CALIFORNIA STATE UNIVERSITY, NORTHRIDGE

| Understanding How Cisgenderism Creates Barriers to Stabilization When Accessin | g |
|--|---|
| Shelter Services Amongst Housing Insecure Transwomen in Los Angeles. | |

A graduate project submitted in partial fulfillment of the requirements for the degree of Master of Social Work

Ву

Anthony D Ross

| The graduate project of Anthony D Ross is appro | ved: |
|---|------|
| Dr. Wendy Ashley | Date |
| Dr. Allen Lipscomb | Date |
| Dr. M.Alejandra Acuña, Chair | Date |

California State University, Northridge

Table of Contents

| Signature Page | ii |
|---------------------------------|----|
| Abstract | iv |
| Introduction | 1 |
| Method | 4 |
| Results | 7 |
| Discussion | 16 |
| References | 21 |
| Appendix A: Interview Questions | 24 |
| Appendix B: Consent Form | 26 |

Abstract

Understanding How Cisgenderism Creates Barriers to Stabilization When Accessing Shelter Services Amongst Housing Insecure Transwomen in Los Angeles.

By

Anthony Ross

Master of Social Work

Purpose: 43% of all transwomen have been homeless at some point in their lives. For transwomen, discrimination and subjugation, known as cisgenderism, continues as they access shelter services. Housing insecure transwomen are met at the shelter door by staff whose decision making power combines with the invisible effects of cisgenderism, in most cases, to negatively impact this vulnerable population.

Methods: Ten persons self-identifying as transwomen, trans, or transgender, over the age of 18 who are currently experiencing housing insecurity or have, within the last 10 years, were interviewed. All were asked a series of 36 open ended questions designed for participants to describe, in their own words, their interpersonal experiences while accessing shelter services.

Results: Themes emerged from interactions between participants and others in the shelter. Collectively, these interactions can be described as barriers to stabilization. Individually, they are best described as "stabilization fissure points". Three common stabilization fissure points emerged: the point when participants' gender identity clashed with the cisgender biased rules of the shelters/programs, the point where participants

were affected by the staff's subjective interpretation of those rules and lastly, the point where participants interacted with other shelter clients. 90% of interactions could be defined as 'stabilization fissure points' which negatively contributed to the shelter experience for study participants.

Discussion: Street Level Bureaucratic Theory inverts the traditional power structure of policy making. Policy is not the words that spell it out but rather, it is the actions of staff that interpret the words that make policy. The theory names these direct practice staff as "street level bureaucrats". The most alarming findings herein illuminate a pattern by staff of cisgender bias, where participants' rights, needs, and desires were at best, prioritized below that of the cisgender population and at worst, ignored. Most interactions involved dehumanizing behavior rooted in a belief that gender self-expression is part of an identity that is to be disregarded, disrespected, ignored, and ridiculed. Based on participants treatment by shelter staff outlined in this study, a more accurate moniker for them is 'Street Level Tyrants'.

Introduction

Transwomen are one of the most vulnerable populations in the United States. 43% of transwomen have been homeless at one point in their lives (Belzer, M., Brennan, J., Garofalo, R., Johnson, R., Kuhns, L., & Wilson, E., 2012). Researchers have found high prevalence of temporary housing, unstable housing, and homelessness among this population, with some estimates reaching as high as 47% (Clements-Nolle, Marx, Guzman, & Katz, 2001; Harawa & Bingham, 2009; Nemoto, Operario, Keatley, Han, & Soma, 2004; Sanchez, N.F., Sanchez, J.P., & Danoff, 2009; Sevelius, Reznick, Hart, & Schwarcz, 2009; Simon, Reback, & Bemis, 2000; Wilson, Garofalo, Harris, & Belzer, 2010). Many in this population report income less than \$1,000 per month (Clements-Nolle et al., 2001; Nemoto et al., 2004; Sevelius et al., 2009; Wilson et al., 2010). A seven year study found that elevated levels of stigma leads to reduced social support, barriers to educational attainment, and employment discrimination. As a result, young transwomen are dependent upon the street economy where drug use, sex work, and incarceration are highly correlated factors (Belzer et al., 2012). The evidence clearly illustrates that social stigma is positively correlated with transwomen becoming homeless.

Background

Most professionals have not been given adequate training regarding the needs of the transgender community (Spicer, S., 2010). When transwomen seek out shelter in Los Angeles, half experience harassment and a third are turned away (Fletcher, J.B., Kisler,

K.A. & Reback, C.J, 2014). Because of historical discrimination and abuse, this community is often unwilling to take advantage of the current services that are offered (Pechmann, C., Moore, E., Andreasen, A., Connell, P., Freeman, D., et al., 2011).

