.[13] Although Black participants of the CincyTEA survey are underrepresented compared to the number of Black residents in the Cincinnati metro area, it is difficult to know the degree of underrepresentation, as the number of Cincinnati residents who identify as trans and/or non-binary is unknown.
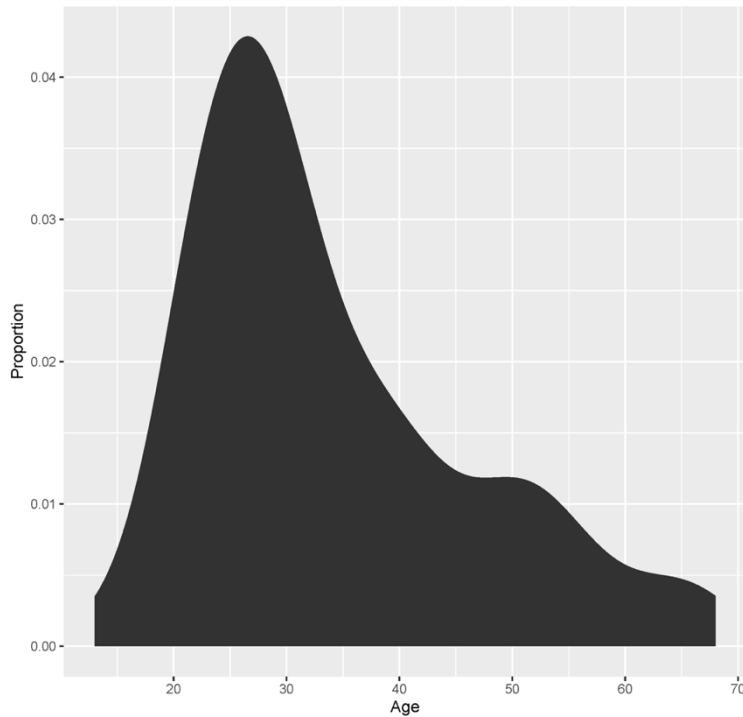
5.3 Age

CincyTEA survey participants' ages ranged from 18 to 68 years old.

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11 "QuickFacts Cincinnati city, Ohio," US Census Bureau, accessed May 25, 2022, https://www.census.gov/quickfacts/cincinnaticityohio.

12 James et al., *2015 US Transgender Survey*.

13 Ibid., 52.

Figure 5.2 Survey participant age distribution.

As Figure 5.2 indicates, most participants were between the ages of 20 and 40 (68.3%), with an average age of 34. The CincyTEA survey participants' ages are similar to those of the USTS, where 84% of their participants were aged 18 to 44.[14] Additionally, the average age of Cincinnati residents is similar, at 32 years old.[15]

5.4 Geographic and Housing Profile

Table 5.3 Counties where participants reside.

County	n	%
Hamilton, OH	106	58.9%
Warren, OH	15	8.3%
Clermont, OH	14	7.8%
Butler, OH	12	6.7%
Kenton, KY	10	5.6%
Other	24	13.3%

Most participants reside in Hamilton County (58.9%). The remaining 41.1% lived in Warren (8.3%), Clermont (7.8%), Butler (6.7%), and Kenton (5.6%) counties. (Note: Kenton County is in Kentucky rather than Ohio.) Thus, despite these participants living within the Cincinnati Metro Area, they live in a different state with different regulations than Ohio.

14 Ibid., 52-53.

15 "QuickFacts Cincinnati city, Ohio," US Census Bureau.

Although there were additional zip code options, most participants who answered this question indicated they live in the 45223 area (14 participants), also known as the neighborhood of Northside (Table 5.4).

Table 5.4 Zip codes and neighborhoods where participants reside (includes zip codes where 4 or more participants live).

Zip code	n	Neighborhood(s)
45223	14	Northside
45219	8	Clifton, University Heights
45220	7	Clifton
45224	7	College Hill
45039	5	Loveland, Mason, Lebanon
45103	5	Batavia
45202	4	OTR, Downtown
45205	4	East/West Price Hill
45212	4	Norwood

Zip codes not shown have less than 4 participants living within them, often only 1 participant per zip code area. These data suggest that trans and/or non-binary folks reside throughout the Cincinnati metro area rather than in similar neighborhoods. Also, it is essential to note this question was not mandatory, which means many participants may have chosen not to answer it. Those who did not answer this question may have been concerned for their privacy or safety.

Most participants indicated stable housing situations when asked about their experiences with residential changes over the last year (Table 5.5).

Table 5.5. Survey participants' housing types.

Housing type	n	%
Rented house/apartment	73	40.3%
Owned house/apartment	39	21.5%
Campus/university housing	2	1.1%
With a partner, spouse, or friend who pays for housing	14	7.7%
With parents or family you grew up with	20	11.0%
On the street, in a car, in an abandoned building, etc.	1	0.6%
In a shelter, group home, or adult care facility	3	1.7%

Of the 73 out of 180 participants who answered the question about housing types, most indicated they rent a house or apartment (40.3%), whereas 21.5% of participants indicated they owned a home or apartment. The remaining 38.2% of participants stated that they lived with family (11.0%), with another person who pays for housing (7.7%), in a shelter or group home

(1.7%), in university housing (1.1%), or on the street, their car, or an abandoned building (0.6%). CincyTEA respondents' housing situations are similar to[16]

Table 5.6 Evictions, homelessness, and residential changes in the past year.

Experience with eviction/homelessness	n	%
Evicted in the past year		
Yes	5	2.8%
No	152	84.4%
Prefer not to answer	1	0.6%
Missing	23	12.8%
Experienced homelessness in the past year		
Yes	9	5.0%
No	148	82.2%
Prefer not to answer	1	0.6%
Missing	23	12.8%
Changed residence 2 or more times in the past year		
Yes	23	12.8%
No	132	72.9%
Prefer not to answer	3	1.7%
Missing	23	12.8%

Most participants did not experience being evicted from their residence (84.4%), nor did they change their residence two or more times (72.9%). However, 2.8% of people were evicted in the last year. Although most participants did not experience homelessness over the past year (82.2%), 5.0% of participants did experience homelessness over the previous year. The percentage of CincyTEA participants who experienced homelessness or were evicted during the last year is less than those who reported experiencing homelessness (12.0%) or being evicted (5%) in the USTS.[17]

5.5 Transportation Access

60.0% of CincyTEA survey participants own and use cars as their primary form of transportation. 40.0% use other forms of transportation, such as ride-shares or city buses. Of those participants who do not own and use a car for their primary transportation needs, 44% walk, and 20% take the bus. As Table 5.7 details, a little over half of the survey participants indicated that they use public transportation in the Cincinnati Metro Area (55.6%). Of these

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16 James et al., *2015 US Transgender Survey*, 177.

17 Ibid., 178.

participants, 28.9% found public transport problematic to access, while 21.1% found it *somewhat easy*. Only 5.6% of participants found Cincinnati's public transportation *very easy*.

*Table 5.7 Participants' reported ease of public transportation use.*

Ease of public transportation use	n	%
Very easy	10	5.6%
Somewhat easy	38	21.1%
Somewhat challenging	29	16.1%
Very challenging	23	12.8%
I don't use transit	58	32.2%
Missing	23	12.8%

These findings correspond with the Ohio Department of Health's (ODH) 2019 Public Transport and Health Best Practices Report.[18] The Ohio Department of Health reports that the lack of bus service areas and the wait and accessibility of services are issues preventing transportation use in Cincinnati.[19] As Figure 5.3 illustrates, 46% of participants must walk 10 minutes or more to the nearest bus stop.

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18 Ohio Department of Health, *Public Transit, and Health Best Practices Report*, (Columbus: Ohio Department of Health, 2019), https://odh.ohio.gov/know-our-programs/creating-healthy-communities/resources/transit-best-practices-report .

19 Mark Samaan et al., *The Hamilton County Better Bus Plan: A Proposal for Countywide Bus Expansion, Improvement, and Bus Rapid Transit* (2017). https://betterbuscoalition.org/s/Better-Bus-Plan-1.pdf.

Figure 5.3 Closest bus or train stop (walking).
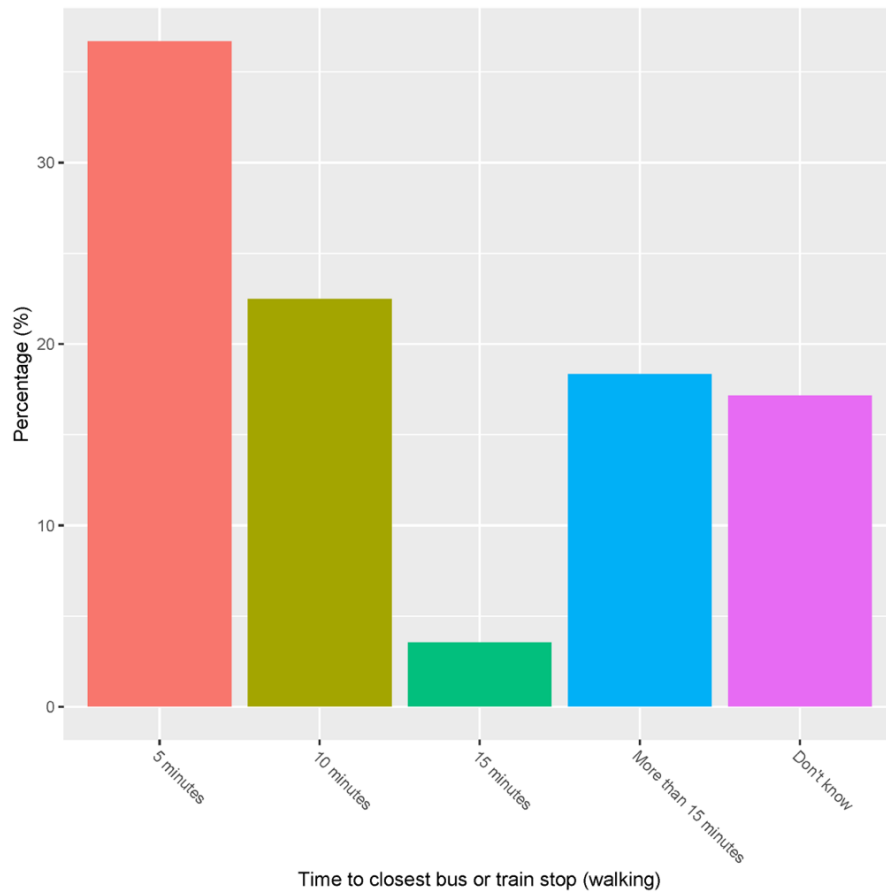
If all the goals in the Better Bus Coalition's plan are achieved, 80% of Hamilton County residents would be within a 5-minute walk of a bus stop.[20] However, this plan does not cover all the counties in the Cincinnati Metro Area. Therefore, more work is needed to ensure survey participants and other residents have better access to public transportation.

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20 Ibid.

Chapter 6. Economic Profile

Participants' annual household incomes are quite diverse (Table 6.1 & Figure 6.1). The largest respondent income group is $10,000-$19,000 at 14.0%. The USTS found that 62% of their respondents reported annual household incomes lower than $50,000.[21] Similarly, 50% of CincyTEA participants have income levels below $50,000. Of the participants who provided a response to the question about annual household income, 9.6% reported having no steady income whatsoever.

*Table 6.1 Survey participants' annual household income.*

Annual household income	n	%
Less than $10,000	5	3.7%
$10,000-$19,999	19	14.0%
$20,000-$29,999	8	5.9%
$30,000-$39,999	15	11.0%
$40,000-$49,999	9	6.6%
$50,000-$59,999	12	8.8%
$60,000-$69,999	14	10.3%
$70,000-$79,999	8	5.9%
$80,000-$89,999	8	5.9%
$90,000-$99,999	4	2.9%
$100,000-$149,999	12	8.8%
$150,000-$199,999	5	3.7%
$200,000-$250,000	3	2.2%
More than $250,000	1	0.7%
I have no steady income	13	9.6%

The median household income of Cincinnati residents in 2020 was $42,663, and for CincyTEA survey respondents, it is between $50,000 to $60,000 (Figure 6.1).[22]

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21 James et al., *2015 US Transgender Survey*, 144.

22 "QuickFacts Cincinnati city, Ohio," US Census Bureau.

