

REALTIME FILE

Meeting info: George Washington University Part 2 LGBTQ+ Webinar

Date: 9/25/20

Start time: 2:00 pm EST

End time: 3:30 pm EST

CART PROVIDED BY:

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(CART writer on standby)

>> DJ RALSTON: Hello.

Perfect. Closed captioning is turned on. Thank you.

(CART writer on standby)

>> JOHN WALSH: Thanks DJ, welcome everyone who is joining us. This is part 2 of our LGBTQ+ disability series my name is John Walsh I'm the project direct for the training center for VR, if you did not have a chance to see part one which we did in August I would highly recommend you go to our web site, we have the web cast archived, easy to click on, and to see part one which was a fantastic webinar so please, check that first one out! You'll also notice on our [trainVR.org](http://trainVR.org) site we have changed things up a little bit. We're now asking folks when you try to access our webinars, that you set up an account with us. And this way you'll have a user name and password it's a one time set up. And you'll be able to enroll in all of our training offerings in a more seamless way you'll be able to track which webinars attended and gain access to your CRC continuing education certificates. The contents of today's training is presented and developed by the center for innovative training and VR we're located at the George Washington University. The center is focused on supporting VR personnel, to provide high quality rehabilitation services and to improve employment outcomes for individuals with disabilities.

The center is funded by five year grant through the U.S. Department of Education. The rehabilitation services administration under the innovative rehabilitation training program. The ideas opinions conclusions expressed in today's training, however, are those of the presenters and do not represent the recommendations endorsements or policies of the U.S. Department of Education.

Our center began its work last October, and we are in the midst of developing communities of practice. A variety of different webinars and other learning modalities. We also provided a nationwide training needs assessment and we developed rich data on what are some of the training needs of state VR agencies including some of the data we gathered, and formed today's presentation.

We're very fortunate to have a very active Community of Practice of training coordinators of state VR agencies have been excellent in providing us feedback and being great partners with us.

As well as a very robust advisory council. Your feedback ask very valuable to us, so please, any evaluation surveys please share that with us.

Because your input will inform future training. As of all of our training offerings they are all free. We

always offer CRC continuing education hours and we always archive our trainings on web site for future viewing.

If you find today's webinar to be informative, please share that information with your colleagues. Get out the word! Trainvr.org is our web site to access the great content.

We're really fortunate to have a fantastic team of Trio of trainers to join us for part two of this series. We had a fantastic part one I think it was just excellent information I'm really looking forward to hearing today's content.

One more logistical piece before I turn it over to DJ and the team -- we also want to make sure that your experience is as positive as possible. If you're having any technical difficulties please just send us a message to all panelists and there's going to be 3 of us that are going to be answering any questions or difficulties you have so we can make this as best an experience for you as possible.

At this point I'll turn it over to DJ.

>> DJ RALSTON: Thanks John good afternoon everyone we're so glad you could join us.

Welcome to part two, for those of you that joined us during part one we hope that we have all the logistical issues technical issues worked out this time from the start you'll be seeing both of our ASL interpreters as they tag in and out.

As John mentioned, um, we have some folks that are behind the scenes that are panelists who like you see maybe you see Christine's photo and John's photo, Melissa's photo send a question to all panelist if you have any questions or if you have any difficulty, in connecting any technical stuff.

As far as content related questions, please use the QA function for those content related questions and we promise we will do our very best to answer all of them. I think that the team's plan is to develop some frequently asked questions following this one. As John mentioned, all materials associated with the webinar will be posted to trainvr.org including the slide show we'll be using to. So to run you all quickly through our learning objectives quick recap outstanding questions from part one, you had some really fantastic questions in part one we want to make sure we can get to those we'll do our best to do so.