Additionally, the transpopulation experiencing homelessness face cisgenderism in their everyday lives as well as when accessing services. Lennon and Mistler (2014) define cisgenderism as "the cultural and systemic ideology that denies, denigrates or pathologizes self-identified gender identities that do not align with assigned gender at birth as well as resulting behavior, expression and community" (p.63). Shelton (2015) argues, as an orienting framework, cisgenderism, "expands the illustration of harassment and discrimination experiences of homeless transgender and gender expansive people from the micro level of interpersonal interactions to include the macro level of institutional structures that produce and maintain their marginalization" (Lennon & Mistler, p.11).

Michael Lipsky's street level bureaucratic theory focuses on street-level bureaucrats being the final policy makers because their actual interpretation or understanding of policy affects the delivery of services to those in need (Alden, 2015). This interpretation also "creates a space into which wider cultural morality flows" (Hunter, Bretherton, Halliday, Johnsen, 2016). Further studies have shown that gender, ethnicity, and social status of street level bureaucrats and clients can affect individual decisions on the frontlines (Hunter, Bretherton, Halliday, Johnsen, 2016). When these powerful subjective elements are combined with the invisible discrimination

created by cisgenderism, a street level bureaucrat becomes a person exercising power or control in a cruel, unreasonable, or arbitrary way which is the definition of 'tyrant' (Oxford, 2017). So, shelter staff, as they interact with transwomen, can best be defined as 'street level tyrants'. And it will be argued that these 'street level tyrants' are the most powerful destabilizing force affecting transwomen while accessing shelter services in Los Angeles.

Aims and Objectives

If the goal of social services is to stabilize housing, health, and employment for housing insecure people, then negative consequences from genderism, social stigma, and street level tyrants create barriers for the transpopulation to achieve stabilization. Ten participants were interviewed about their first hand experiences accessing shelter services in Los Angeles, California. All interviews were conducted using the same 36 questions (Appendix A). The interviews were studied to identify common experiences and themes shared amongst the participants. These themes are defined as moments of interpersonal interactions between participants and others in the shelter. Collectively, these moments can be described as barriers to stabilization. Individually, these moments are best described as "stabilization fissures points". If one conceptualizes 'stability' as a sturdy structure, then a "stabilization fissure point" is a small crack in that sturdy structure. Of course, one "fissure point" begins to weaken the structure and thus creates more fissure points. Numerous "fissure points" eventually cause that structure to fall apart. Understanding these fissure points is the first step in discovering solutions to improve the shelter experience for transwomen in Los Angeles.

Method

Subjects

Included in this qualitative exploratory study were persons self-identifying as transwomen, trans, or transgender, over the age of 18, who are currently experiencing housing insecurity or have, within the last 10 years. All self-reported that they have accessed shelter services in Los Angeles. Those excluded from the project were persons not fitting the intended inclusionary criteria.

Of the 10 participants, four were 20-30 years old, four were 30-40 years old and two were 41-55 years old. Seven identified as African American or Black, one identified as Middle-Eastern, one identified as Asian/Pacific Islander, and one identified as White. Four currently live in shelters, three are unsheltered, and three are currently housed. Two are working full time, three are working part-time, one declared "working" and four stated they are not working.

This researcher relied on the discretion of service organizations to connect to study participants. Service organizations were contacted and in the spirit of transparency, were provided a copy of the IRB approved "Consent Form" (Appendix B). The information in the form allowed the organization to fully understand the purpose of the study and allowed them to select appropriate study subjects. Before an interview was set, study subjects were given the list of interview questions and the consent form which included which demographic information would be used in the study and a pledge that no identifying information would be utilized.

Recruitment

Organizations that serve the transpopulation were contacted and the purpose of the study was stated. If an organization showed interest in the study, the Consent Form was sent to them. When an organization was interested in assisting, a list of participants were provided to the Researcher. Out of 15 participants, 10 had met the inclusionary criteria. Participants approved by the organization were then approached by Researcher. Procedures for consent included each participant being asked if they were willing to be digitally video recorded describing their experience in accessing emergency shelters. Participants were informed that self-disclosure was only limited by what the participants were willing to share for the recording. Participants were recorded as long as they were willing up to a maximum of 60 minutes. Participants were informed that they could end the recording at anytime, without cause. Participants were informed that the recorded media will be viewed for educational use. The material was recorded, transcribed and coded to search for common themes shared amongst participants. Common themes were incorporated into this paper and may be incorporated into a written article with the intent of submission for publication. No recordings or personal information will be submitted for publication.

These instructions were given verbally as well as in written form. Participants were paid \$100.00 in appreciation of their agreement to participate. Participants were asked to sign copies of the consent form and were provided a personal copy. Participants were informed, both verbally, and in written form, that this recorded digital media is not intended for profit, marketing, advertising or broadcast for any traditional media outlet

(radio, press, film or television networks) or uploaded to any publicly accessible digital media outlet including social or entertainment websites.

