

RESEARCH HIGHLIGHT

The Lives of Black Trans Youth Matter

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Introduction

When I was preparing for this newsletter in January, I had originally planned for the research highlight to be about the issues that system-involved, youth with diverse SOGIEs face.¹ As the wide-reaching impacts of the pandemic became clearer, it seemed most important to focus on LGBTQ+ youth, now forced to remain at home, and how many feared they would be “outed” and kicked out of their homes.² However, given what has transpired over the last several weeks, it seems most important to also give due consideration to systemic racial and ethnic inequities. Recent events, including the increasing support for Black Lives Matter (BLM) and the murders of two Black trans³ women, have again made it apparent that there must be discussions about the historic and contemporary wrongs perpetrated against historically marginalized communities.

Alicia Garza, one of the co-founders of the Black Lives Matter movement, has noted how, in order to truly reckon with violence against Black individuals, “we must view this epidemic through a lens of race, gender, sexual orientation, and gender identity (Black Lives Matter, 2019). It seems, however, that the voices of particular communities—Black trans and gender nonconforming youth, in particular—are often left out of the conversation. It is important, then, to assess how the intersections of race and queerness⁴ inform the experiences of some youth. The intent of this research highlight is thus to call attention to some of the particular challenges that Black trans and gender nonconforming youth face as they navigate the world and how greater attention needs to be given to their experiences.

¹ SOGIE – Sexual Orientation and Gender Identity/Expression

² LGBTQ+ --Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, and others

³ trans –shortened form of “transgender,” which is “[a]n umbrella term for people whose gender identity and/or expression is different from cultural expectations based on the sex they were assigned at birth. Being transgender does not imply any specific sexual orientation. Therefore, transgender people may identify as straight, gay, lesbian, bisexual, etc.” (Human Rights Campaign, 2020)

⁴ queer(ness) --“an umbrella term to describe individuals who don’t identify as straight and/or cisgender [someone whose gender does not align with the sex they were assigned at birth]” (Killermann, 2013). While the noun form is often considered a derogatory slur, “queer” as a descriptor has been reclaimed by many as a word of empowerment and is widely acceptable.

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Health Disparities

Transgender individuals generally are more likely to face adverse health outcomes. When examining these outcomes by race, however, the picture becomes even starker. According to the 2015 U.S. Transgender Survey (USTS) Report, 1.4% of study participants were living with HIV. However, when Black respondents were considered separately, the study's authors found that the rate for all Black respondents was 6.7% and for Black transgender women was 19% (James et al., 2016).

This alarming disparity may be due in large part to the use of particular coping skills. A study by Wilson et al. (2015) also found that trans female youth of color were more likely to have contracted HIV. These authors also found that this particular population was more likely to engage in behaviors that are known to put one at risk for HIV transmission, such as substance use and risky sexual behaviors. These are often related to survival sex or commercial sex work. In James et al.'s (2016) study, 42% of Black trans women had participated in survival sex, the highest percentage of any of the groups. Survival sex is often used as a means to provide food, shelter, and other necessities, such as medication. As one of the participants in James et al.'s (2016) study said, "I couldn't find work. I watched one guy throw away my application literally 30 seconds after turning it in. I resorted to escorting. It's the only way to keep food in my belly and a roof over my head" (p. 161).

Wilson et al. (2015) further explain these health disparities by noting how Black trans youth must cope not only with transphobia and its insidious consequences; they must also cope with racial discrimination. Trans girls may cope with this layering of racial stigma and transphobia through substance use, which is often coupled with the need for survival sex or other risky sexual behaviors (Wilson et al., 2015).