Figure 6.1 Survey participants' annual household incomes and the federal poverty line (solid black line), Ohio threshold for food stamp (red dotted line) and Medicaid (black dotted line) eligibility, and Cincinnati's median income (solid red line) for a 2-person household.
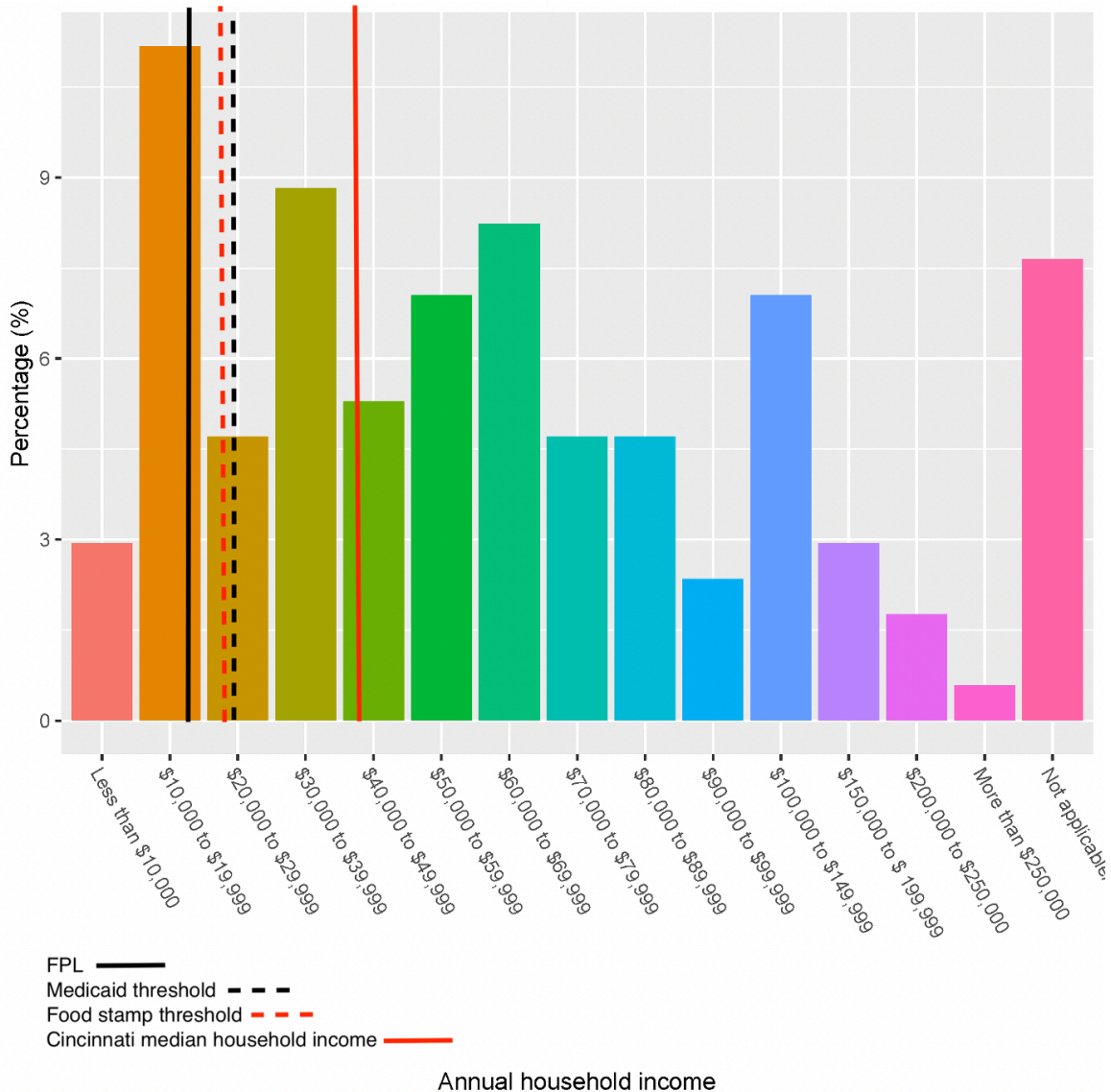
Additionally, Figure 6.1 shows the cutoff threshold for the Federal Poverty Level for a 2-person household ($17,420),[23] Medicaid ($24,353),[24] and Food Stamps ($23,803).[25]

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23 Office of the Assistant Secretary for Planning and Evaluation. "2021 Poverty Guidelines." Accessed October 19, 2022.

24 Benefits.gov. "Ohio Medicaid." Accessed October 19, 2022.

25 Benefits.gov. "Ohio Supplemental Nutrition Assistance Program." Accessed October 19, 2022.

Table 6.2 Survey participants' annual household incomes compared to Cincinnati metro area residents and participants in the National Transgender Survey.

Annual individual income	National Transgender Survey	Cincinnati residents	CincyTEA participants
	n = 6258	n = 138,000	n = 108
Less than $10,000	15%	13%	17%
$10,000-$99,999	72%	63%	65%
$100,000-$149,999	9%	12%	11%
$150,000-$199,999	3%	4%	5%
More than $200,000	1%	7%	4%

CincyTEA participants' and USTS participants reported comparable annual household incomes (Table 6.2). Most participants from the CincyTEA survey (65%) and the USTS (69%) have annual income ranges between $10,000 – $99,000.[26]

Participants' total reported savings varies (Table 6.3). For example, 25.7% of CincyTEA participants have no savings, and 40.3% have less than $1,000. On the other hand, 30.6% of CincyTEA participants have over $10,000 in savings. Financial advisors recommend having at least $2,500 in savings for emergencies or unexpected life events.[27] 47.2% of CincyTEA participants have less than the recommended amount for emergency savings.

Table 6.3 Survey participants' total savings.

| Total Savings	n	%
$0	37	20.4%
< $1,000	21	11.6%
$1,000-$2,000	10	5.5%
$2,000-$5,000	17	9.4%
$5,000-$10,000	15	8.3%
$10,000 - $20,000	18	9.9%
More than $20,000	26	14.4%
Missing	37	20.4%

During the COVID-19 Pandemic, hospital stays were more common as many were admitted for difficulty breathing while infected with COVID-19. The vertical black line in Figure 6.2 represents the average out-of-pocket cost of one overnight stay in a hospital ($2,607).[28]

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26 James et al., *2015 US Transgender Survey*, 144.

27 Kathleen Elkins, "Economists Say This is the Minimum Amount of Money You Need in an Emergency Fund," *CNBC*, October 18, 2019, https://www.cnbc.com/2019/10/18/minimum-amount-of-money-you-need-in-an-emergency-fund.html.

28 "State Health Facts," Kaiser Family Foundation, 2020, https://www.kff.org/health-costs/state-indicator/expenses-per-inpatient-day/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D.

Figure 6.2 Survey participants' total savings compared to the average out-of-pocket cost of one overnight stay in a hospital in the US (represented by a black vertical line).
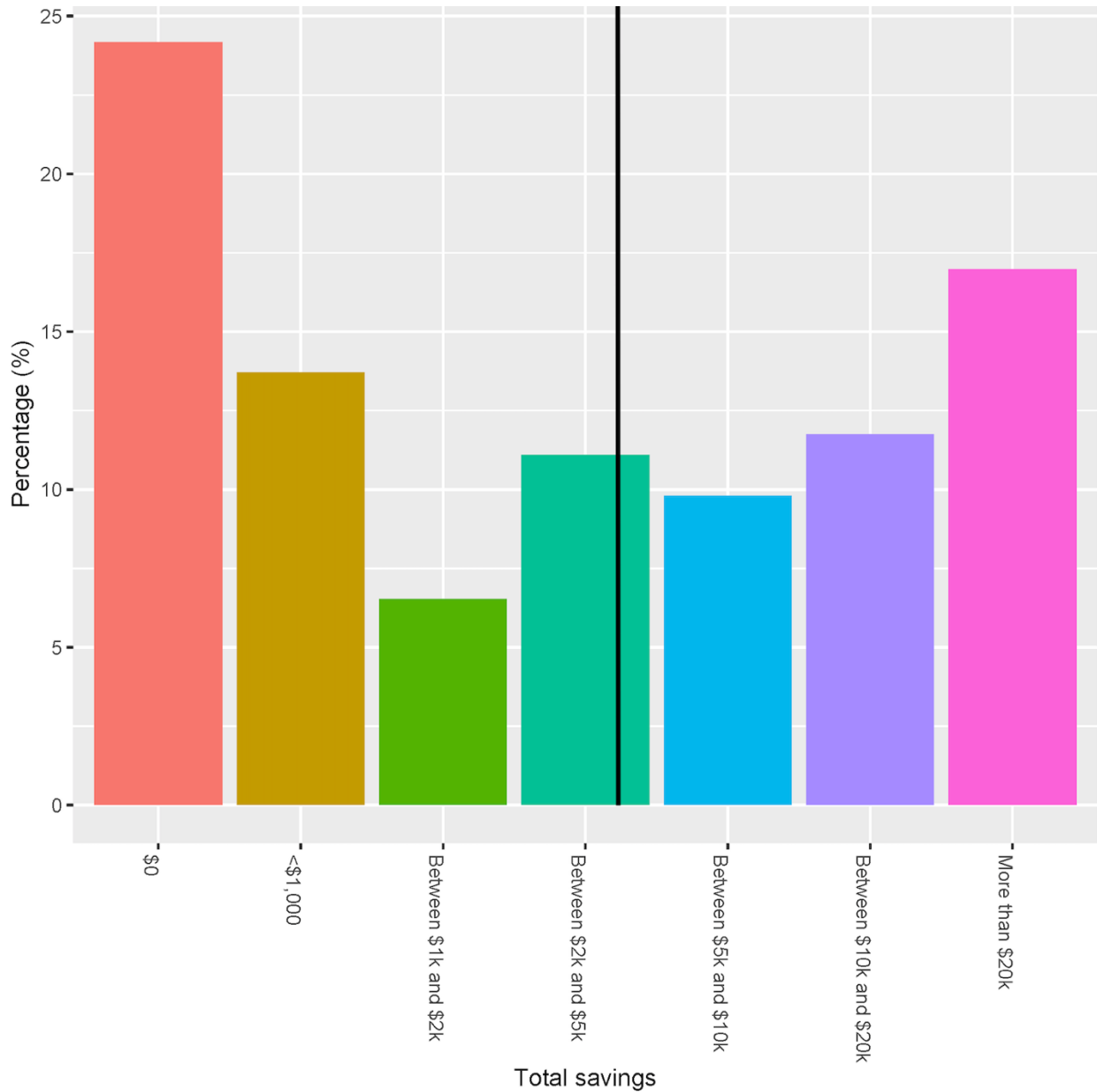
Over half of survey respondents could not afford to pay for one overnight stay at a hospital (59.0%). Even for those respondents with insurance of some kind, the likelihood of needing more than one overnight stay due to serious COVID-19 side effects puts even these respondents at risk of having to tap into savings.

Most participants indicated they rented or owned a home (73%) and were asked how much of their monthly income went to rent or home mortgage payments (Table 6.4).

23

Table 6.4 Participants' percentage of monthly income that goes toward rent or mortgage.

Percent of monthly income	n	%
Less than 25%	43	23.9%
Between 25% and 33%	49	27.2%
Between 33% and 50%	24	13.3%
More than 50%	17	9.4%
I don't know	11	6.1%
Missing	37	20.6%

22.7% of CincyTEA participants use more than 33% of their income to pay for rent or contribute to mortgage payments. In contrast, most participants used less than 33% (51.1%). Forbes recommends that no more than 28% of a person's monthly income be spent on rent or a mortgage. However, just under half of CincyTEA participants spend more than this percentage (Figure 6.3).[29]

29 Dori Zinn, "What Percentage of My Income Should Go to Mortgage?" *Forbes*, August 18, 2022, https://www.forbes.com/advisor/mortgages/mortgage-to-income-ratio/.