Procedure

Following Shelton's procedure, the heuristic process of phenomenological inquiry, described by Moustakas (2015), guided data analysis. The researcher asked each participant 36 interview questions. Interviews were transcribed by a transcription service. The researcher read through each transcript multiple times. Due to the exploratory nature of the study, active interpretation of the data did not take place at this early stage of interacting with the data. Instead, Moustakas suggests the researcher to "permit the glimmering and awakenings to form, allow the birth of understanding to take place in its own readiness and completeness" (as cited in Patton, 2002, p.486). Themes were shaped from interactions between participants and both staff and clients in the shelter. Collectively, these interactions can be described as barriers to stabilization. Individually, they are best described as "stabilization fissure points". Three common stabilization fissure points emerged: the point where participants' gender identity clashed with the cisgender biased rules of the shelters/programs, the point where participants were affected by the staff's subjective interpretation of those rules, and lastly, the point where participants interacted with other shelter clients.

Results

The findings revealed that participants' programmatic experiences were affected at three stabilization fissure points: Firstly, the point when participants' gender identity clashed with the cisgender biased rules of the shelters/programs. Secondly, during interactions with program staff. And lastly, during interactions with other clients. All interactions involved institutions not recognizing or affirming participants self-designated gender or the needs of this population. Participants narratives are included verbatim to describe the findings. Pseudonyms have been used and mentions of specific program names have been removed.

Fissure Points: The Rules

Rules can be defined as "a set of explicit or understood regulations or principles governing conduct within a particular activity or sphere" (Oxford, 2017). One can assume rules governing shelter programs are written with binary gender assumptions. Cisgender oriented people may not feel that these rules have a concrete application to this study's gender self-identified participants.

One participant shared a global perspective on social services response to the transcommunity:

There's not too many places where transpeople can feel safe and I sometimes feel that policies and legislation and program best practices are designed in a way that doesn't make space for us intentionally.

Additionally she commented on a shower rule:

We had special shower times and they said it was to protect us but I know it
wasn't to protect us, it was to make the cisgender females feel more comfortable although they were private shower stalls so it wasn't even a thing...

She shared her perspective on a rule to use an alternative bathroom:

They made us use a staff bathroom with a urinal in it...for some transwomen
that is literally enough to set off major PTSD...and that smell of the urinal
cake...it made me feel like there was just poison coursing through my veins...

Rules concerning participants' names were brought up by every participant:

When I asked for my paperwork, I was like 'I don't really use this name (her birth

name). 'Well, we have to have this in our file. It has to be this name otherwise we'll get in trouble for it.' How would you get in trouble for it? How would you get in trouble if I'm identifying as a transgender and that's not the name I go by? 'Well you have to do it our way or we'll kick you out.'

One participant shared why being called by her birth name, in a shelter, affected her:

I feel like a laughing stock, like I'm a fake, what I'm doing isn't real, it's pretend and it's embarrassing and discouraging and it leads me to question why I really did this which is a nightmare because I know deep down in my heart why I chose to transition.

Fissure Points: Interactions with Program Staff

Of the 54 comments made about interactions with staff, 43 were identified as

examples of "stabilization fissure points." The following 20 quotes, from seven participants, are clear examples of stabilization fissure points. When read in the order below, a broader synthesis of participants' shelter experiences with staff is revealed.

I've been to shelters in other places...there are always transphobic clients and staff. I just thought this one would be different because LA...(is) supposed to be trans friendly.

There were times I wasn't taken into a shelter based on my gender identity because the women wouldn't accept me and the men wouldn't accept me because they would fear I would become a liability.

Because I didn't fit into this box...they could just justify (why) I wasn't helped...I felt targeted because cisgender women, cisgender men could get help from a shelter but, I couldn't even do that because I didn't fit into the traditional binary. You can't pay someone \$10 an hour and have them come in and say okay, police these people because that is exactly what you're going to get. People who are not too concerned with the outcome of a problem because they're not getting paid to do it or they're not equipped to handle it.

They started asking questions about my genitalia...things that should not concern them. Things they would never ask a cisgender woman or a cisgender man so really, my gender, and what is below my waist, has nothing to do with your ability to provide services

I didn't want to be with the males no more, I feel uncomfortable. Could I be housed with the women? They was like 'Well we can't do that. We have to go

through a process. We have to see if they (ciswomen) are comfortable'. They just didn't want to do it. That's another reason why I left.

When you get in the door they was like, 'Oh we transgender friendly, oh we're cool'. But when you get in, it's like they change. They kind of find stuff to pick with you, disrespect you. My whole thing is, I have one lady inside the program (staff) who, I don't think she likes transgender women or she's gayphobic so its like, sometimes she'll come pick with me just to get my reaction so she can kick me out.

You are just assuming that you're better than me because you have a position of power...you choose to not put the snacks out?...and it goes to you can only have five minutes in the shower?...You are homeless. You don't have any option and the staff members talk to you any kind of way. My only option, is to survive.

I went and talked to the big boss (about bathroom discrimination) but he played this 'Well don't give me that bullshit. I know how y'all are.' I'm (participant) just trying to tell you, what can I do? 'Well just, other women don't want you in the bathroom...we don't want to be disrespectful to others'.

