Trauma Informed Leadership Development for the Trans Community

Daisy Kawa + Eric Wat
Asian Pacific AIDS Intervention Team
CIBHS 2018 Cultural Competence Summit
Agenda

• Introductions & Expectations
• APAIT’s Programming for the Trans Community
• Social Determinants of Health in the Trans Community
• Overview of Trans Leadership Development Curriculum
• Discussion
• Evaluation
Presenters

Daisy Kawa
- genderqueer femme
- (pronoun: she/they)
- APAIT Trans Program Health Educator
- Co-Facilitator of SOUL

Eric Wat
- cis gay male
- (pronoun: he/him/his)
- APAIT Consultant
- Co-developer of the Trans Leadership Development Curriculum
Trans Empowerment Program

Oct 18 - 19, 10am - 4pm

Leadership Training
Internship Opportunity
Refreshments
Target Gift Card*
*offered to those who qualify

PAID INTERNSHIP
REFRESHMENTS
TARGET GIFT CARD

OCTOBER 18-19
10 AM - 4 PM
APAINT
Framing our life stories.
A recognition by researchers and policymakers that a person's health is not only dependent on their biological/genetic make-up or their behavior, but also on many social, economic, and environmental factors.

- Safe housing, local food markets
- Quality education, economic, and job opportunities
- Access to health care services
- Community support or social cohesion
- Transportation
- Public safety
- Exposure to violence, crime, or social disorder
- Racism and other kinds of discrimination
- Poverty - and stress from poverty
- Language or literacy
- Green space (open parks and nature)
- Exposure to toxic chemicals and pollution
Social determinants of health are tied to health disparities, the concept that health differences between communities are due to similar environmental exposures or sociopolitical status.

Race is a key factor in health disparities. For example, Black and Latinx communities have a higher rate of diabetes than White communities.

Gender also plays a major role. For instance, women are more likely to be subject to violence than men.

The place you live, or your environment, can shape your scope of opportunities. For example, rural communities have a higher mortality rate than urban communities.
Health
Trans adults are less likely to describe themselves as healthy.
Also more likely to let health problems go untreated.

Cognition
Trans adults have more cognitive problems:
Trouble concentrating, remembering, or making decisions.

HIV
1 in every 4 trans women are living with HIV.
More than half of Black trans women are living with HIV.

Depression
Trans adults are more likely to be depressed.
41% of Trans people have attempted suicide, 30% smoke daily, 26% abuse drugs and alcohol.

Many differences between communities are socially designed.
LET’S GET SPECIFIC

Harassment
65% of Trans people reported discrimination in a public accommodation setting within the past year.

19% of hate violence survivors are trans.

Incarceration
1 in 6 Trans people have been incarcerated.

19% of trans women (60% of Black trans women) have a history of incarceration.

25% of trans women are denied healthcare services while incarcerated.

Cycle
29% of Trans people have to teach their health care provider about trans issues.

Trans people are burdened with both defending themselves and educating others.

Microaggressions become emotionally exhausting.
Compounding Intersectional Oppression: Hierarchical Positionality

Race
- Poverty
  - Stress and limited resources
- Barriers to education and employment
  - Can lead to “survival crimes”
- Police
  - Profiling
  - Harassment
  - 46% of Trans people are uncomfortable seeking police assistance

Gender
- Misogyny + Transphobia
- Criminalized for using the “wrong” bathroom
- Gender misclassified in incarceration
  - Denied access to hormones
  - Increased sexual violence
  - Harrassment and abuse by prisoners and staff
Compounding Intersectional Oppression: HIV Status

**Exposure**
- Violence
- Lack of family support
- Unemployment
- Homelessness
- Multiple sexual partners
- Sex work
- Sharing syringes (hormones)
- Substance misuse

**Stigma**
- Discrimination
  - Outside and within the “community”
- Social rejection / Exclusion
  - Prevented from fully participating in society
- Insensitive health care providers
  - Lack of culturally specific programs
  - Lack of studied evidence (Trans men)
<table>
<thead>
<tr>
<th>Barriers to Access</th>
<th>Education</th>
<th>Employment</th>
<th>Healthcare</th>
<th>Housing</th>
<th>Transphobia</th>
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<tbody>
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<td></td>
<td>Many Trans youth drop out because of bullying, violence, or discrimination at school.</td>
<td>Discrimination in hiring and hostile / uncomfortable workplace environments.</td>
<td>Lack of access due to unemployment or underemployment. Culturally incompetent care</td>
<td>Kicked out of home, housing discrimination, harassment by shelter staff / patrons</td>
<td>Emotionally draining interactions with bigotry and concern with physical safety.</td>
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Substance Use

Homelessness

Syndemic: mutually reinforcing interaction of disease and social conditions.

Sex Work

HIV Status
Trauma Informed Leadership

Why Addressing Trauma is Important in a Leadership Development Program

• Disproportional number of people in our Trans community experienced trauma. It’s important to center empathy in our leadership.

• Being a leader in the Trans community often means being able to manage not only our own emotions, but also those from others that we are trying to serve.

• The tight-knit nature of the Trans community also means leaders need to learn to develop professional boundaries to remain calm and effective so that they can hold space for others.

• Advocating for the community, especially when talking with transphobic policymakers, can trigger past traumatic experiences.

• Activism and advocacy could be positive coping strategies.
Leadership Development Objectives

• To train participants to become advocates and leaders in the Trans community by:
  • Increasing their confidence and recognition of their leadership potential
  • Increasing their knowledge of issues affecting the Trans community and of the public entities that make policy decisions about them in Los Angeles
  • Improving their leadership and advocacy skills, including emotional management, teamwork, public speaking, event planning, and community outreach
  • Increase participants’ self-efficacy to make good and responsible decisions in their lives, including healthy behavior, workforce readiness, and civic engagement.
Two-Day Workshop (12 Hours)

Day 1: Conceptual Framing
1. What is Collaborative Leadership?
2. Emotional Intelligence
3. Diversity of the Trans Community
4. Social Determinants of Health

Day 2: Actionable Practice
5. Storytelling as Advocacy: Writing and Giving Public Testimonies
6. Understanding Public Entities That Make Policy Decisions about the Trans Community in Los Angeles
7. Event Planning
8. Community Outreach
# Weekly Internship (12 Weeks)

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<tr>
<th><strong>Office Etiquette</strong></th>
<th><strong>Community Engagement</strong></th>
<th><strong>Event Planning</strong></th>
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<td>• Interns learn basic office etiquette and shadow various mentors.</td>
<td>• Interns build work experience by attending outreach events and assisting with established programs.</td>
<td>• Interns utilize the skills they have built and the connections they have made to lead a community focused event.</td>
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<td>• Professionalism</td>
<td>• Hands-on Experience</td>
<td>• Direct Action</td>
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Personal Testimony 1
Personal Testimony II
Thank You

Eric Wat + Daisy Kawa