Um, today we'll be talking about the implication of power and privilege in our counseling relationships especially as it relates to working with LGBTQ+ and disability identities, we'll be talking about how to support LGBTQ+ people including transgender and gender expansive persons, in their pursuit of work. We'll be talking again gender identity in depth today. We'll be talking about ability to locate local resources and supporting LGBTQ+ communities and consumers that you're working with and, we're also going to talk about what happens if you have a desire to examine your own agency's policies and procedures towards ensuring making sure it's an inclusive place with that my is DJ Ralston, pronouns they, them and theirs, queer gender queer nonbinary senior research associate at center for rehabilitation for George Washington University which is the home for CIT-VR who is sponsoring this the web nor I work on the 3RSA technical assistance centers for approximately I don't know 3 more days before the new round of funding is announced I'm also a doctoral student, in human and organizational learning my areas of interest and expertise include, the intersection of disability poverty work incentives counseling and financial empowerment, partnership and development and braiding leverages resources to supporting with folks of disabilities and LGBTQ+ people I did not include a fancy head shot instead, I have some Scooter, the Muppet, which is about how I feel, when we have so many on the webinar joining us today. With that, um, Lucas introduce yourself.

>> LUCAS DEMONTE: I am Lucas I use he him his pronouns I personally identify myself as a white cys and queer trans man I was assigned female at birth. I'm also a Doc student, in counselor education and supervision.

And I am a research GA as well at my university.

I just recently graduated from the University of Florida, with my mental health counseling masters very exciting! Um and a lot of my interests kind of encompass, trauma, mental illness, disability LGBTQ+

populations and other marginalized identities, internationality and, kind of all that stuff! And, you know, really passionate about social justice and connecting with folks in this way to be able to have conversations and provide information.

>> KATHERINE HURLEY: Thank you everyone to my panelists and thank you everyone for being here we were so delighted to have you join us in part 1 and now part 2, if you're new to joining for part two, we're delighted to have you here as well we are, I personally, thank you for being here and learning about these populations and growing in the conversation. My name is Katherine Hurley, my pronouns she/her and/hers I'm a doctor at that time student at GWU, I have the great pleasure to work with the CRCRE and the folks on will the panel I'm a clinical mental health counselor and researcher I focus, primary in marginalized groups with including individuals with autism spectrum and internationality and LGBTQ+ community, and other concerns related to these groups, not that internationality is a concern, wonderful thing we'll talk about later. I was awarded a few grants from the Social Security administration to look into the specifically increasing employment opportunities for adults with autism spectrum disorder and, I believe, deeply in community based participatory research and other research that looks at individuals with, the people that were we're working with instead of on individuals with people, withs with people I'm the creator of cognitivegym.org, please stop about a conversation there as well. I'm -- so delighted to have this conversation with all of you here today. So just to get us started talking about the ethics, CRC/ACA ethics are counsels ethics for those who are counselors in the room we'll be speaking about ethics in general this is a reminders of the ethics that guide our work which are you know, respect, nonjudgmental ways of approaching without really taking too much towards our personal views right. We believe in nondiscrimination, um and -- we also believe in having awareness of our personal biases so sitting in who we are and what we believe and how we come to the work and so, that, as it relates to LGBTQ+ people and all people. We avoid value imposition and including all of these items that you see in front of you, cultural background so forth and that's important for us to know it also, within the course of the conversation I think, when we're working with other counselors who may, you know, forget the ethics or struggling with these things we have a place to go and look when we go to the ethics that govern us. I also wanted to call your attention to the multicultural and social justice counseling competencies and these are really important guides for how we think about our own self-awareness how we think about, global things that, may effect populations how we think about individual ways. So, we'll talk about this a bit later but -- I encourage you to think about and, research if you not seen them these guidelines for approaching privilege and power in counseling.

>> DJ RALSTON: All right so, quick refresher, I know this is something that we, addressed in part one but just wanted to do a quick refresher before we dive back in.

So in looking at some of the terminology in the LGBTQ+ class acronyms -- just a reminder so Lesbian, again these you know are -- Rigid definitions everyone defines themselves differently but there is just a general definition to conceptualize folks.

So Lesbian is a woman who is emotionally romantically or sexually attracted to other women it could be cis or gay women, gay is a person who is emotionally romantically sexually attracted to member of the same gender. Bisexual is a person attracted more than you know one gender, one sex, or gender identity through maybe not the same ways, um, in you know, each person in some way or another.

So transgender is -- umbrella term, um, you probably hear trance, transgender umbrella term for gender identity and expression vary from cultural expectations, based on the sex that they were assigned at birth this is something we'll address later but notice how we're intentionally using sex assigned at birth because when we're born, somebody look at our Genitalia, this is this and is that, we're looking to kind of maybe challenge that a little bit.