I knew the people (staff) didn't really like me or any of the transpeople so I didn't ask for stuff from them.

I kind of feel uncomfortable when I ask them (staff about bus tokens) because most of the times they have attitudes. 'Oh, we don't have none. Go talk to your counsellor' and most of the times the counsellor is not there. I have to deal with all these issues and put up dealing with this program. It's hard...getting on the

bus, no money, no fare. I ask for ride...so it's like how do I deal with these issues and deal with these issues in society.

They (staff) don't really get involved...deep down they feel the same way (hatred toward transpeople) because they don't agree with it either.

There's this one transgirl that got into an argument with a cisgender girl about not staring at her. The cisgender girl went to hit my friend (transgirl) so she was going to defend herself...and the staff comes in and instead of breaking it up, they turn to my friend and they're all like 'sir, you don't hit women'.

I'd be coming in, he'd (security guard) be like 'Oh, you can go sir'. And I'd be like (dirty look) and I corrected him once. I was like I'm not a sir, I'm a woman. He was like 'Okay, sir'.

...The abuse continued with the same person and he would bring other male staff like 'Oh, check it out', like while I was in the bathroom.

One social worker brought me into a little room and I was telling her about my experience...nothing was done.

He (security staff) would act like he was being nice to me and flirt with me, but he's making fun of me but, really you're not making fun of me. You are really into me at the same time, homophobic, transphobic — so he patted me, he raise my shirt. And I had already started developing. I remember literally turning around and punching the crap out of him.

The staff wouldn't intervene. A lot of them would sit at their desks and do nothing. They don't see it as a problem.

They pick and choose who gets extended and who doesn't and who's expendable and who's not.

What they let me know subliminally, at that time was that, this is what comes with being homeless. This is what comes with being who you are. You pretty much have to take it, if you want help.

Stabilization Enhancement Points: Interactions with Staff

Contrasting against stabilization fissure points, one participant's interactions with staff can best be described as stabilization enhancement points.

While filling out paperwork, the participant shared this experience:

The only question they had for me was 'Do we put male? Do we put female?

What do you want on there? We'll put anything'. That really took me off guard.

Like wow. I hadn't had that feeling of somebody really being interested or thoughtful enough to even ask that.

The participant retells how the staff offered her safety assurances:

We're family here. You are the first person here who is trans, so please come to us with anything. If anybody says anything to you or touches you - Anything that makes you uncomfortable, let us know. Those people will not be allowed to be here

She shares why she told the shelter staff about a disagreement with another client:

I had a mishap with a gentleman who thought my pants were too tight and obviously, had some kind of personal problem with me. We had a quick shouting

match, and I told the staff. I was kind of in fear because I didn't want to be a tattletale...But I only did because the staff made me feel comfortable enough to do that.

Although other participants disclosed they were receiving services while sober, this participant offered her opinion on why she had a positive experience with shelter staff:

I'm not this cracked out transexual prostitute (anymore) on the street begging for services but not wanting to help myself. I'm a transexual woman who is sober, who has goals and who is working on herself. So I think people see that and so they responded that way.

She also offered why she felt it is important to have professional staff:
...it's hard sometimes when you're homeless, you aren't in the position to educate
somebody. You aren't in a position to say 'These are my needs'. Sometimes
you're scared and you're bottomed out. And you need somebody who has already
been educated and can say 'Here's what we can do for you. Here are your
options'.

Fissure Points: Interactions With Other Clients

The most dangerous fissure points for all participants occurred while interacting with other clients. The first four quotes focus on other clients dehumanizing the participants. Two participants shared their first interactions with other clients:

People get ready to sit down...they just look at me strange like 'Why is you down here? Why you sitting next to me?' It mostly makes you feel uncomfortable...Why

don't you have respect for transwomen?

They felt entitled...it's like 'Oh you one of them. What are you?' It's like, here comes the problem, here comes the hatred, here comes the hostility, the name calling.

Another participant talked about severe humiliation and she had to stop herself from sharing the details:

She-male, boy in a dress, a boy with a wig and make-up, a boy in woman's clothing...It's like I'm pretending, it's like I'm a fake. It's like I'm nothing.

Overall, to them, I'm nothing.

I don't really want to talk about it because it was really messed up. It was really hurtful. It was very disrespectful and arrogance and hatred and it came off as bashing even. They would curse at me and call me names and disregard what I was trying to be and how I viewed myself.

It can be considered discrimination if a transwoman is not housed with other women. The following five quotes document participants' interactions with ciswomen.

Women are very vicious. They are just like transgenders, vicious, messy and all that...I get more respect out of the men then I ever did the females.

They are calling me names...because they said I don't belong on their side. I don't care what side I was on. I felt more comfortable in my f**king car than being up there (with the women).

They would call us men, they would...say slurs like 'tranny, fag..' They say it directly to your face and they don't think that they're doing anything wrong.