Figure 6.3 Participants' percentage of monthly income that goes toward rent or mortgage. The black vertical line represents the recommended percentage of income that should go toward monthly rent/mortgage (30%).
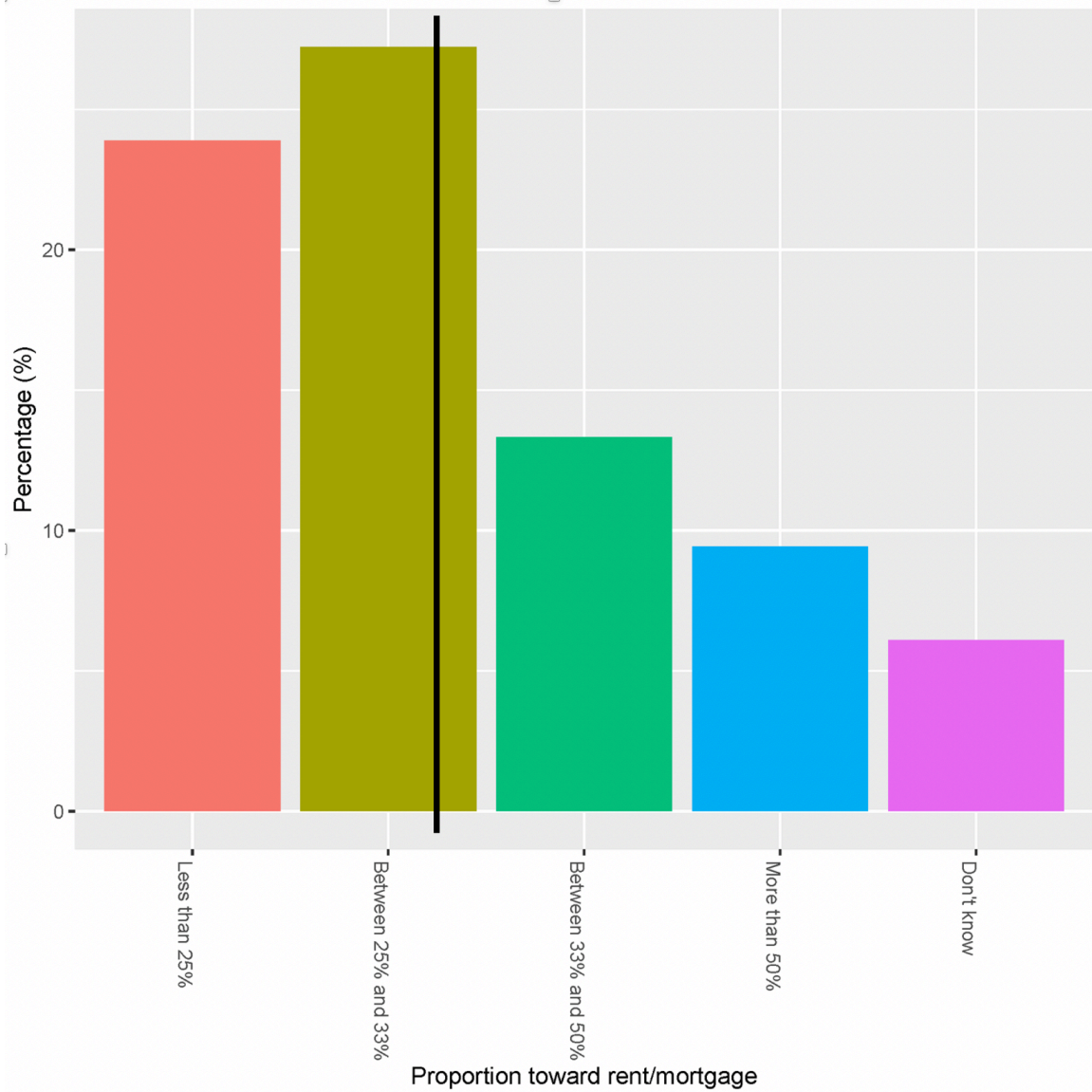
46.6% of CincyTEA participants who answered this survey question spend more than 25% of their monthly income on rent or mortgage payments. Additionally, upwards of 9.4% of participants indicated more than 50% of their income goes toward paying rent or mortgage monthly. When a considerable percentage of one's income is spent solely on housing costs, affording other necessities, such as food and transportation, becomes increasingly difficult. Furthermore, saving money for emergencies becomes more challenging, as well.

Despite 44% of CincyTEA participants reporting a full-time employment status, 22% were employed part-time (Figure 6.4). Around 10% of participants were unemployed, looking for work, or not looking for a job at the time of survey completion.

Figure 6.4 Participants' employment status at the time of survey completion. Participants could choose more than one option (e.g., student and part-time employment), so percentages may not add up to 100%.
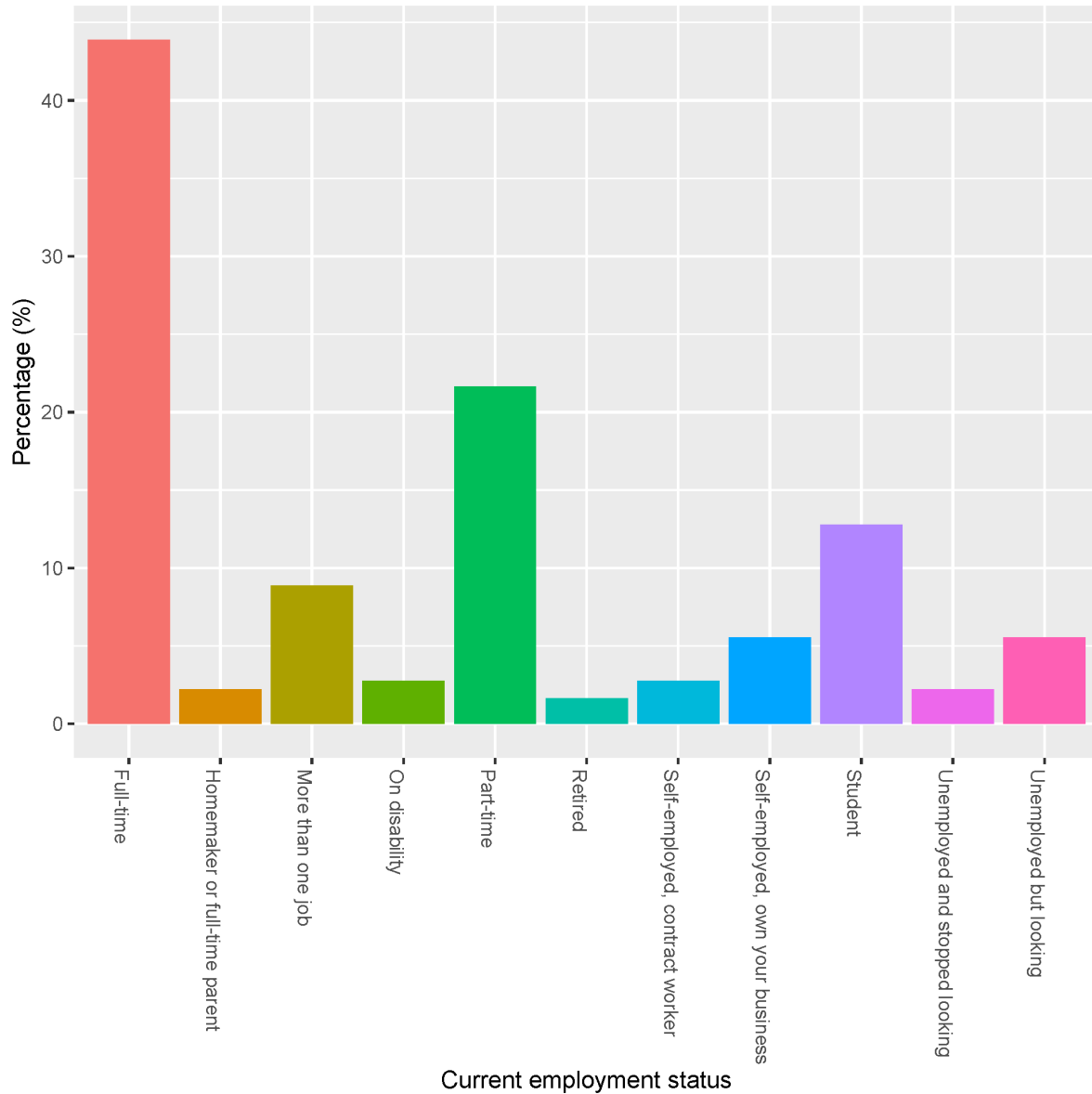
The USTS found that 15% of their respondents were unemployed during survey participation.[30] The Cincinnati unemployment rate at the time of the survey distribution in April was 3.0%.[31] The USTS notes that "studies have documented higher levels of participation in sex work among transgender people…and those facing homelessness or poverty".[32] The USTS found that 5% of their participants had participated in sex work over the last year.[33] Similarly, 6.1% of CincyTEA survey participants reported participating in sex work in the past year (Table 6.5).

Table 6.5 Participants who did sex work in the past year.

Sex work in the past year	n	%
Yes	11	6.1%
No	140	77.8%
Prefer not to answer	2	1.1%
Missing	28	15.6%

Understanding of those in the Cincinnati transgender and non-binary communities engaged in sex work is essential as "transgender sex workers are often subject to particularly abusive police practices."[34]

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30 James et al., *2015 US Transgender Survey*, 141.

31 "Economy at a Glance: Cincinnati-Middletown, OH-KY-IN," US Bureau of Labor Statistics, accessed September 13, 2022, https://www.bls.gov/eag/eag.oh_cincinnati_msa.htm.

32 James et al., *2015 US Transgender Survey*, 157.

33 Ibid., 159.

34 "Amnesty International Publishes Policy and Research on Protection of Sex Workers' Rights," *Amnesty International*, May 26, 2016, https://www.amnesty.org/en/latest/news/2016/05/amnesty-international-publishes-policy-and-research-on-protection-of-sex-workers-rights/#:~:text=Amnesty%20International's%20research%20shows%20that%20police%20officers%20often%20misuse%20their,their%20work%20to%20secure%20evidence.

Chapter 7. Education Profile

The educational attainment of survey participants was also rather diverse (Table 7.1). Just under half of the participants obtained a college degree or higher (47.9%), of which 31.7%'s highest degree was a Bachelor's degree. In comparison, the USTS found that 38% of participants obtained a college degree or higher, of which 25% were Bachelor's degrees.[35] Looking at all Cincinnatians, 38.7% of residents obtained a college degree or higher between 2016 and 2022.[36]

Table 7.1 Participants' educational attainment.

| Educational attainment	n	%
Elementary and/or junior high	1	0.6%
Some high school	2	1.1%
High school graduate	16	8.9%
Technical school degree	6	3.3%
Some college credit, but less than 1 year	9	5.0%
One or more years of college, no degree	26	14.4%
Associate degree	7	3.9%
Bachelor's degree	57	31.7%
Master's degree	25	13.9%
Doctorate degree	3	1.7%
Professional degree	1	0.6%
Missing	28	15.6%

Additionally, of those who obtained less than an Associate's degree, 14.4% of participants attended one or more college years but did not graduate. 8.9% of people graduated high school or got their GED. In comparison, 11% of participants in the USTS graduated high school or received their GED.[37]

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35 James et al., *2015 US Transgender Survey*, 56.

36 "QuickFacts Cincinnati city, Ohio," US Census Bureau.

37 James et al., *2015 US Transgender Survey*, 56.

*Figure 7.1 Participants' educational attainment.*
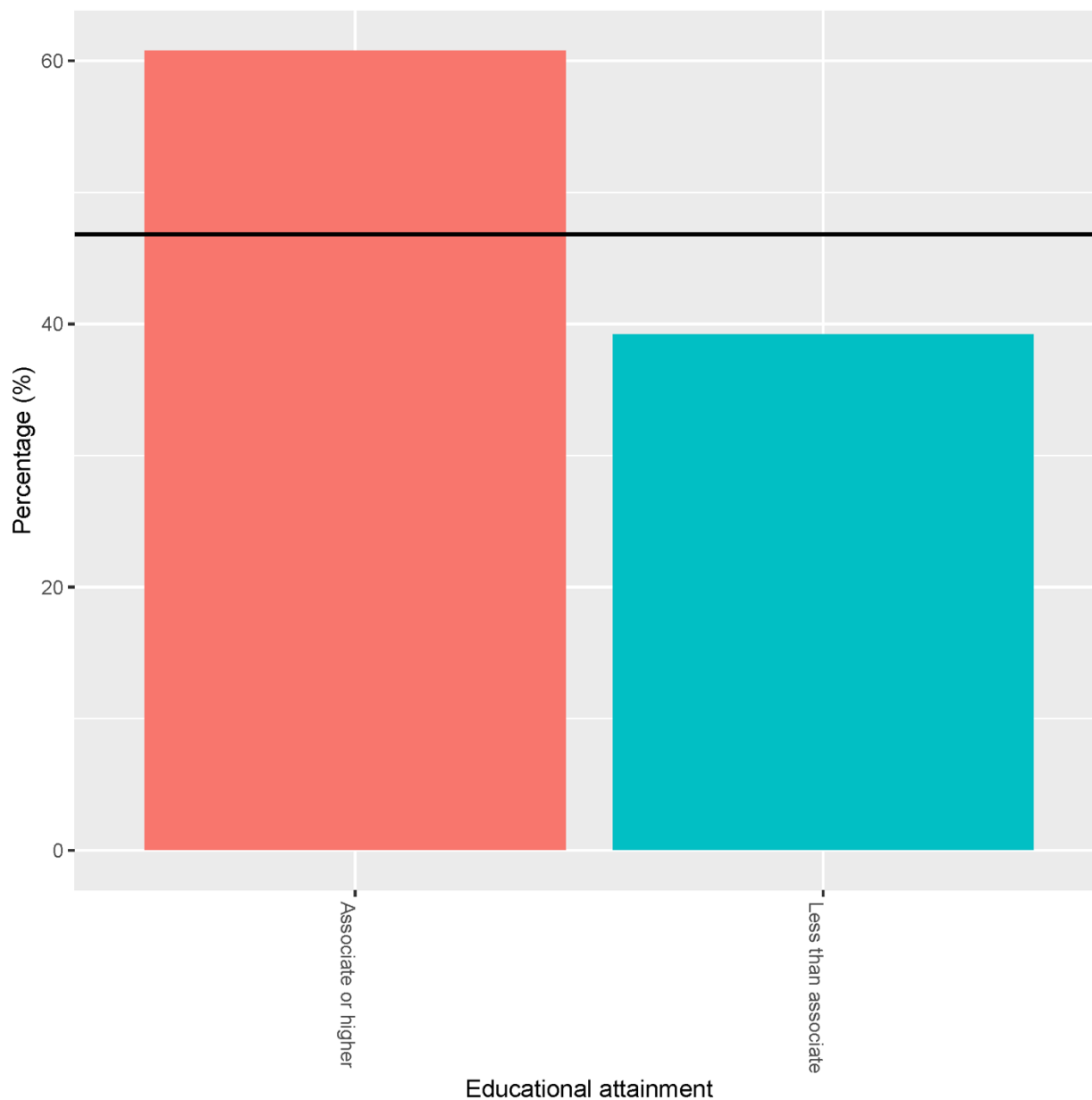
When grouped into two categories, 1) Associate's degree or higher and 2) less than an associate degree, CincyTEA participants have higher education rates when compared to all Ohio residents (Figure 7.1). Over 10% more of the survey participants obtained an associate degree or higher compared to other Ohio residents.