The biggest thing too, this is something we'll continue to go over, you know, you know because

someone is transgender or gender expansive, gender expansive is another umbrella term for folks that maybe don't identify as cis gender or assigned at birth. But, being trans does not imply any sexual or affectual orientation, people vary in their sexuality and affectional orientation, each person is different. Queer is, also umbrella term that's been reclaimed and I know there's kind of discourse around, maybe older generations versus younger generations on the use of queer because that was used as a slur for so long and the younger generation has really embraced queer and reclaimed that to, to say hey I'm not straight or cis gender I'm not putting myself in a box for some folks that is very political meanings some are you just, really varies in the person.

And intersex is also umbrella term that is used to you know, describe a wide variety of natural bodily variations. So, sometimes maybe these traits are visible at birth or maybe, you know, they're not, recognized until puberty, it could be chromosomal it could be varies that's the beauty of bodies they're all different. Asexual is the lack of sexual attraction or desire for other people I believe we have that handout that is still up if you want to look at that, as well.

Okay.

>>

>> DJ RALSTON: Lucas broke down the acronym LGBTQ+ by giving some definitions.

And, one of thing that -- you probably notice with the context of those definitions is there are things that are specific to sexual or affectual orientation and one that is specific to others more specific to gender identity the last time we used the gender elephant, this time we thought we would share the gender unicorn they're both from the same organization -- TSER and, you can see that in the PowerPoint, um, but trans student/transgender. We start with gender identity which is the cool little rain bow near the top of head, that is because that is looking at someone's looking at their identity relative to female, women girl, male, man boy or other genders so gender identity is really about one's sense of their intergender. Like kind of in their brain, who they really truly feel who they are, right. The next thing you'll notice is if we look at the, the picture we talk about gender expression you'll see all those green little dots on the left-hand side, that outline the entire unicorn, that's because gender expression is what people present outwardly right. So my gender expression, as you can see I'm wearing a shirt and a bow tie which you cannot see it has alligators on it, um, but my gender expression tends to be more masculine.

I tend to present more masculine I would define my gender expression asthmas cue Lin. This is really about how, people kind of present themselves, outwardly. The next thing is you sex assigned at birth as Lucas mentioned we talked about sex assigned at birth opposed to conflating that with gender, because gender and sex are actually not the same thing.

So, sex assigned at birth you'll often hear the shorthand AFAB, those AMAB, those standards for assigned male at birth or assigned female at birth we like to joke in the queer community AFAB, assigned fabulous at birth -- so, there are these things to think about. Then the other thing that kind of comes in here is, we talk about other or intersex. Lucas walked through, what it is, to be intersection with that definition and what that is. The next thing you'll notice we have two hearts in the center of our unicorn one is red and orange, the orange is talking about who we're physically attracted to. So typically when we talk about sexual orientation, that's what you're going to be thinking about is like how sexual orientation at least historically, um, has been talked about, it is really about, who people are kind of physically, attracted to.

And then, and that can be by the way, men, women and all of the other genders, right.

And then, our red heart is talking about emotional attraction when you hear us talk about affectual or sexual or affectual orientation, the a factual part is kind of speaking to that emotional piece and, who we're emotionally attracted to. We hope you all like the gender elephant or Unicorn it will be included in the slide you can get from the web site included below. So, um, moving right along Lucas I'll throw it back to you to walk us through defining transgender terms

>> LUCAS DEMONTE: Okay. So I know these are some thing you know, DJ covered I covered a little bit as well.

You know, have some nice APA defining trans terms for you all. So, Cis gender as I mentioned is you know using it is used to describe someone whose gender identity and gender expression and, you know assigns with you know matches with the sex they were assigned at birth. So for example, if you were assigned male at birth you identified yourself as a man, as a Cisgender man you would be cis gender, gender binary like was talked about by DJ, the gender binary is classification a gender and to two distinct categories of male and female, which gender unicorn points out too, it's much more nuanced and complex, gender dysphoria, discomfort between the gender identity and maybe they were assigned at birth. And I think something that is really important to note about this, not everyone necessarily, feels gender dysphoria, who do, everyone's experience is really different. That's something to be really mindful of not assuming that folks are, struggling with the same thing.