When three or more women single you out...of course the staff is going to take their side...the other trans had problems too. Another trans before me ...she got put out too because the other clients (women) gang up on you.

They sort of huddle up and collectively just hate transpeople. It was very scary because a lot of them would get violent...I kept pepper spray in my pocket and a knife hidden in my pants...it was really scary.

Discussion

This project explored the first hand experiences of homeless transwomen while accessing shelter services in Los Angeles. The purpose of this exploration was to define unique barriers and how those barriers affected study participants. The findings illuminate a pattern of cisgender bias where participants' rights, needs, and desires were at best, prioritized below that of the cisgender population and at worst, ignored. The most alarming findings indicated how cisgender bias turned the powerful shelter staff, also known as street level bureaucrats, into "street level tyrants". The majority of the interactions between shelter staff and the study participants included dehumanizing behavior: discrimination rooted in a belief that gender self expression was something to be disregarded, disrespected, ignored, and ridiculed. This translated into transwomen being treated like problem clients or troublemakers that should, whenever possible, be kicked out of shelter programs. Rather than shelter staff providing a reasonably safe environment, they created an environment for study participants that was almost as bad, if not worse, than life on the streets. Study participants did not fit into a binary box of either male or female and the cisgender biased rules, in many cases, did not apply to the study participants. These factors invited shelter staff to wield power over study participants that were arbitrary, unfair, and dangerous. Other clients at the shelter took cues from the staff and treated the study participants in an equally cruel manner. Their mistreatment of study participants by other clients were ignored and many times, encouraged by shelter staff. The powerful elements of cisgenderism, including the

mistreatment by tyrannical shelter staff, has clearly been shown to have a destabilizing and dangerous effect on study participants.

The one participant that had a positive shelter experience supports the argument that shelter staff are the main contributing force to stabilization for transwomen using shelter services in Los Angeles. In her case, staff interactions encouraged respect, safety, and inclusion of the study participant. Rather than traumatizing the participant the moment she was walked through the door while filling out paperwork, they asked what name she wanted to put on the paperwork. They asked her what side of the shelter she wanted to be housed in. They encouraged her to come to staff when other clients gave her problems. Most importantly, they admitted they had never worked with a trans client. They encouraged a recovery based approach where the clients goals and needs were to be supported and encouraged. This positive treatment by staff modeled behavior for the other clients. The study participant felt supported and safe at this shelter. She continues to live there while looking for a job as a nurse. Here, the shelter staff used their powers for good and could truly be defined as support staff rather than tyrants.

Overall, the findings of this study were consistent with prior research. First, when transwomen access shelter services, they are interacting with staff that has been inadequately trained to understand their needs. Many are turned away from shelters due to their gender self-expression and the majority of transwomen have been harassed by both shelter staff and clients while using these services. This is consistent with both Spicer's research and Fletcher et al. Additionally, the research found that many

transwomen choose not to access services at all because of negative experiences. This is consistent with Pechman et al's findings.

90% of the results are strong illustrations of Lennon and Mistler's definition of 'cisgenderism' where micro level interpersonal reactions show bias from cisgender individuals. The most damaging bias was seen in the power wielded by the shelter staff. Lipsky's street level bureaucratic theory allowed for the bureaucrats, talked about by participants, to be defined as 'street level tyrants'. Within these negative results, one sees strong support for Shelton's expansion of cisgenderism as an orienting framework. Policy, rules and the consistent biased behavior of the staff as a whole, illustrate Shelton's framework which elevates cisgenderism from the interpersonal micro level, to the bias seen at the mezzo and macro levels of shelters and the shelter system as a whole. 10% of the results contrasted with prior research. Here, cisgender staff were open, respectful and accommodating, putting any cisgender bias aside to meet the needs of one study participant. It is interesting to speculate that if all shelters were staffed by individuals who respect transwomen, could shelters live up to the expectation that, in a city as diverse and progressive as Los Angeles, transwomen could at least, be treated equally to that of cis clients when accessing shelter services?

This study has several strengths. Seven of the ten participants are currently housing insecure and the three others were insecure within the last 5 years, so experiences are as current as possible. Although the study sample is small, it is ethnically diverse. Additionally, this appears to be the first study that analyzes first hand accounts of transwomen accessing shelter services in Los Angeles.

Although this research contributes to an intimate understanding of ten housing insecure transwomen in Los Angeles, it is not without limitations. Broad generalizations and conclusions about shelter experiences should not be drawn from this study. The participants were not chosen randomly. Social service organizations staff and affiliates hand picked clients who fit the criteria for the study. Consistent with the tenets of qualitative research, all data consisted solely of self-reported interviews by participants which may or may not be an accurate description due to the social desirability bias. Nevertheless, the study findings are important areas to study in further detail as well as possible actions that could be taken to improve the the shelter experience for housing insecure transwomen. First, a wider study of housing insecure transwomen should be implemented using this study as a model. Ideally, multiple researchers would recruit participants through the same avenues as this study. Increasing the number of participants to 100 could help discover trends that are based on a larger sample size. Results from a wider study could encourage leadership, who oversee the shelter system, to implement change.