Mental Health

The mental well-being of trans youth is an area of particular concern. According to the 2015 USTS Report, 39% of the study's respondents were experiencing serious psychological distress, a figure that is "nearly eight times the rate in the U.S. population (5%)" (p. 103). Although this study was comprised of people aged 18 years or older, it is reasonable to assume that those younger than eighteen years of age experience distress similarly. Childhood and adolescence are periods in which people more generally are attempting to figure out who they are and how to navigate the world. This period may become more challenging as trans youth face the challenges of transphobia and other negative reactions to their identities. The Centers for Disease Control have noted that suicide is the second leading cause of death for those 15-34 years of age and that sexual minorities experience even greater levels of suicidal ideation (Stone et al., 2017). To be sure, it is not the fact they are transgender that causes mental health issues; it is society's treatment of them and their identity.

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Such distress may lead to suicidal ideations and suicidality. James et al. (2016) note how 9% of the Black trans respondents in their study had attempted suicide within the last year; 0.6% of the general United States population had attempted suicide during the same time period. 47% of all Black trans respondents in the study had ever attempted suicide in their lifetime, which was over ten times the percentage for the general U.S. population (4.6%). For all respondents in their study, the age group most likely to have attempted suicide within the last year was emerging adults (ages 18-25), and over 90% of respondents indicated that their first suicide attempt was before the age of 25 (James et al., 2016).

School

Trans youth of color also report negative experiences while in school. 74% of the Black respondents in the 2015 USTS indicated that they had at least one negative experience in K-12. These experiences include verbal harassment or being physically assaulted. Moreover, 22% of Black trans youth withdrew from school (K-12) because of their negative experiences there (James et al., 2016).

These experiences, however, were not limited to primary or secondary school. Emerging adults also indicated that they experienced similar treatment while at college. 28% of Black trans college students noted how they had experienced verbal, physical, or sexual harassment in college (the mean across all racial groups was 24%). 21%

of Black trans college students ultimately withdrew from their university or technical school because of the continued harassment (James et al., 2016).

Violence

Thus far in 2020, at least 14 trans and gender-nonconforming people have been murdered, many of whom are people of color (Human Rights Campaign, 2020). Less than two weeks ago, two Black trans women—Riah Milton and Dominique “Rem’Mie” Fells—were violently killed (Carlisle, 2020). This violence against trans and gender nonconforming individuals is not a recent development, however. In a 2009 study, Stotzer (2009) found that violence against trans people often starts during childhood or adolescence. A report by the Gender Public Advocacy Coalition (GPAC) also found that of the murders of trans individuals under 30 years old in their study, 91% were people of color (Wilchins & Taylor, 2006).

Black trans youth may also be victims of other forms of violence. 9% of the Black respondents in the 2015 USTS had been physically attacked by a stranger in the last year, and of those who had been attacked, 11% indicated that the event had involved a firearm (James et al., 2016). Sexual violence is also common. In the 2015 USTS, 53% of Black trans or gender nonconforming respondents noted that they had been sexually assaulted at least once in their lives, and 25% of all respondents noted that they were victimized in this way by a relative (James et al., 2016). Other

work has also highlighted the high prevalence of sexual assault for trans youth (e.g., Wilchins & Taylor, 2006). Finally, Black transgender youth may also face intimate partner violence (IPV). Work by James et al. (2016) has noted the high prevalence of this form of violence for Black transgender and gender nonconforming people: 44% of these respondents indicated that they had been victims of IPV that involved physical harm.

Conclusion

The issues discussed above are merely a few of the myriad issues that Black trans and gender nonconforming youth—and trans and gender nonconforming youth more generally—may face on a daily basis. Discrimination against these populations abounds: housing discrimination, discrimination in the home and in faith communities, employment discrimination, and even bias within the justice systems. Issues surrounding healthcare protections are also part of the current discussion, as many protections—particularly in healthcare—have been stripped away recently (see Carlisle, 2020).

So where do we even begin to address these issues? Below are a few recommendations given the research discussed above. They are broken down by the four discussed areas—health disparities, mental health, school, and violence—but many of the recommendations span across these areas.