Again what you've touched upon the gender expression, that's the way we express ourselves the physical experience and other ways of presenting ourselves to the world, you know, that express different, you know facets much gender identity or gender roles, et cetera and gender identity is that internal sense that brain of like okay, this is how I feel, who I am.

On the inside, which -- may or may not correspond to an individual's sex assigned at birth or sex characteristics.

Okay. Then for the next part, so looking at more of the definitions, gender nonconforming you'll see GNC or gender nonconforming and just describes folks who you know, gender identity and gender expression differs from gender norms from what they were assigned at birth. So gender queer is, is a variation of everyone using different language I think that's really important to recognize like this, of course is not, exhaustive list but these are things that maybe folks will see more often than not. Gender queer just describes a person who's gender identity does not align with binary understanding of gender you know, maybe -- like, I identify as male or female I've heard people say identifying as both or neither everyone's definition and description of themselves is different.

In this one, it is -- either between genders or a third gender or outside of gender all together we'll talk about that, being trans affirmative it is being aware of respectful and supportive of the needs of trans folks, and that could look like a variety of ways we'll talk about that more.

And then transgender, in the umbrella term, I think -- I think you'll cover this Katherine about the difference between, trans man and trans women, I will wait on that.

I'll throw it to you

>> KATHERINE HURLEY: Thank you feel free to jump in, because -- what we want to kind of highlight is, when someone identifies as a trans man, that means they're transgender and they identify as a man on the binary, with trans women, someone is transgender they identify as a woman. There's a typo in there.

When we also two identifies on the binary, there's -- we also have a person who could be trans and nonbinary. Meaning they are transgender they identify, not in the -- the binary of the spectrum man or woman or somewhere else on the binary or you know, outside of it, not ascribing to those binary terms, the word gender that way.

I would also like to call your attention to pansexual which is an identity we do not talk about in part one, this is someone with a potential for emotional romantic or sexual attraction to people of any gender not necessarily, simultaneously, so, there are -- um, stigmas related to, um, -- you may hear being bisexual or pan sexual this means that you're not on the monogamous person this is being completely different from attracted to someone, they could be pan sexual, that means that you may be -- um, attracted emotionally romantically or sexually, to anyone regardless of the gender binaries, at all. We also wanted to, um call your attention to the idea of someone who is "Out" so, um, that term, is someone who is living openly, in terms of their sexual orientation and gender identity.

And, these terms are pulled from the human rights campaign, glossary of terms this is a very good

resource to look at later onto build on a conversation.

But part of this definition is, someone who is living out, and openly in term of their sexual orientation or gender identity, where and when it feels appropriate to them, someone may be out you know, every aspect of their life but at times they feel unsafe and certain situations or they choose to be out to these groups and not that group. So, this is what we're talking about, when someone is, out.

In terms of -- um, how they're living their lives respect to orientation and identity. The term outing is when someone else, takes the opportunity of expressing and of naming your sexual orientation and gender identity in public takes that from that individual. So issues with outing, um, to look at the slide is, exposing someone's LGBTQ+ identity without their permission. This can have serious repercussions on employment we'll continue to talk about, economic stability, personal safety and religious or family situations this is a particular term and concept because we happen to know, when we're working with a client or they have told us does not mean that we're able to discuss that or assume that they are out to others.

So, we, always always always want to avoid outing. The idea of being out or coming out is a very personal thing that should always be the choice of the individual and, in the rights of the individual. So we don't out other people or, identify them outside of how they identify themselves.

>> DJ RALSTON: Katherine I want to tag on that for a second I think that's so important. One, everyone we'll talk about disclosure a little bit later in the presentation Katherine will talk about it, we'll talk about it, relative to disability disclosure in the work place much like those are disability professionals recognize that, it is, someone's right to disclose disability it is the same concept here, for folks that are LGBTQ+ plus who may or may not that information, may or may not be out there. So it is the same type of concept.