This study implies that shelter staff are the key to the shelter experience had by transwomen. If results of this study are consistent with a broader study, training for shelter staff needs to be implemented. The core of this training needs to be education for staff members to understand that gender self-identification is not an choice made lightly but a deeply personal inner understanding which occurs early in an individual's life. If a staff member is never educated to understand this fact, and holds a common misconception that gender self-identification is a simple preference like 'today I prefer

chocolate ice cream and tomorrow I may prefer vanilla', then a staff member can never respect a self identified gendered client. One can receive hours of 'sensitivity training' but if the root understanding of gender identity is not understood, training may prove worthless.

In spite of this study's limitations, it is important to understand that this study gives a voice to a population that believes their voice does not matter and is often ignored. All ten participants were excited that their experience mattered and could possibly improve future shelter experiences for transwomen. Let's surprise these 10 resilient women and make some necessary changes to the shelter system here in Los Angeles.

References

- Alden, S. (2015). Welfare reform and the street level bureaucrat in homelessness services.

 The International Journal of Sociology and Social Policy, 35(5/6), 359-374.
- Belzer, M., Brennan, J., Garofalo, R., Johnson, R., Kuhns, L., & Wilson, E. (2012).

 Syndemic theory and HIV-related risk among young transgender women: the role of multiple, co-occurring health problems and social marginalization. *American Journal of Public Health*, 102(9), 1751-1757.
- Clements-Nolle, K., Marx, R., Guzman, R., & Katz, M. (2001). HIV prevalence, risk behaviors, health care use, and mental health status of transgenderpersons:

 Implications for public health intervention. *American Journal of Public Health*, 91(6), 915921. doi:10.2105/AJPH.91.6.915.
- Hunter, C., Bretherton, J., Halliday, S., & Johnsen, S. (2016). Legal compliance in street-level bureaucracy: A study of uk housing officers. *Law & Policy*, 38(1), 81-95..
- Harawa, N.T., & Bingham, T.A. (2009). Exploring HIV Prevention utilization among female sexworker sand male-to-female transgenders. *AIDS Education and Prevention*, 21(4), 356371. doi:10.1521/aeap.2009.21.4.356.
- Lennon, E., & Mistler, B. (2014). Cisgenderism. *TSQ: Transgender Studies Quarterly*, 1(1–2), 63–64.
- Nemoto, T., Operario, D., Keatley, J., Han, L., & Soma, T. (2004). HIV risk behaviors among male-to-female transgender persons of color in San Francisco. *American*

- Journal of Public Health, 94(7), 11931199. doi:10.2105/AJPH.94.7.1193.
- Oxford University. Rules. In *English Oxford Living Dictionaries*. Retrieved from https://en.oxforddictionaries.com/definition/rule. Accessed 14 Apr. 2017.
- Oxford University. Tyrant. In *English Oxford Living Dictionaries*. Retrieved from https://en.oxforddictionaries.com/definition/tyrant. Accessed 22 Apr.2017.
- Patton, M. (2002). Qualitative research & evaluation methods. Thousand Oaks, CA: Sage.
- Pechmann, C., Moore, E., Andreasen, A., Connell, P., Freeman, D., et al. (2011).

 Navigating the central tensions in research on at-risk consumers: Challenges and opportunities. *Journal of Public Policy & Marketing*, 30(1), 23-30.
- Sanchez, N.F., Sanchez, J.P., & Danoff, A. (2009). Health care utilization, barriers to care, and hormone usage among male-to-female transgender persons in New York City. *American Journal of Public Health*, 99(4), 713719. doi:10.2105/AJPH. 2007.132035.
- Sevelius, J.M., Reznick, O.G., Hart, S.L., & Schwarcz, S. (2009). Informing interventions: The importance of contextual factors in the prediction of sexual risk behaviors among transgender women. *AIDS Education and Prevention*, 21(2), 113127. doi:10.1521/aeap.2009.21.2.113.
- Shelton, J. (2015). Transgender youth homelessness: Understanding programmatic barriers through the lens of cisgenderism. *Children and Youth Services Review*, 59, 10-18.

- Simon, P.A., Reback, C.J., & Bemis, C.C. (2000). HIV prevalence and incidence among male-to-female transsexuals receiving HIV prevention services in Los Angeles County. *AIDS*, 14(18), 29532955. doi:10.1097/00002030-200012220-00024.
- Spicer, S. (2010). Health care needs of the transgender homeless population. *Journal of Gay & Lesbian Mental Health*.14(4), 320-329.
- Wilson, E.C., Garofalo, R., Harris, D.R., & Belzer, M. (2010). Sexual risk taking among transgender male-to-female youths with different partner types. *American Journal of Public Health*, 100(8), 1500 1505. doi:10.2105/AJPH.2009.160051.