Health disparities: Several approaches are necessary to reduce health disparities for Black trans youth

and, in particular, Black trans girls. Access to mental health and substance use services may prove beneficial for those who are dealing with racial stigma and transphobia. Notably, research indicates that these services are beneficial only if they are inclusive and “trans friendly” (e.g., Lyons et al., 2015). These services may offer these girls and young women more opportunities to openly process negative emotions and to develop alternative coping skills. The more challenging solution, however, is to find meaningful ways to address racism and transphobia, both institutionally and in society more broadly.

Mental health: Given what was discussed in regard to serious psychological distress and suicidality, the mental health and well-being of Black trans youth should be of great concern. Navigating the social world is difficult for young people; add to that two historically marginalized identities—and especially their attendant biases—and the risk for serious psychological harm is magnified. The allotment of resources for affirming mental health services for this population would only be a start. (e.g., Benson, 2013). They would not, however, address the root of the problem: the intersection of systemic transphobia and racism.

School: Research has pointed to the important role of school counselors as advocates for trans youth. Gonzalez and McNulty (2010) argue for applying *Competencies for Counseling with Transgender Clients* to school settings

(Association for Lesbian, Gay, Bisexual, and Transgender Issues in Counseling, 2009). Doing such, the authors argue, will enable counselors to advocate on the student's behalf "...with students, parents, school personnel, community members, and other stakeholders on behalf of transgender youth across grade levels" (Gonzalez & McNulty, 2010, p. 176).

Others argue for the need to ensure that there are effective programs aimed at educating other school personnel (e.g., Greytak, Kosciw, & Boesen, 2013). It may also prove worthwhile to formulate lessons that educate other students about a variety of diverse identities—including those based on race, gender, and sexual orientation. Not only would this educate students more generally; it would also reiterate to trans students in general, and trans students of color, that they matter and that they are valued.

Violence: A comprehensive and holistic approach is required to address violence against Black trans youth. As violence against this population may take place in their homes, faith community, workplace, and other vital spaces, programs and supports must focus on these environments. (Redfern, 2013). Better documentation will give researchers and practitioners a better idea as to how violence against trans youth can be better addressed (e.g., Irvine & Canfield, 2015). And similar to the *School* recommendations, education will be key in teaching others about the inherent value of trans people and their rights.

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General: There are also more general recommendations that have been guided by research. Irvine and Canfield (2015) have pointed to the need for better data collection. To get a more accurate idea of the disparities Black trans youth face, we must begin to collect better data about them and their experiences. It is relatively rare for the child welfare and juvenile justice systems to collect data about a youth's sexual orientation, gender identity, and gender expression. In Irvine and Canfield's (2015) study, LGBTQ+ youth—and LGBTQ+ youth of color in particular—were overrepresented, and there was a large number of crossover youth represented.

It is also important for practitioners to affirm the identities of those in their care. Research has indicated that trans youth who have social support generally experience fewer depressive symptoms and anxiety than unsupported trans youth (Connolly et al., 2016; Olson, Durwood, DeMeules, & McLaughlin, 2016). Affirming a youth's identity throughout the system then proves vital; referring to them with the correct pronouns, calling them by the correct name, and allowing them to dress in a way that aligns with their gender expression can have very real and positive impacts on their mental wellbeing.

I reiterate here the interwoven theme of this research highlight: *We must, as a society, reckon with institutional and societal transphobia and racism.* Certain legal protections, such as the Gender Expression Non-Discrimination Act (GENDA), have been passed in New



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York State, ensuring that gender identity and expression are also protected by the 1945 Human Rights Law. It would thus seem that many people need to catch up to the law, rather than vice versa.

As we have heard these past few weeks, it is not enough to merely say

that we ourselves are not racist (or transphobic). We must be anti-racist and reaffirm that Black lives matter. We must denounce anti-transgender bias and reaffirm that trans lives matter. Because until we undertake these two vital steps, Black trans and gender nonconforming youth will continue to face disparate and dire outcomes.

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