Chapter 8. Discrimination

Participants were asked about experiencing discrimination in various settings and contexts, both over their lifetimes and the past year. These questions, and their formatting, were adapted from the Transgender Discrimination Scale (TDS)[38] (See Chapter 14.2 for scale separate from the overall CincyTEA survey). This scale was chosen for use in the survey unmodified, as the scale is peer-reviewed and validated. Furthermore, the scale allows for direct comparison to previous studies that sought to test for the statistical significance of categories of discrimination. Tables 8.1-8.3 show the analysis from the TDS scale in the CincyTEA survey.

Figure 8.1 gives the average lifetime and past year levels of discrimination CincyTEA survey respondents experienced. The higher the score (or bar), the more discrimination respondents experienced in those areas.

Figure 8.1 Mean TDS scores for each subscale and total scores over participants' lifetime (red) and over the past year (blue).

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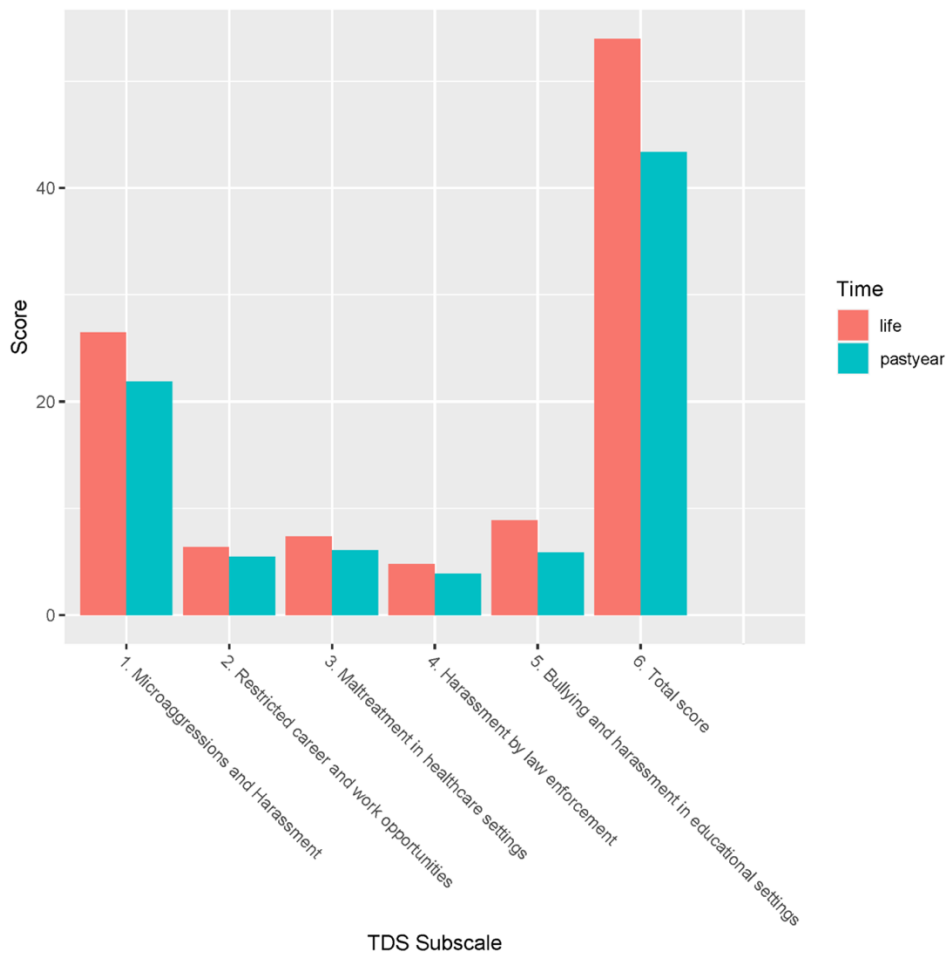
38 Laurel B. Watson et al., "The Development and Psychometric Evaluation of the Trans Discrimination Scale: TDS-21," *Journal of Counseling Psychology* 66, no.1 (2018):14–29.

General microaggressions and harassment were experienced twice as often as discrimination in specific settings. This suggests that transgender and/or non-binary folks are subject to discrimination anywhere because of their gender identities. The next highest discrimination scores were for "bullying and harassment in educational settings" and "maltreatment in healthcare settings." These rates of discrimination are like those from the USTS, which found more than half of their respondents experienced verbal harassment for any reason (54%) and experienced maltreatment in healthcare and educational settings.[39]

The significance of discrimination experienced in five contexts (microaggressions and harassment, constrained career and work opportunities, maltreatment in healthcare settings, harassment by law enforcement, bullying and harassment in educational settings), and an overall discrimination score, were assessed using standard t-test analysis. Significance levels of 0.05, 0.01, and 0.001 are indicated by "*", "**", and "***" respectively.

Table 8.1 Changes in reported discrimination experiences over time.

Subscale	Entire life		Past year		T-tests	
	Mean (SD)	Median	Mean (SD)	Median	p-value	Significance level
1. Microaggressions and Harassment	26.5 (9.0)	26	21.9 (9.0)	20	< 0.001	***
2. Restricted career and work opportunities	6.4 (3.8)	5	5.5 (3.7)	4	0.07	
3. Maltreatment in healthcare settings	7.4 (4.0)	6	6.1 (3.6)	5	< 0.01	**
4. Harassment by law enforcement	4.8 (3.1)	3	3.9 (2.5)	3	0.02	*
5. Bullying and harassment in educational settings	8.9 (5.1)	7	5.9 (3.5)	4	< 0.001	***
6. Total score	54.0 (21.3)	48	43.4 (18.2)	37	< 0.001	***

All participants experienced significant discrimination over their lifetimes and during the last year (Table 8.1). However, there was a substantial decrease in discrimination scores over the entire life course and in the past year for every subscale except the "Restricted career and work opportunities" category. Furthermore, the categories of "microaggressions and harassment" and "bullying and harassment in educational settings" were highly significant at <0.001.

No significant differences were found when comparing discrimination significance levels between white participants and participants of color (Table 8.2).

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39 James et al., *2015 US Transgender Survey*, 199.

Table 8.2 Reported lifetime discrimination experiences for White and POC respondents.

Subscale	White		POC		T-tests
	Mean (SD)	Median	Mean (SD)	Median	p-value
1. Microaggressions and Harassment	26.6 (8.5)	26	26.0 (10.6)	22.5	0.78
2. Restricted career and work opportunities	6.1 (3.5)	5	7.4 (4.8)	6	0.21
3. Maltreatment in healthcare settings	7.6 (3.9)	7	6.9 (4.3)	5	0.43
4. Harassment by law enforcement	4.7 (3.0)	3	5.1 (3.4)	3	0.55
5. Bullying and harassment in educational settings	8.7 (5.0)	7	9.8 (5.4)	8.5	0.35
6. Total score	53.7 (19.9)	50	55.1 (25.8)	45.5	0.79

The lack of significance found in any of the categories, and the total score indicates no difference in the amount of discrimination between white participants and participants of color in this survey sample. This finding does not align with previous studies on discrimination differences by race for transgender and/or non-binary individuals. Transgender and non-binary people of color report higher rates of discrimination and violence than their white counterparts.[40] In fact, the USTS found that American Indian, Middle Eastern, and multiracial respondents were more likely to experience verbal or physical harassment or violence for any reason during the prior year than Black, Asian, Latino/a/x, and White respondents.[41] The small study sample size of respondents of color most likely contextualizes the lack of significance in the CincyTEA findings on discrimination by race. In other words, the CincyTEA findings should not be interpreted to suggest that discrimination experiences do not differ by race for trans and non-binary folks. (Further discussion on this issue can be found in Chapter 15: Limitations of this report).

When comparing discrimination significance levels between participants who are trans and non-binary versus non-binary (but not trans-identifying), no significant difference was found (Table 8.3).

Table 8.3 Reported lifetime discrimination experiences by gender identity.

Subscale	Trans + NB*		Trans only		NB only		ANOVA
	Mean (SD)	Median	Mean (SD)	Median	Mean (SD)	Median	p-value
1. Microaggressions and Harassment	27.4 (9.8)	28	26.6 (7.7)	26	21.8 (8.3)	20	0.12

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40 Kimberly F. Balsam et al., "Measuring Multiple Minority Stress: The LGBT People of Color Microaggressions Scale." *Cultural Diversity & Ethnic Minority Psychology* 17, no.2 (2011): 163-174; Human Rights Watch, *"I Just Try to Make It Home Safe": Violence and the Human Rights of Transgender People in the United States* (United States: Human Rights Watch, 2021), https://www.hrw.org/sites/default/files/media_2021/11/us_lgbt1121_web_0.pdf.

41 James et al., *2015 US Transgender Survey*, 199.

2. Restricted career and work opportunities	6.6 (3.8)	6	6.8 (4.1)	5	4.2 (1.9)	3	0.08
3. Maltreatment in healthcare settings	7.9 (4.2)	8	7.4 (3.9)	3.9	5.4 (2.4)	6	0.13
4. Harassment by law enforcement	4.9 (3.2)	3	5.0 (3.3)	3	3.2 (0.4)	3	0.13
5. Bullying and harassment in educational settings	9.2 (5.0)	8	8.9 (5.5)	7	8.0 (4.5)	6	0.72
6. Total score	56.0 (22.5)	53	54.6 (20.8)	47	42.5 (14.4)	37	0.11

*"Trans+NB" indicates participants who said they are both "Transgender" and "Non-Binary." In contrast, "Trans only" and "NB only" indicate participants who identify solely as Transgender or Non-Binary.

The lack of significance found in any categories or the total score indicates no statistical difference in the amount of discrimination experienced by gender identity. In other words, people who identified as trans and non-binary or solely trans or non-binary experienced the same discrimination levels. The lack of significant differences may suggest shared levels of discrimination in respondents' lives. However, it is essential to note that participants who identified only as non-binary reported less discrimination than people who identified as transgender or transgender and non-binary. This was true on every subscale. Identifying as non-binary but not transgender was thus associated with lower levels of discrimination. Other studies report similar findings, which can be contextualized by differences in gender presentation, social settings, and living in a cis- and heteronormative society.[42]The USTS asked respondents to denote whether they felt "others could usually or always tell that they were transgender" when answering discrimination questions to better understand the nuance in the lived experiences of those who could "blend" into binary societal expectations if they chose to do so. Further discussion on this issue can be found in Chapter 15 Limitations of this report.[43]

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[42] Sari L. Reisner and Jaclyn M. W. Hughto, "Comparing the health of non-binary and binary transgender adults in a statewide non-probability sample," *PLoS One* 14, no. 8 (2019): e0221583, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6711503/.

[43] James et al., *2015 US Transgender Survey*, 199.

Chapter 9. Health

Participants were asked about various aspects of their access to medical care, including gender-affirming healthcare (Table 9.1). Topics included insurance coverage, types of care sought, and quality of care.

Table 9.1. Participants' health profile.

Variables	n	%
Insured		
Yes	160	88.4%
No	10	5.5%
Missing	10	5.5%
Type of insurance		
Employer-sponsored insurance	97	60.6%
COBRA	1	< 1%
Multiple sources	8	5.0%
Healthcare.gov insurance	5	3.1%
Medicaid	27	16.9%
Medicare	5	3.1%
None	10	5.5%
Missing	27	15.0%
Dental insurance		
Yes	115	63.5%
No	35	19.3%
Missing	30	16.7%
Self-rated health		
Excellent, Very good, or Good	111	61.3%
Fair or Poor	31	17.1%
Missing	38	21.1%
Gone without a needed prescription in your lifetime		
Yes	96	53.0%
No	44	24.3%
Missing	40	22.2%
Gone without doctor-recommended tests in your lifetime		
Yes	87	48.1%
No	51	28.2%
Missing	42	23.3%
Gone without doctor-recommended treatments in your lifetime		
Yes	89	49.2%
No	48	26.5%
Missing	43	23.9%

Put off seeing a doctor about a medical concern in your lifetime		
Yes	117	64.6%
No	22	12.2%
Missing	41	22.8%
Where do you go if you are sick or have a medical concern?		
Primary care doctor	76	42.0%
Walk-in clinic or urgent care	11	6.1%
Search online for information on your symptoms	18	9.9%
Friend or family member	14	7.7%
Healthcare center/FQHC	7	3.9%
Emergency department at a hospital	3	1.7%
Ask a spiritual or cultural leader for advice	3	1.7%
I don't have a place to go	5	2.8%
Other	3	1.7%
Missing	40	22.2%
Quality of healthcare received		
Excellent, Very good, or Good	72	39.8%
Fair or Poor	24	13.3%
Missing	84	46.6%
Received COVID-19 vaccine		
Yes	132	72.9%
No, I can't access one	1	0.6%
No, I don't want one	4	2.2%
Missing	43	23.9%

Most participants were insured in some form (88.4%), most through employer-based insurance (60.6%). Furthermore, 16.9% of participants indicated they were insured by Medicaid, and 5.5% of participants were uninsured. These findings align with the USTS, which found that 86% of respondents were insured, and 14% were uninsured.[44] Comparing rates to Ohio residents in 2018, 7.7% of individuals were uninsured in Ohio, 59.1% had employer-based insurance, and 17.8% were insured by Medicaid.[45]

Most participants also indicated that their health was "excellent," "very good," or "good" (61.3%), whereas 17.1% of participants said their health was either "fair" or "poor." When asked where they seek care, 42.0% of participants answered that they have a primary care doctor. Ohio residents indicated slightly worse self-health assessments. 80.7% of residents said their health was "excellent," "very good," or "good," and 19.3% indicated their health was either "fair" or "poor."[46]

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44 Ibid., 94.