Appendix A

Interview Questions

- 1. What are your preferred gender pronouns, age, relationship status & employment status.
- 2. What is your current living situation?
- 3. Tell me the story of how you found yourself in your current living situation?
- 4. Before accessing shelter services, did you have any thoughts or beliefs about accessing those services?
- 5. Explain how you chose the agency you did?
- 6. Take me back to the time right before you accessed services for the first time, what was going through your mind before you walked up to the door?
- 7. What happened after you walked through the door?
- 8. Did any feelings or thoughts come up while you were filling out the paperwork?
- 9. If you had questions about the paperwork, how did the staff respond?
- 10. Did your feelings and thoughts before you entered match up to the real experience?
- 11. How did the staff treat you?
- 12. How about the other clients?
- 13. Did anyone react to your gender identity? Explain how?
- 14. What did you expect the agency to do for you?
- 15. Did their response match your expectation?
- 16. How did the staff treat other clients?
- 17. How did other clients treat each other?
- 18. Did you feel safe?
- 19. If you didn't feel safe, was there anything you did to protect yourself?
- 20. Were there things you were comfortable asking for?
- 21. Were there things you didn't feel comfortable asking for?
- 22. Did you feel comfortable sharing any of your concerns with the staff? Why or why not?
- 23. Why did you stay? Or why did you go?
- 24. Did the agency restrict you in any way that was different from other clients?
- 25. Were there any services you weren't allowed to use?
- 26. Were there any services there you didn't feel provided you help?
- 27. If help was available to assist with employment, explain your experience using that service?
- 28. Was your experience different from other people accessing that service?
- 29. If help was available to assist with medical services, explain your experience using that service?
- 30. Was your experience different from other people accessing that service?
- 31. If help was available to assist with finding more stable housing, explain your experience using that service?

- 32. Was your experience different from other people accessing that service?
- 33. Did you ever return to access services at that shelter? Why or why not?
- 34. If you accessed services at other shelters, let's go through these questions again based on that experience.
- 35. What, if anything, can be done to make emergency shelters more welcoming to transwomen?
- 36. If you could wave a magic wand and create the perfect emergency shelter for transwomen, tell me what that would be?

Appendix B California State University, Northridge

CONSENT TO ACT AS A HUMAN RESEARCH PARTICIPANT

Transwomen Voices: Accessing Emergency Shelter Services in Los Angeles

You are being asked to participate in a research study. *Transwomen Voices: Accessing Emergency Shelter Services in Los Angeles*, a study conducted by Anthony Ross as part of the requirements for the M.S. degree in Social Work Program. Participation in this study is completely voluntary. Please read the information below and ask questions about anything that you do not understand before deciding if you want to participate. A researcher listed below will be available to answer your questions.

RESEARCH TEAM

Researcher:

Anthony Ross
Department of Social Work
18111 Nordhoff St.
Northridge, CA 91330-8226
323.776.7954
anthony.ross.902@my.csun.edu

Faculty Advisor:

Alejandra Acuña, MSW, LCSW, PPSC, PhD Department of Social Work 18111 Nordhoff St. Northridge, CA 91330-8226 818.677.7798 aacuna@csun.edu

PURPOSE OF STUDY

The purpose of this research study is to explore the experiences of transwomen who have accessed or attempted to access emergency shelter services in Los Angeles, California.

SUBJECTS

Inclusion Requirements

You are eligible to participate in this study if you are at least 18 years of age or older, identify as a transwoman and have accessed or attempted to access emergency shelter services in Los Angeles.

Time Commitment

This study will involve approximately 90 minutes of your time. This will be a one time occurrence.

PROCEDURES

The following procedures will occur: This qualitative exploration is intended for transwomen over the age of 18 who have or are currently experiencing housing insecurity and self-report that they have accessed or attempted to access shelter services in Los Angeles.

Before an interview is set, you are being given this consent document including the list of study
questions (see attached page). This form includes your name, age, self identified ethnicity, self
identified gender and a contact telephone number. Your age, self identified ethnicity and self
identified gender will be used as content for an article submitted to academic journals with the
intent of publication. The researcher and the faculty supervisor pledge that your name and contact
phone number will be excluded from submission to any journal publication.

