For many transgender students, the three most pressing campus concerns are access to safe and appropriate housing, bathrooms, and health care. While a number of colleges and universities are beginning to address the first two issues, few have considered the physical and mental health concerns of transgender students. The staff members of campus health clinics and counseling centers are often unaware of the needs of transgender students and rarely provide even basic transgender-specific health services. As a result, transgender students frequently report having negative health care experiences and are forced to turn to off-campus providers (generally at a greater cost) or forgo health care altogether.

Counseling Centers

For students who are transitioning, college health care services are especially inadequate. The accepted standards of care for transsexual adults require that they receive an initial psychological examination and see a therapist for a period of time before they are prescribed hormones. But at most institutions, including many large universities, campus counseling staff typically lack sufficient training on transgender issues to be able to provide a proper evaluation or short-term, supportive counseling (Beemyn, in press). For example, a 2004 study (McKinney, in press) involving 75 trans-identified students from 61 different colleges and universities found that few of the schools met the mental health needs of transgender students. Only four of the survey respondents felt that the therapists on their campuses were helpful, affirming, and
knowledgeable in regard to transgender issues. Some of their comments to the question, “What type of counseling, if any, is available on your campus [for transgender students]?,” included:

“No good counseling is available. I was referred to a mental institution for expressing such feelings.”

 “[A]s a trans person, I would NEVER seek counseling here as I don’t want to be diagnosed with some gender identity disorder.”

“I went to the university health services. They had no counselors with experience dealing with trans folk. Nor were they able to refer me to any experienced counselors anywhere in my state. It even took them several weeks to come up with a list of five therapists who might at least be queer friendly—one was 50+ miles away and another 70+ miles away. Having access to effective counseling resources would have made a substantial difference in my experience.”

“Not at all. I went to two different counselors since I’ve been here and it was always ME that had to educate them about who I was on the gender spectrum.”

**Health Clinics**

Like counseling centers, campus health services are often not prepared to serve transsexual students. Many college health clinics are unwilling or unable to dispense hormones to transitioning students, to monitor the hormone levels of patients who have had another physician prescribe them, or to give students a referral to knowledgeable doctors in the community, if campus health services are limited to providing basic medical care. Moreover, even colleges and universities that will administer hormones to transgender students generally do not cover the expense in their insurance plans, as almost all policies specifically exclude coverage for gender reassignment/confirmation surgeries and related conditions, including hormone replacement therapy.
The anecdotal comments by students in McKinney’s study (in press) are indicative of the inadequacy of transgender-specific health services at most colleges and universities. Responses to the question, “Is adequate health care [for transgender students] available on your campus?,” included:

“I got a lot of ‘no, we cannot help you’ from the student health services before I was able to convince them to refer me to someone.”

“Absolutely not. I stopped trying. They don’t even have a good rep at handling LBG students, let alone transfolk. I avoid dealing with the medical services here.”

“No. I have to educate all Student Health care providers about my condition. I still receive testosterone injections through an outside endocrinologist (which is not covered by my student insurance) rather than through student health, which is a one-fee provider.”

**Beginning Changes**

A handful of colleges and universities have begun to address the health care needs of transgender students. Several institutions, including Ohio State University, Princeton University, and the University of California-Riverside, provide training sessions on transgender issues for the staffs of their health clinics and counseling centers, and the University of California-Berkeley, New York University, and Ohio State University have created a website and/or brochure to inform students about transgender-specific health care services (Beemyn, 2005). In terms of medical care, the University of California-Santa Barbara provides student health insurance coverage for psychotherapy, hormones, and medical treatments other than gender confirmation surgeries. The entire University of California system offers insurance coverage that includes gender confirmation surgeries for staff
members and their spouses/domestic partners and children, through which some students receive coverage (Beemyn, 2005).

With a rapidly growing number of students openly identifying as transgender, many more colleges and universities will need to develop trans-competent medical staffs, provide information about the transgender-specific health services available on and off campus, and, where possible, offer and enable insurance coverage for hormones and gender confirmation surgeries. Every student deserves health care that is affordable, self-affirming, and readily available.

References


Suggestions for Meeting the Health Care Needs of Transgender Students

• Require the staffs of campus health clinics and counseling centers to attend a half-day training on transgender health care concerns.

• Have a website and brochure with information about the transgender-specific health care options that are available on and off campus.

• Enable patients to identify their preferred name and gender identity on intake forms, rather than having “M” and “F” boxes.

• Offer gender-neutral bathrooms and private changing rooms for patient use in health care facilities.

• Offer gynecological and prostate exams outside of women’s and men’s health services, respectively, so that transsexual students can receive proper medical care without being made uncomfortable or having to out themselves.

• Provide trans-supportive therapy, both individual and group counseling.

• If staff size permits, hire a therapist who specializes in counseling transgender students.

• Provide hormones and, if possible, gender confirmation surgeries, and enable these health care needs to be covered by insurance. If providing these services is not feasible, offer referrals to local practitioners and include these providers in student health insurance plans.