45 "State Health Care Snapshots: Ohio," Kaiser Family Foundation, 2020, https://www.kff.org/statedata/election-state-fact-sheets/ohio/.

46 Ibid.

Despite most participants being insured in some capacity, most participants indicated that they have gone without a needed prescription in their lifetime (53.0%). Many others reported they have gone without doctor-recommended tests (48.1%) and treatments (49.2%) in their lifetimes. Additionally, 64.4% of participants responded that they have put off a doctor's visit related to a medical concern in their lifetime. Although not explicitly asked by this survey, respondents may have delayed or avoided healthcare visits due to previous experiences of discrimination in healthcare settings. For instance, the USTS reports that "23% of respondents did not see a doctor when they needed to because of fear of being mistreated as a transgender person." (Further discussion on this topic can be found in Chapter 11 Policy Recommendations and Further Resources.)[47]

Note: As mentioned in Chapter 4, the remaining analysis is given in response counts rather than percentages due to the low number of respondents who answered every question in that section.

Participants were also asked specifically about transition-related healthcare services, including questions about insurance coverage and where those services were received geographically (Table 9.2).

Table 9.2 Transition-related health services.

Transition-related health services	Received while living in Cincinnati	In greater Cincinnati	In another city in Ohio	Outside of Ohio
Licensed counseling or psychotherapy	84	76	3	4
Insurance paid for all of it.	31			
Insurance paid for some of it.	34			
I paid entirely out of pocket.	19			
Masculinizing hormones	39	36	2	1
Insurance paid for all of it.	6			
Insurance paid for some of it.	23			
I paid entirely out of pocket.	10			
Feminizing hormones	42	36	5	2
Insurance paid for all of it.	16			
Insurance paid for some of it.	22			
I paid entirely out of pocket.	4			
Laser hair removal and/or electrolysis	20	17	2	2
Insurance paid for all of it.	3			
Insurance paid for some of it.	1			
I paid entirely out of pocket.	16			
Masculinizing top surgery	18	8	5	5

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47 James et al., *2015 US Transgender Survey*, 93.

Insurance paid for all of it.	2			
Insurance paid for some of it.	4			
I paid entirely out of pocket.	11			
Masculinizing bottom surgery	4	2	2	0
Insurance paid for all of it.	0			
Insurance paid for some of it.	3			
I paid entirely out of pocket.	1			
Feminizing top surgery	6	2	0	4
Insurance paid for all of it.	2			
Insurance paid for some of it.	2			
I paid entirely out of pocket.	2			
Feminizing bottom surgery	2	0	0	2
Insurance paid for all of it.	1			
Insurance paid for some of it.	0			
I paid entirely out of pocket.	1			
Fertility preservation	4	3	0	1
Insurance paid for all of it.	0			
Insurance paid for some of it.	2			
I paid entirely out of pocket.	1			
Speech therapy	11	10	1	0
Insurance paid for all of it.	6			
Insurance paid for some of it.	1			
I paid entirely out of pocket.	4			
Facial masculinizing surgery	1	0	1	0
Insurance paid for all of it.	0			
Insurance paid for some of it.	0			
I paid entirely out of pocket.	1			
Facial feminizing surgery	2	1	0	1
Insurance paid for all of it.	0			
Insurance paid for some of it.	1			
I paid entirely out of pocket.	1			
Hairline lowering, scalp advancement, or hair transplantation	2	0	1	1
Insurance paid for all of it.	1			
Insurance paid for some of it.	0			
I paid entirely out of pocket.	1			
Vocal feminization surgery	2	0	0	1
Insurance paid for all of it.	1			
Insurance paid for some of it.	0			

I paid entirely out of pocket.	1			

Many participants received licensed counseling or psychotherapy related to transition-care services (n = 84). however, only 31 of participants' insurance companies covered the entire cost of services; 34 participants' insurance covered costs partially. Furthermore, 19 of the 84 participants who answered this part of the survey paid entirely out-of-pocket for these services.

Hormone-related healthcare services were also received by many participants. For example, of the 39 participants who received masculinizing hormone treatment, only six participants' insurance covered costs entirely. Comparatively, 23 people's insurance policies covered some of their expenses, while six paid entirely out of pocket. Similarly, for those participants who received feminizing hormone treatment, 16 participants' insurance out of the 42 who answered this question covered the entire cost. In comparison, 23 participants' insurance policies paid some of their expenses, while four people paid entirely out of pocket.

Additionally, participants were asked about transition-related health services that they desired but had yet to receive (Table 9.3). Participants were also asked why they could not access an intervention they wanted. For example, reasons for not accessing care included not being able to afford or access it and care availability. Finally, participants could also indicate which services they did not desire.

Transition-related health services	Want it but cannot afford it	Want it, but I am waiting due to reasons other than financial	Do not want it
Licensed counseling or psychotherapy	12	21	9
Masculinizing hormones	1	17	35
Masculinizing top surgery	14	20	36
Masculinizing bottom surgery	12	7	65
Facial masculinizing surgery	6	4	81
Feminizing hormones	3	10	36
Feminizing top surgery	13	14	56
Feminizing bottom surgery	14	16	53
Facial feminizing surgery	19	14	52
Vocal feminization surgery	17	11	59
Hairline lowering, scalp advancement	12	10	74
Laser hair removal/electrolysis	22	18	46
Fertility preservation	8	11	81
Speech therapy	20	17	65

Table 9.3 Desired transition-related health services.

Participants' most desired healthcare services were licensed counseling or psychotherapy (n = 34), masculinizing top surgery (n = 34), feminizing bottom surgery (n = 30), feminizing facial surgery (n = 33), laser hair removal (n = 40), and speech therapy (n = 37). Of these most desired services, more participants indicated cost as their primary barrier to receiving these

services than another reason. For instance, out of the 33 participants who wanted feminizing facial surgery, 19 said cost was a barrier compared to 14 who said there was another reason they had not yet gotten feminizing facial surgery. Similarly, for those 40 participants who desired laser hair removal, 22 indicated cost as the barrier, and 18 stated another reason for not receiving the service. These findings are similar to USTS results, which show that most trans people desire gender-affirming hormones but cite cost as a significant barrier to receiving care (i.e., "while more than three-quarters (78%) of respondents wanted hormone therapy related to gender transition, only 49% had ever received it").[48]

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48 Ibid., 93.

Chapter 10. Policy

In the final section of the survey, participants were asked policy-related questions that identified salient community concerns (Figure 10.1). This section also included questions about changing government identity documents to reflect their current name and gender (Table 10.1). Participants who tried to update these documents were asked to indicate whether changes were allowed by various governmental institutions.

Note: In Kentucky, trans people are not allowed to change gender markers on their driver's licenses or birth certificates without proof of surgical interventions.

Table 10.1 Changes to documents and records.

Document	Yes, changes allowed	No, changes denied	Ratio of changes denied to changes allowed
Birth certificate	4%	9%	2.4
Drivers license or state-issued ID	25%	3%	0.1
Social security records	22%	< 1%	0.0
Passport	12%	< 1%	0.0
Work ID	26%	53%	0.1
Military discharge papers	< 1%	< 1%	1.0
Medical records	27%	4%	0.1
Student records	12%	4%	0.4
Professional licenses or credentials	5%	< 1%	0.1

Table 10.1 indicates which documents participants listed as changeable versus unchangeable. If reading left to right, a ratio above 1 in the last column shows that it is hard to change one's gender marker successfully on that document. For example, birth certificates have a ratio of 2.4, indicating that changing the gender marker on one's birth certificate had the lowest success rates among participants. This finding matches that of the USTS, which similarly found that only about ten percent of people who wanted to change their birth certificate gender markers could do so.[49]

Participants were also asked to rank a list of trans-related policy issues from least to most important. Figure 10.1 below displays those results. First, these responses were weighted so that "not important" was given a 1, "somewhat important" a 2, "important" a 3, and "very important" a 4. Next, the response percentage was calculated for each of the four levels of importance.

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49 Ibid., 82.

Figure 10.1 Participants' policy priorities.
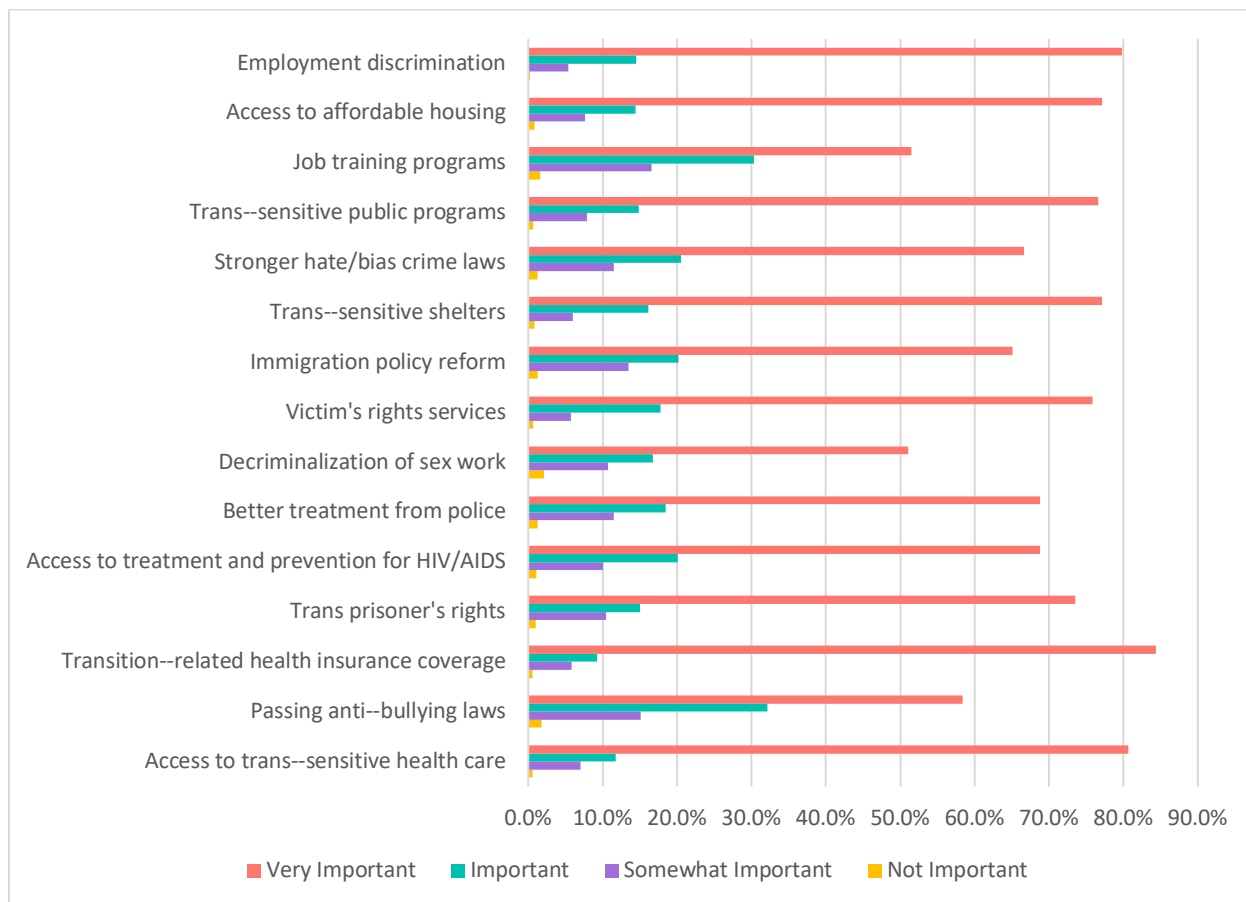
Most participants indicated that all policy changes were very important. At or over 80.0% of participants who answered this question felt the policy issues of "employment discrimination" (79.8%), "transition-related health insurance" (84.3%), and "access to trans-sensitive healthcare" (80.6%) were very important. Of the issues ranked very important by at least half of participants, "job training programs" (51.5%), "decriminalizing sex work" (51.1%), and "passing anti-bullying laws" (58.5%) were slightly less pressing issues. In comparison, the USTS identified top policy priorities as violence against trans people, health insurance coverage, and racism as top priorities.[50]

Lastly, participants were offered a chance to write in policy priorities that they felt were not covered by the original list (Figure 10.2).