- You were recruited by a social service organization where you are a client, former client or a contact at a social service organization referred you to this study. You were approached after contact was authorized by the social service organization. By signing this consent you are willing to be digitally recorded answering the attached questions which describe your personal experience while accessing emergency shelter services in Los Angeles. You will be informed that self-disclosure is limited by what you are willing to share for the recording. You will be recorded as long as you want to, up to a maximum of 90 minutes. You will also be informed that if they agree to be recorded, you can end recording at anytime, without cause. If you choose to end the interview early, you will have the choice to watch the interviewer erase the interview or to permit the interviewer to use the material in the study. You will be informed that the recorded media will be viewed for educational use and as reference material for any presentation made by the author of this proposal or author's agents at any social service agency or funding source agency that is willing to meet and discuss this study. The recorded material will be transcribed and coded to identify common themes shared amongst all study subjects. Common themes will be incorporated into a written article with the intent of submission for publication.
- These instructions will be given to you verbally, at the time of the interview, as well as in written
 form. You will be informed that if they agree to participate, you will be entitled to a payment of
 \$100.00 in appreciation of your participation at the end of the interview. You will be paid even if
 you choose not to complete the entire interview.
- If you are willing to participate, you will be asked to sign a copy of this written
- consent and intent statement and will be provided a personal copy.
- You will also be informed both verbally and in this statement that this recorded digital media is not
 intended for profit, marketing, advertising or broadcast for any traditional media outlet (radio, press,
 film or television networks) or uploaded to any publicly accessible digital media outlet including
 social or entertainment websites.
- You are invited to ask questions at any time.
- The interview will take place at a mutually agreed upon time and place. The location could be a
 public place like a coffee shop or if possible, at the social service organization that connected you
 to this research study.
- Once you feel you fully understand the purpose of the study and the process, and have then signed this consent form, the interview will begin.
- Once the interview is transcribed, you will be offered an opportunity to review the transcript in order to feel comfortable with how you represented yourself.

RISKS AND DISCOMFORTS

The possible risks and/or discomforts associated with the interview and procedures described in this study include: possible psychological distress or traumatic symptoms while describing past experiences accessing shelter services. These symptoms may occur before, during or after the interview. This study involves no more than a moderate risk. A resource guide containing low to no cost counseling services will be provided.

If a portion of your interview is used for an educational presentation, even though your name will not be used, there is a possibility that someone may recognize your face. You will be given the opportunity to review the presentation, if you are included in it. At any time, you can tell the researcher you do not want any portion of your interview used for the educational presentation. Declining the use of a portion of your interview for the educational presentation will not exclude you from the study. Your preference will be explicitly asked on the last page of this consent form.

BENEFITS

Subject Benefits

The possible benefits you may experience from the procedures described in this study may validate your past experiences through self-reflection during your interview.

Benefits to Others or Society

The dissemination of your experiences described in this study to the educational community and social service community may improve future experiences of transwomen accessing shelter services in Los Angeles.

ALTERNATIVES TO PARTICIPATION

The only alternative to participation in this study is not to participate.

COMPENSATION, COSTS AND REIMBURSEMENT

Compensation for Participation

You will receive \$100.00 in appreciation of your participation at the end of the interview. You will be paid even if you choose not to complete the entire interview.

CONFIDENTIALITY

Subject Identifiable Data

All identifiable information that will be collected about you (name, age, self-identified ethnicity and gender) will be collected on paper and will not be digitally recorded. The digital recordings will be kept separate from the identifiable information written on paper.

Data Storage

All digital recordings will be stored on a password protected external hard drive.

Data Access

The researcher and faculty advisor named on the first page of this form will have access to your study records. Any information derived from this research project that personally identifies you will not be voluntarily released or disclosed without your separate consent, except as specifically required by law. Publications and/or presentations that result from this study will not include identifiable information about you.

Data Retention

The researchers intend to keep the research data for approximately 3 years and then it will be destroyed.

Mandated Reporting

Under California law, the researcher is required to report known or reasonably suspected incidents of abuse or neglect of a child, dependent adult or elder, including, but not limited to, physical, sexual, emotional, and financial abuse or neglect. If any researcher has or is given such information, they may be required to report it to the authorities.

IF YOU HAVE QUESTIONS

If you have any comments, concerns, or questions regarding the conduct of this research please contact the research team listed on the first page of this form.

If you have concerns or complaints about the research study, research team, or questions about your rights as a research participant, please contact Research and Sponsored Projects, 18111 Nordhoff Street, California State University, Northridge, Northridge, CA 91330-8232, or phone 818-677-2901.

VOLUNTARY PARTICIPATION STATEMENT

You should not sign this form unless you have read it and been given a copy of it to keep. Participation in this study is voluntary. You may refuse to answer any question or discontinue your involvement at any time without penalty or loss of benefits to which you might otherwise be entitled. Your decision will not affect your relationship with California State University, Northridge. Your signature below indicates that you have read the information in this consent form and have had a chance to ask any questions that you have about the study.

| I agree to participate in the study. (Please answer each question I agree to be audio recorded I do not wish to be audio recorded I agree to be video recorded I do not wish to be video recorded I want a portion of my interview to be used for an educationa will include people seeing my face but not knowing my nam I do not want any portion of my interview used for the educations. | al presentation. This ne. |
|---|------------------------------|
| Participant Signature | Date |
| Printed Name of Participant | |
| Researcher Signature | Date |
| Printed Name of Researcher | |
| Participants Age: | |
| Participant Contact Phone Number: | |
| Participant Ethnic Identification: | |
| Participant Gender Identification: | |