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50 Ibid., 232.

Figure 10.2 Write-in policy priorities.
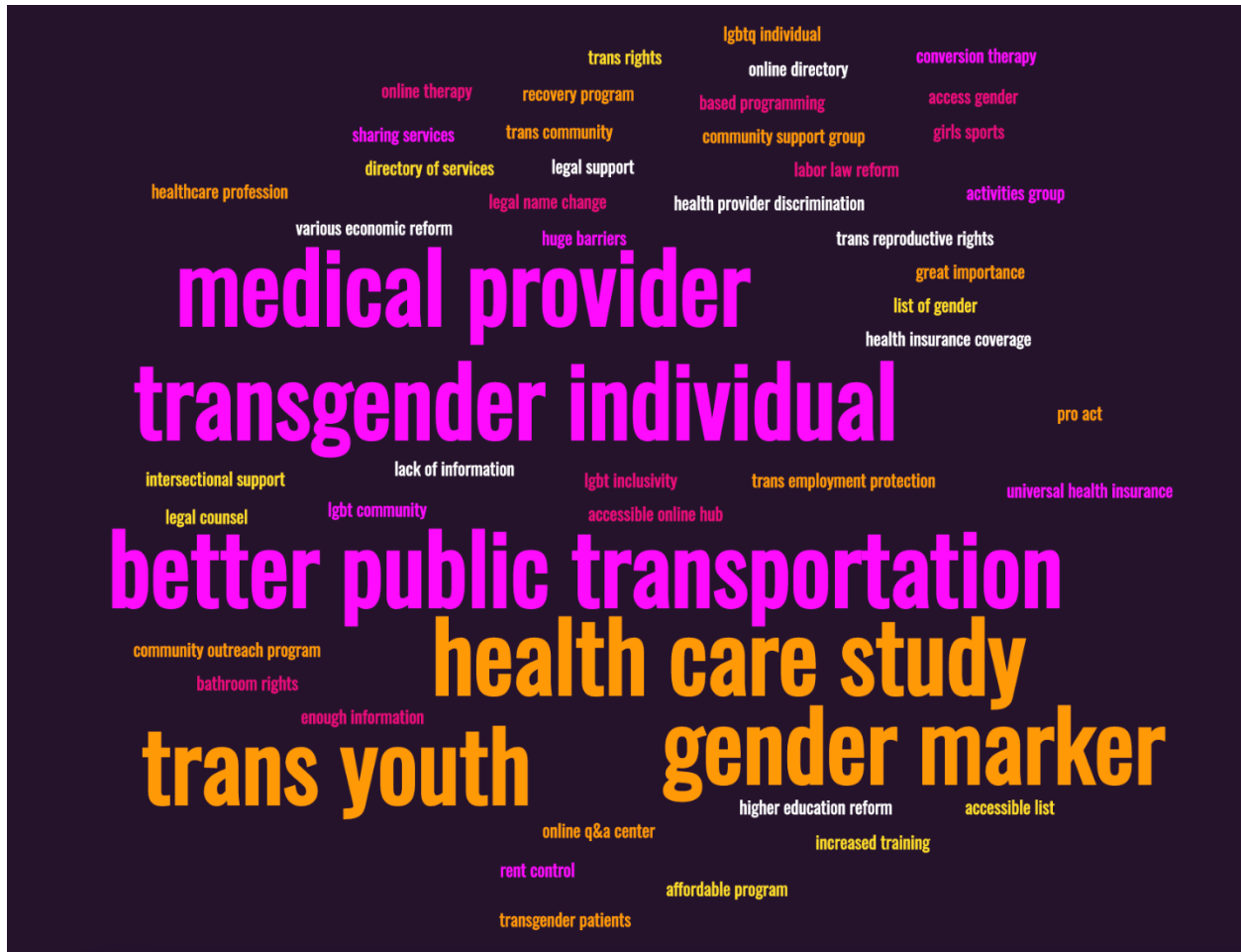
The size of the text above correlates to the frequency of the response. For example, "Medical provider" shows the community's desire for culturally competent, trans-sensitive training for healthcare providers. Better public transportation was also a policy issue many participants wanted to highlight. Additionally, protecting trans youth was a great concern to many participants who wrote in.

Chapter 11. Policy Recommendations and Further Resources

Education

- Implementing, and enforcing, school-specific anti-discrimination policies that protect student gender identities
  - Developing and establishing "gender safety plans" for interested trans and nonbinary students and their families
  - Training for staff to support transgender and non-binary students
- Providing students and families with additional resources around updating names and gender markers in school-based identification systems (e.g., Student IDs, Records, and diplomas)
- [GLSEN School Climate Survey](#)

Mental Health Services

- Generation of an online, frequently updated list of gender-affirming mental health providers in the Greater Cincinnati Area
  - Including information about providers that work on a sliding scale or offer certain services free of charge (e.g., no additional cost for writing a letter for surgery)
  - Information about how to use Psychology Today, Open Path Collective, or other online provider search tools
- Resources: [Central Clinic's LGBTQ+ Program](#), [Cincinnati Children's Hospital and Medical Center Transgender Health Clinic](#)

General Healthcare

- Generation of an online, frequently updated list of gender-affirming primary healthcare and surgical providers in the Greater Cincinnati Area
  - Include information about how to enroll in Medicaid as a transgender or nonbinary person
  - Include information for patients about how to update gender markers on legal documents
- Resources: [Equitas Health](#), [UC Health](#)

Access to specialized trans-specific healthcare

- Advocating for insurance policies to include gender-affirming healthcare (e.g., private companies, city worker health insurance, Medicaid plans in the state of Ohio)
- Establish a clear path to file complaints against health insurance companies/policies that are not following federally mandated guidelines for gender-affirming medical care
- Generate an online list of local companies that have gender-inclusive health insurance and services provided by these insurance plans
- Establishing micro-grants or other resources for helping trans and nonbinary individuals cover the cost of gender-affirming healthcare
- Generate online resources on legal support for individuals who experience healthcare discrimination

Housing Instability

- Generate online resources about financial and legal resources specifically for individuals forced to move or facing eviction
    - Collaboration with UC Law School's Legal Clinic, local legal aid societies, Equality Ohio's Legal Aid Clinic
- Establish more affordable housing in the Greater Cincinnati Area
- Clear gender-inclusive policies for subsidized housing, homeless shelters, and transitional housing options
- Collaboration with local organizations (e.g., Strategies to End Homelessness, Freestore Foodbank, Lighthouse Youth Services) to develop a guide or online list that specifically addresses shelter and housing options for trans and nonbinary individuals that include:
    - Each shelter's policy
    - Steps taken by the shelter to protect trans and nonbinary individuals
    - How to apply for subsidized housing when trans or nonbinary
- Further reading: "You are being asked to leave the premises": A Study of Eviction in Cincinnati and Hamilton County, Ohio, 2014-2017 (https://cincinnatilegalaid.net/wp-content/uploads/Eviction-Report_Final-1.pdf)

Identification Documents

- Improved system for making trans and nonbinary individuals aware of the current state and federal policies regarding updating identification documents
- Collaboration with local organizations (UC Law School's Legal Clinic, local legal aid societies, Equality Ohio's Legal Aid Clinic) and medical providers to assist individuals with identity marker and name change processes

State and Federal Policy Recommendations

- Allowing KY residents to update their driver's licenses and state IDs without obtaining surgery
- Publicly opposing state legislation that could increase discrimination/violence against trans and nonbinary youth (e.g., "Don't Say Gay" Bill)
- Opposing state legislation that would prevent trans or nonbinary youth from accessing medically necessary and lifesaving healthcare, including abortion
- Expanding current nondiscrimination policies related to housing to include trans and nonbinary individuals, plus clear guidance for how these individuals can access these services

Chapter 12. Survey Limitations

Despite attempts to recruit a demographically diverse participant sample, some populations were unaccounted for or under-represented. Most of the participants identified as white and non-Hispanic. The lack of racial diversity in the CincyTEA participant sample leaves aspects of trans and/or non-binary lived experience unaccounted for in our assessment. In particular, the discrimination results in Chapter 8 of the report note that no significant difference was found between racial and ethnic identity categories. As there are studies denoting the higher levels of violence and discrimination experienced by trans and/or non-binary folks of color (mainly Black and indigenous folks,[51] the authors believe that the lack of significance in the CincyTEA findings surrounding discrimination by race is contextualized by the low number of respondents of color we successfully recruited in the CincyTEA sample.

Additionally, we found no significant difference in the amount of discrimination between transgender/non-binary, transgender, and non-binary participants in this survey sample. This lack of significance may or may not be due to limitations in collecting quantitative data on gender. For example, some participants' genders may not have been listed as options in the CincyTEA survey, as gender identities are incredibly diverse. This possibility reflects a common issue with surveys collecting demographic information, as only so much participant diversity can be captured while attempting to keep a survey manageable for quantitative analysis.[52] Furthermore, gender presentation can play a prominent role in experiences of discrimination. As mentioned in Chapter 8 Discrimination, studies show that transgender individuals report more discrimination than only non-binary individuals.[53] The USTS specifically asked respondents to denote whether they felt "others could usually or always tell that they were transgender" or not when answering discrimination questions to better understand the nuance in the lived experience of those who felt they could "blend" into binary societal expectations more easily if they chose to do so.[54] To use the validated Transgender Discrimination Scale and compare the findings to previous ones, we had to use the scale exactly as it was developed; otherwise, we risked invalidating and reducing its reliability. This choice left questions about gender presentation off the CincyTEA survey.

51 Kimberly F. Balsam et al., "Measuring Multiple Minority Stress: The LGBT People of Color Microaggressions Scale." *Cultural Diversity & Ethnic Minority Psychology* 17, no.2 (2011): 163-174; Human Rights Watch, *"I Just Try to Make It Home Safe": Violence and the Human Rights of Transgender People in the United States* (United States: Human Rights Watch, 2021), https://www.hrw.org/sites/default/files/media_2021/11/us_lgbt1121_web_0.pdf.

52 D'Lane R. Compton, Tey Meadow, and Kristen Schilt, Other, Please Specify: Queer Methods in Sociology (Berkeley, CA: California University Press, 2018), 277-290.

53 Sari L. Reisner and Jaclyn M. W. Hughto, "Comparing the health of non-binary and binary transgender adults in a statewide non-probability sample," *PLoS One* 14, no. 8 (2019): e0221583, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6711503/.

54 James et al., *2015 US Transgender Survey*, 199.

Chapter 13. Future Research

The CincyTEA survey was developed considering a broad scope of community needs. Since a needs assessment of the Cincinnati Metro Area transgender and/or non-binary communities has not been conducted previously, the CincyTEA research team and TAC board members developed the survey hoping to capture various dimensions of community experience. Although this breadth was needed at the onset of the study, more nuanced research on the specific needs of trans and non-binary communities is necessary. Further research is needed on local barriers to documentation changes, community healthcare needs and desires, and policies that address the intersections of transphobia, ageism, racism, and ableism. Continuing these lines of research will enable local organizations and policymakers to better serve trans and non-binary folks in the greater Cincinnati area.

Chapter 14. Appendices

14.1 CincyTEA Survey Instrument

Who we are: The Cincinnati Transgender Essentials Assessment (CincyTEA) is a joint project between the [Transgender Advocacy Council (TAC)](#) and a research team from [The Cincinnati Project at the University of Cincinnati](#). This project is approved under the University of Cincinnati Institutional Review Board's umbrella protocol for The Cincinnati Project (IRB #2019-1388).

Purpose of this research study: We want to understand the unique needs of the transgender community in the Greater Cincinnati area. To us, "transgender" describes people whose gender identity or expression is different, at least part of the time, from the sex assigned to them at birth.

What is asked of you: To complete a survey that asks you about your identities and everyday experiences. This survey is anonymous (no one will know your identity) and your responses will not be shared.

Who to contact for help or questions: You can e-mail the research team at CincyTEA21@gmail.com or call 513-299-7576.

Risks to being in this research study: You will not be exposed to any risk by being in this research study. Some questions may make you uncomfortable. You can refuse to answer any questions that you don't want to answer.

What will you get because of being in this research study: At the end of this survey, you will be linked to a separate page for the opportunity to enter a drawing for one of five $100 Target Gift Cards. To enter the drawing, you will be asked for your name and a phone number or email address. Your drawing entry cannot be matched to your survey.

How your research information will be kept confidential: Information about you will be kept private by limiting access to research data to the research team. In this study, we will not ask your name or other identifiable information. Your information will be kept on a secure network for an indefinite amount of time. Information will be used to improve existing community agency services and identify new needs. Information may be used for academic publications and presentations. The data from this research study may be published, but you will not be identified by name. Agents of the University of Cincinnati may inspect study records for audit or quality assurance purposes. The researcher cannot promise that information sent by the internet or email will be private.

Do you have to take part in this research study?: No one has to be in this research study. Refusing to take part will NOT cause any penalty or loss of benefits that you would otherwise have. You may skip any questions that you don't want to answer. You may start and then change your mind and stop at any time. To stop being in the study, you should e-mail CincyTEA21@gmail.com or call 513-299-7576.

What are your legal rights in this research study?: Nothing in this consent form waives any legal rights you may have. This consent form also does not release the investigator, the institution, or its agents from liability for negligence.

BY COMPLETING THIS SURVEY, YOU INDICATE YOUR CONSENT FOR YOUR ANSWERS TO BE USED IN THIS RESEARCH STUDY.

AN INFORMATION SHEET FOR YOUR RECORDS CAN BE PROVIDED UPON REQUEST.

Eligibility Questions

1. **Which county do you live in?** *(Choose 1 option)*
   - ○ IN-Dearborn
   - ○ IN-Franklin
   - ○ IN-Ripley
   - ○ IN-Ohio
   - ○ IN-Union
   - ○ KY-Boone
   - ○ KY-Campbell
   - ○ KY-Grant
   - ○ KY-Kenton
   - ○ OH-Adams
   - ○ OH-Auglaize
   - ○ OH-Brown
   - ○ OH-Butler
   - ○ OH-Champaign
   - ○ OH-Clark
   - ○ OH-Clermont
   - ○ OH-Clinton
   - ○ OH-Darke
   - ○ OH-Greene
   - ○ OH-Hamilton
   - ○ OH-Highland
   - ○ OH-Miami
   - ○ OH-Montgomery
   - ○ OH-Preble
   - ○ OH-Shelby
   - ○ OH-Warren
   - ○ None of these

2. **What is your age (in years)?** *(Write in answer)*

   _____

3. **Do you consider yourself to be transgender?** *(Choose 1 option)*

  ○ Yes

  ○ No

4. **Do you consider yourself to be non-binary?** *(Choose 1 option)*

  ○ Yes

  ○ No

End of Section 1/7

Let's start with some quick demographics!

5. **Which of the following terms would you use to describe yourself?** *(Select all that apply).*

  ○ Transgender

  ○ Transexual

  ○ FTM (female to male)

  ○ MTF (male to female)

  ○ Intersex

  ○ Gender non-conforming or gender variant

  ○ Genderqueer

  ○ Androgynous

  ○ Agender

  ○ Bigender

  ○ Feminine male

  ○ Masculine female or butch

  ○ A.G. or Aggressive

  ○ Third Gender

  ○ Crossdresser

  ○ Drag Performer (King/Queen)

  ○ Two-Spirit

  ○ Other, please specify: _____

  ○ None of the above

6. **What is your race/ethnicity?**

  ○ American Indian or Alaska Native, please include your enrolled or principal tribe, if applicable: _____

  ○ Arab or Middle Eastern

○ Asian

○ Black or African American

○ Hispanic or Latine/o/a/x, or Spanish Origin

○ Native Hawaiian or Other Pacific Islander

○ Multiracial or mixed race

○ White or Caucasian

○ Another race, please specify: _____

○ Prefer not to answer

7. **What is your sexual orientation?** *(Select all that apply).*

○ Gay/Lesbian/Same-gender attraction

○ Bisexual

○ Pansexual

○ Queer

○ Heterosexual

○ Asexual

○ Other, please specify: _____

○ Prefer not to answer

8. **What is your current relationship status?** *(Select all that apply).*

○ Single

○ Partnered

○ Civil union

○ Married

○ Separated

○ Divorced

○ Widowed

○ In a polyamorous relationship

○ Other, please specify: _____

○ Prefer not to answer

9. **What kind of health insurance do you have?** *(Select all that apply).*

○ None (no health insurance)

○ Employer-sponsored insurance 9from your job or someone else's job)

○ Medicare (federally sponsored health insurance for people receiving disability benefits and for those 65+)

○ Medicaid (state sponsored health insurance for people with low incomes, e.g. Buckeye Health Plan, CareSource, Molina Healthcare, Paramount Advantage, UnitedHealthcare Community Plan)

○ Healthcare.gov Insurance (also known as ACA, Obamacare, or marketplace insurance – you may have received a "premium tax credit" to help pay for this kind of insurance)

○ Veterans Administration (VA) health care (formerly TRICARE)

○ COBRA (employer sponsored insurance that you pay for out of pocket after you lose a job)

○ Other, please specify: _____

○ Prefer not to answer

10. **Do you have dental insurance?** *(Select all that apply).*

   ○ Yes

   ○ No

   ○ Don't know

   ○ Prefer not to answer

11. **How long have you lived in Cincinnati?** *(Select one option).*

   ○ Less than 6 months

   ○ Between 6 months to a year

   ○ 1-2 years

   ○ 3 or more years

   ○ Prefer not to answer

12. **What ZIP code do you live in?** *(Write in answer).* _____

End of Section 2/7

This section is about housing and transportation.

13. **Which of the following statements describes your current living arrangements?** *(Select all that apply).*

   ○ Living in a shelter

   ○ Living in a group home facility or other foster care situation

   ○ Living in a nursing/adult care facility

   ○ Living in campus/university housing

   ○ Living with parents or family you grew up with

   ○ Staying with friends or family temporarily

○ Living with a partner, spouse or other person who pays for the housing

○ Living in house/apartment/condo I RENT alone or with others

○ Living in house/apartment/condo I OWN alone of with others

○ Living on the street, in a car, in an abandoned building, or elsewhere that is NOT a house, apartment, shelter or housing facility

○ Living in a domestic violence shelter

○ Other, please specify: _____

○ Prefer not to answer

14. **Over the last year, have you been evicted?** *(Select one option).*

○ Yes

○ No

○ Prefer not to answer

15. **Over the last year, have you experienced homelessness?** *(Select one option).*

○ Yes

○ No

○ Prefer not to answer

16. **Have you had to change residence two of more times over the last year?** *(Select one option).*

○ Yes

○ No

○ Prefer not to answer

17. **How do you usually get around (to work, to the grocery store, etc…)?** *(Select all that apply).*

○ Car, truck, or van

○ Bus

○ Streetcar

○ Taxicab

○ Rideshare App (Lyft, Uber, etc…)

○ Motorcycle

○ Bicycle

○ Walking

○ Other method, please specify: _____

18. **How far away is the closest bus or train stop (when walking)?** *(Select one option).*

○ 5 minutes

○ 10 minutes

○ 15 minutes

○ More than 15 minutes

○ Don't know

19. **Rate the ease of using public transit in your area.** *(Select one option.)*

○ Very easy

○ Somewhat easy

○ Somewhat challenging

○ Very challenging

○ I don't use transit

End of Section 3/7

This next section is about your income.

20. **What is your current employment status?** *(Select all that apply).*

○ Full-time

○ Part-time

○ More than one job

○ Self-employed, own your business

○ Self-employed, contract worker

○ Unemployed but looking

○ Unemployed and stopped looking

○ On disability

○ Student

○ Retired

○ Homemaker or full-time parent

○ Other, please specify: _____

○ Prefer not to answer

21. **In the last 12 months have you traded sex for money/food/housing/other?** *(Select one option).*

○ Yes

○ No

○ Prefer not to answer

22. **What is the highest degree or level of education you have completed?** *(Select one option).*

○ Elementary and/or junior high

○ Some high school

○ High school graduate – high school Diploma or the equivalent (for example: GED)

○ Some college credit, but less than 1 year

○ Technical school degree (such as cosmetology or computer technician)

○ One or more year of college, no degree

○ Associate degree (for example: AA, AS)

○ Bachelor's degree (for example: BA, AB, BS)

○ Master's degree (for example: MA, MS, MEng, Med, MSW, MBA)

○ Professional degree (for example: MD, DDS, DVM, LLB, JD)

○ Doctorate degree (for example: PhD, EdD)

○ Prefer not to answer

23. **How many people live in your household (or living environment if you are houseless, homeless, living with friends etc.), including adults and children?**
A "household" includes you and members of your household who have lived with you during the past 12 months. (Please enter a number. If you would prefer not to answer, please skip this question). _____

24. **How many dependents are you a legal guardian or parent to, or otherwise responsible for?**
(Please enter a number. If you would prefer not to answer, please skip this question).
_____

25. **Which category below represents your HOUSEHOLD income in 2020 from all sources (before taxes)? This includes money from jobs, employment, net income from business, income from farms or rentals, income from self-employment, pensions, dividends, interest, social security payments, and other money income that you and your family received all together in 2020.** *(Select one option).*

○ Not applicable/I have no steady income

○ Less than $10,000

○ $10,000 to $19,999

○ $20,000 to $29,999

○ $30,000 to $39,999

○ $40,000 to $49,999

○ $50,000 to $59,999

○ $60,000 to $69,999

○ $70,000 to $79,999

○ $80,000 to $89,999

○ $90,000 to $99,999

○ $100,000 to $149,999

○ $150,000 to $199,999

○ $200,000 to $250,000

○ More than $250,000

○ Prefer not to answer

26. **How much of your monthly income goes to pay rent or mortgage payments?** *(Select one option).*

○ Less than 25% (a quarter of your income)

○ Between 25% and 33% (between a quarter to a third of your income)

○ Between 33% and 50% (between a third to half of your income)

○ More than 50% (more than half of your income)

○ Don't know

○ Prefer not to answer

27. **How much savings do you have?** *(Select one option).*

○ $0

○ <$1,000

○ Between $1k and $2k

○ Between $2k and $5k

○ Between $5k and $10k

○ Between $10k and $20k

○ More than $20k

○ Don't know

○ Prefer not to answer

End of Section 4/7

This section is about your experiences of discrimination.

Please think carefully about your life as you answer the questions below. For each question, read the question then answer it twice: answer once for what your ENTIRE LIFE (from when you were a child to now) has been like, and then once for what the PAST YEAR has been like. Click on the circle that best describes events in YOUR ENTIRE LIFE, and in the PAST YEAR, using these rules:

Never = If the event has NEVER happened to you.
Once in a while = If the event happened less than 10% of the time.
Sometimes = If the event happened 10-25% of the time.
A lot = If the event happened 26-49% of the time.
Most of the time = If the event happened 50-70% of the time.
Almost all of the time = if the event happened more than 70% of the time.

BECAUSE OF OTHERS' TRANSGENDER PREJUDICE, HOW OFTEN HAVE YOU . . .

28. Had others deny or minimize your experiences of transgender discrimination?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

29. Been denied opportunities in the workplace (e.g. promotion, raise, opportunities to work with customers, work on certain projects, not offered professional development opportunities)?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

30. Experienced maltreatment in health care settings?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

31. Experienced harassment or bullying from peers in educational settings?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	O	O
Once in a while	O	O
Sometimes	O	O
A lot	O	O
Most of the time	O	O
Almost all of the time	O	O

32. Experienced harassment (e.g. slurs, physical harm, prolonged "pat downs") from law enforcement (e.g. police officers, security officials, transportation security administration)?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	O	O
Once in a while	O	O
Sometimes	O	O
A lot	O	O
Most of the time	O	O
Almost all of the time	O	O

33. Been judged by others after they learned about your gender identity?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	O	O
Once in a while	O	O
Sometimes	O	O
A lot	O	O
Most of the time	O	O
Almost all of the time	O	O

34. Heard comments that all transgender persons are the same (e.g. assumptions that all transgender people undergo or wish to undergo gender affirming surgeries)?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	O	O
Once in a while	O	O

	Over your ENTIRE LIFE	Over the LAST YEAR
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

35. Experienced limited mentorship in career settings?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

36. Been discriminated against while trying to access health care (e.g. gynecological exams, shots, prostate exams, etc…)?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

37. Had teachers or instructors refuse to stop abuse or bullying directed toward you?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

38. Been unfairly questioned about your gender identity by law enforcement (e.g. police officers, security officials, transportation security administration)?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○

Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

39. Experienced people in your life who refused to use your true gender pronouns (e.g. he, her, they, zir)?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

40. Received demeaning messages about your physical appearance (e.g., you do not look "enough" like your true gender identity, comments about your attire, "I never would have known that you're trans")?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

41. Been denied employment?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

42. Had to educate doctors, nurses, or administrative staff about transgender-related health care?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

43. Experienced harassment from faculty, staff, and administrators in educational settings?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

44. Heard intrusive comments about your body (e.g., "what's between your legs?")?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

45. Been expected to be or act in gender-conforming ways?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○

Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

46. Experienced social rejection in educational settings?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

47. Experienced harassment from family members?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

48. Been stopped by law enforcement (e.g., police officers, security officials, transportation security administration) and unfairly questioned?

	Over your ENTIRE LIFE	Over the LAST YEAR
Never	○	○
Once in a while	○	○
Sometimes	○	○
A lot	○	○
Most of the time	○	○
Almost all of the time	○	○

End of Section 5/7

This second to last section is about your health and healthcare experiences.

49. In general, would you say your health is excellent, very good, good, fair, or poor? *(Select one option).*

○ Excellent

○ Very good

○ Good

○ Fair

○ Poor

50. Over the course of your LIFETIME, how often have you… *(Select one option for each row).*

	Never	Sometimes	About half the time	Most of the time	Always	Not Applicable
Gone without a prescription or needed medications?	○	○	○	○	○	○
Gone without recommended tests for a medical concern	○	○	○	○	○	○
Gone without recommended treatments for a medical concern?	○	○	○	○	○	○
Put off seeing a doctor for medical concerns?	○	○	○	○	○	○

51. In the PAST 12 MONTHS how often did you… *(Select one option for each row).*

	Never	Sometimes	About half the time	Most of the time	Always	Not Applicable
Gone without a prescription or needed medications?	○	○	○	○	○	○
Gone without recommended tests for a medical concern	○	○	○	○	○	○
Gone without recommended treatments for a medical concern?	○	○	○	○	○	○
Put off seeing a doctor for medical concerns?	○	○	○	○	○	○

52. When you are sick of have a concern about your health, where do you MOST OFTEN go for help? *(Select one option).*

○ Ask a spiritual or cultural leader for advice

○ Call a hotline or another helpline

○ Primary care doctor

○ Emergency Department at Hospital

○ Free clinic

○ Friend or family member

○ Health Care Centers / FQHC (where I always see the same providers)

○ Health Care Centers / FQHC (where I always see different providers)

○ Pharmacy

○ Search online for healthcare providers

○ Search online for information about your symptoms

○ Speak with my medical insurance provider

○ Urgent Care

○ Walk-in Clinics (Minute Clinics)

○ I don't have a place or person to go to

○ Prefer not to answer

○ Other, please specify:_____

53. **Overall, how would you describe the quality of health care you typically receive?** *(Select one option).*

○ Poor

○ Fair

○ Good

○ Very Good

○ Excellent

○ Not Applicable

54. **Did the COVID-19 pandemic affect you in an of the following ways?** *(Select all that apply).*

○ I lost my primary source of income.

○ I could no longer afford to pay rent.

○ I was evicted.

○ I lost someone close to me due to COVID.

○ I was or felt isolated.

○ I was depressed and/or anxious more than usual.

○ Other, please specify: _____

○ I was not affected by COVID-19.

○ Prefer not to answer

55. **Have you received a COVID-19 vaccine?** *(Select one option).*

○ Yes

○ No, I don't want one

○ No, I can't access one

○ Prefer not to answer

56. ***IF NONE OF THE FOLLOWING ANSWER OPTIONS APPLY TO YOU, PLEASE SKIP TO QUESTION 59.**

    While living in Cincinnati or the Cincinnati Metro Area, which of the following transition-related healthcare services have you received? *(Select all that apply).*

    ○ Licensed counseling of psychotherapy

    ○ Masculinizing hormones (e.g. testosterone)

    ○ Masculinizing top surgery (e.g. mastectomy, masculoplasty, etc.)

    ○ Masculinizing bottom surgery (e.g. removal of uterus, ovaries, or vagina, lengthening of urethra, creation of penis, etc.)

    ○ Facial masculinization surgery (e.g. brow bone, forehead, or skull augmentation, etc.)

    ○ Feminizing hormones (e.g. estrogen, progestin, testosterone-blockers)

    ○ Feminizing top surgery (e.g. breast augmentation, breast lifting, etc.)

    ○ Feminizing bottom surgery (e.g. creation of vagina, vulva, or labia, removal or penis or testes, etc.)

    ○ Facial feminization surgery (e.g. brow bone reduction, forehead augmentation, brow lifting, tracheal shave, etc.)

    ○ Vocal feminization surgery

    ○ Fertility preservation (freezing eggs, sperm, and/or embryos)

    ○ Speech therapy

    ○ Hairline lowering, scalp advancement, and/or hair transplantation

    ○ Laser hair removal and/or electrolysis

57. **For the following healthcare services that you had while living in Cincinnati, how did you pay for them?** *(select one option for each row).*

	My insurance did not pay. I paid entirely out of pocket.	My insurance paid for all of it.	My insurance paid for some of it.	I don't know	Not applicable
Licensed counseling of psychotherapy	○	○	○	○	○
Masculinizing hormones (e.g. testosterone)	○	○	○	○	○
Masculinizing top surgery (e.g.	○	○	○	○	○

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mastectomy, masculoplasty, etc.)					
Masculinizing bottom surgery (e.g. removal of uterus, ovaries, or vagina, lengthening of urethra, creation of penis, etc.)	○	○	○	○	○
Facial masculinization surgery (e.g. brow bone, forehead, or skull augmentation, etc.)	○	○	○	○	○
Feminizing hormones (e.g. estrogen, progestin, testosterone-blockers)	○	○	○	○	○
Feminizing top surgery (e.g. breast augmentation, breast lifting, etc.)	○	○	○	○	○
Feminizing bottom surgery (e.g. creation of vagina, vulva, or labia, removal or penis or testes, etc.)	○	○	○	○	○
Facial feminization surgery (e.g. brow bone reduction, forehead augmentation, brow lifting, tracheal shave, etc.)	○	○	○	○	○
Vocal feminization surgery	○	○	○	○	○
Fertility preservation (freezing eggs, sperm, and/or embryos)	○	○	○	○	○
Speech therapy	○	○	○	○	○
Hairline lowering, scalp advancement, and/or hair transplantation	○	○	○	○	○
Laser hair removal and/or electrolysis	○	○	○	○	○

58. For the following healthcare services that you had while living in Cincinnati, where did you obtain services? *(select one option for each row).*

	In Greater Cincinnati	In another city in Ohio (e.g. Columbus or Cleveland)	Outside of Ohio	I don't know	Not applicable
Licensed counseling of psychotherapy	○	○	○	○	○
Masculinizing hormones (e.g. testosterone)	○	○	○	○	○
Masculinizing top surgery (e.g. mastectomy, masculoplasty, etc.)	○	○	○	○	○
Masculinizing bottom surgery (e.g. removal of uterus, ovaries, or vagina, lengthening of urethra, creation of penis, etc.)	○	○	○	○	○
Facial masculinization surgery (e.g. brow bone, forehead, or skull augmentation, etc.)	○	○	○	○	○
Feminizing hormones (e.g. estrogen, progestin, testosterone-blockers)	○	○	○	○	○
Feminizing top surgery (e.g. breast augmentation, breast lifting, etc.)	○	○	○	○	○
Feminizing bottom surgery (e.g. creation of vagina, vulva, or labia, removal or penis or testes, etc.)	○	○	○	○	○
Facial feminization surgery (e.g. brow bone reduction, forehead augmentation, brow lifting, tracheal shave, etc.)	○	○	○	○	○

Vocal feminization surgery	○	○	○	○	○
Fertility preservation (freezing eggs, sperm, and/or embryos)	○	○	○	○	○
Speech therapy	○	○	○	○	○
Hairline lowering, scalp advancement, and/or hair transplantation	○	○	○	○	○
Laser hair removal and/or electrolysis	○	○	○	○	○

59. **For the following healthcare services that you DID NOT HAVE while living in Cincinnati, do you want to have them?** *(select one option for each row).*

	Do not want it	Want it, but cannot afford it	Want it, but am waiting due to reasons other than financial	Prefer not to answer	Not applicable
Licensed counseling of psychotherapy	○	○	○	○	○
Masculinizing hormones (e.g. testosterone)	○	○	○	○	○
Masculinizing top surgery (e.g. mastectomy, masculoplasty, etc.)	○	○	○	○	○
Masculinizing bottom surgery (e.g. removal of uterus, ovaries, or vagina, lengthening of urethra, creation of penis, etc.)	○	○	○	○	○
Facial masculinization surgery (e.g. brow bone, forehead, or skull augmentation, etc.)	○	○	○	○	○
Feminizing hormones (e.g. estrogen, progestin, testosterone-blockers)	○	○	○	○	○
Feminizing top surgery (e.g. breast augmentation, breast lifting, etc.)	○	○	○	○	○
Feminizing bottom surgery (e.g. creation of vagina, vulva, or labia, removal or penis or testes, etc.)	○	○	○	○	○
Facial feminization surgery (e.g. brow bone reduction, forehead	○	○	○	○	○

augmentation, brow lifting, tracheal shave, etc.)					
Vocal feminization surgery	○	○	○	○	○
Fertility preservation (freezing eggs, sperm, and/or embryos)	○	○	○	○	○
Speech therapy	○	○	○	○	○
Hairline lowering, scalp advancement, and/or hair transplantation	○	○	○	○	○
Laser hair removal and/or electrolysis	○	○	○	○	○

End of Section 6/7

To conclude, we would like to ask you about policy regarding transgender people in Greater Cincinnati.

60. **Which of the following documents or records have you been able/allowed to change to reflect your current gender?**
(Select one option for each row. Mark "Not applicable" if you have no desire to change the gender on the document listed.)

	Yes, changes allowed	No, changes denied	Not tried	Not applicable
Birth certificate	○	○	○	○
Driver's license and/or state issued non-driver ID	○	○	○	○
Social Security records	○	○	○	○
Passport	○	○	○	○
Work ID	○	○	○	○
Military discharge papers (DD214 or DD215)	○	○	○	○
Medical records	○	○	○	○
Student records	○	○	○	○
Professional licenses or credentials	○	○	○	○

61. In order to understand the priorities of our community, please indicate how important the following issues are to you.

(Select one option per row.)

	Not Important	Somewhat Important	Important	Very Important
Access to trans-sensitive health care	○	○	○	○
Passing anti-bullying laws	○	○	○	○
Transition-related health insurance coverage	○	○	○	○
Trans prisoners' rights	○	○	○	○
Access to treatment and prevention for HIV/AIDS	○	○	○	○
Better treatment from police	○	○	○	○
Decriminalization of sex work	○	○	○	○
Victim's rights services	○	○	○	○
Immigration policy reform	○	○	○	○
Trans-sensitive shelters	○	○	○	○
Stronger hate/bias crime laws	○	○	○	○
Trans-sensitive public programs	○	○	○	○
Job training programs	○	○	○	○
Access to affordable housing	○	○	○	○
Employment decimation	○	○	○	○

62. Are there policy priorities missing from this list? What are they?

_____

_____

_____

End of Survey

Thank you for taking this survey.

The Cincinnati Transgender Essentials Assessment (CincyTEA) is a joint project between the Transgender Advocacy Council (TAC) and a research team from The Cincinnati Project at the University of Cincinnati.

If you would like to be entered into the raffle for one of several $100 gift cards, please have the person administering you the survey fill out the google form with your contact information.

Information entered into for the raffle will be kept confidential and will be deleted after the raffle is concluded. We will only contact you according to your preferences as specified in the raffle form. Your data for the raffle cannot be linked to your survey responses.

14.2 Transgender Discrimination Scale (TDS)

Trans Discrimination Scale

Please think carefully about your life as you answer the questions below. For each question, read the question and then answer it twice: answer once for what your ENTIRE LIFE (from when you were a child to now) has been like, and then once for what the PAST YEAR has been like. Circle the number that best describes events in YOUR ENTIRE LIFE, and in the PAST YEAR, using these rules:

Circle 1 = If the event has NEVER happened to you.

Circle 2 = If the event happened ONCE IN A WHILE (less than 10% of the time)

Circle 3 = If the event happened SOMETIMES (10–25% of the time)

Circle 4 = If the event happened A LOT (26–49% of the time)

Circle 5 = If the event happened MOST OF THE TIME (50–70% of the time)

Circle 6 = If the event happened ALMOST ALL OF THE TIME (more than 70% of the time)

BECAUSE OF OTHERS' TRANSGENDER PREJUDICE, HOW OFTEN HAVE YOU . . .

1. Had others deny or minimize your experiences of transgender discrimination?

2. Been denied opportunities in the workplace (e.g., promotion, raise, opportunities to work with customers, work on certain project, not offered professional development opportunities)?

3. Experienced maltreatment in health care settings?

4. Experienced harassment or bullying from peers in educational settings?

5. Experienced harassment (e.g., slurs, physical harm, prolonged "pat downs") from law enforcement (e.g., police officers, security officials, transportation security administration)?

6. Been judged by others after they learned about your gender identity?

7. Heard comments that all transgender persons are the same (e.g., assumptions that all transgender people undergo or wish to undergo gender affirming surgeries)?

8. Experienced limited mentorship in career settings?

9. Been discriminated against while trying to access health care (e.g., gynecological exams, shots, prostate exams, etc.)?

10. Had teachers or instructors refuse to stop abuse or bullying directed toward you?

11. Been unfairly questioned about your gender identity by law enforcement (e.g., police officers, security officials, transportation security administration)?

12. Experienced people in your life who refused to use your true gender pronouns (e.g., he, her, they, zir)?

13. Received demeaning messages about your physical appearance (e.g., you do not look "enough" like your true gender identity, comments about your attire, "I never would have known that you're trans")?

14. Been denied employment?

15. Had to educate doctors, nurses, or administrative staff about transgender-related health care?

16. Experienced harassment from faculty, staff, and administrators in educational settings?

17. Heard intrusive comments about your body (e.g., "what's between your legs?")?

18. Been expected to be or act in gender-conforming ways?

19. Experienced social rejection in educational settings?

20. Experienced harassment from family members?

21. Been stopped by law enforcement (e.g., police officers, security officials, transportation security administration) and unfairly questioned?

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