Um, there was another question that actually came in to the chat it actually kind of fits into this place a little bit, as we talked about the definition of pan sexual there's a question about, differences between Pan sexual and bi sexual and oh, boy this opens up a whole kind of world of nuance, which really, I'm actually not going to answer the question for you, other than to say that, that's a really nuanced discussion the distinctions between bi sexual and pansexual and something that is constantly like -- discussed a lot within the community.

Um, what I will say though is this is an opportunity for us to have the conversation around grace and the fact that, this is a nuanced landscape this is a kind of like evolving, language is important words matter just as we have at the top of the screen here, so recognizing that being the case, just like we're going to, um, make sure that we're asking someone if they disclose to us their LGBTQ+ identity if they're out, so we don't interest advertently out them we also want to extend grace and ask for grace relative to the language that we're using, and just ask folks you know, how do you identify what you know, what is it that works for you, relative to those identities. So, Katherine I just thought you left us a great opportunity there, so I wanted to, kind of tag in I hope that's all right.

>> KATHERINE HURLEY: Sure.

Excellent. Yeah of course may I kind of add onto that, if we can go back to that point for just one moment. Something that when we're thinking about creating our forums when we're thinking about how we're getting information to individuals to make them feel included bisexual is a term that, by definition is bi on the binary. So it is, I mean, maybe interested in women or men on that binary idea. Pansexual is inclusive of when we are talking about people who gender queer and people nonbinary people however, they present, pansexual, includes sexual attraction to this kind of, um, outside of just the binary idea. So you know it is, it is a, conversation to continue having for sure. But, but thinking about as we start to expand past the binary that there are individuals that identify in ways that, um, we don't always get on our check list. Um, so, that's why we say LGBTQ+ so pansexual is part of the plus.

>> DJ RALSTON: I think the plus part is so -- it really is so important especially because there's actually even push back within the community now like this is what I was saying about that -- changing

landscape, um, is that, hey look I have a dog joining me everyone (laughter) sorry about that, but -- the whole idea, that -- um, you know, bi is more than just looking at the binary. Again like it is so important, so I just am so glad we get to have this conversation -- Katherine I really appreciate you -- um, kind of -- pointing that out. So Lucas I'm so sorry everyone (laughter).

>> LUCAS DEMONTE: The dog is saying hi, excited you know. I get it, I get it. So, um, yeah you will -- that's a great conversation and, that nuance piece, language is transformative right. Bisexual meant five years has changed and it is different same with pansexual no it's not about pans I've been asked that many of times. It is not sexual outing for pans don't make that joke because people are tired of hearing it, so any way, moving forward -- um, you know looking kind of at the disability concepts right. Because this is a very intersectional you know, topic right.

Things don't exist in the vacuum like we talked about that a little bit in part one for folks who were there.

So, I included this some E-cards I may be chronically ill and but I may be chronically fabulous I relate to that, I'll get to that in a little bit. I think the biggest thing we need to respect the autonomy of disabled folks or persons with disabilities, you know, giving folks autonomy, to whatever each personally think that something that does happen, whether or not you need to in the field working disabled folks I know best as maybe the therapist or I know best as, this person who is providing this resource and, the fact of it is, you know, we -- we we're not the ones knowing best we're collaborating from our clients and folks in the community. So, you know, I think, you can hear me say disabled versus persons with disabilities, it kind of is along the same lines looking at the word queer how we know it's been reclaimed. We know there's a variety of slurs and derogatory terms used for folks with disabilities across the years, culturally and still, of course, but, a lot of folks and again, there's discourse between you know younger and older folks which is a conversation we'll have a little later. That intergenerational dialogue really interesting stuff. Reclaiming of language, is powerful, reclaiming queer, disabled autistic. Now obviously these are not monolith and not exhaustive folks will tell you whether it's implicit or they start talking hey I'm autistic, blah-blah versus you asking what DJ said, asking that question, hey how are you doing yourself. Just mirroring what your clients use as far as language.

And, something I would like to touch on you know, with disability and being disabled, is you know, there's -- there's things like maybe visible versus invisible which I mean, that's a nuanced conversation as well maybe that could be its own other presentation, so I won't dive in too deep there. But, you know the thing is, the way that we, maybe look at the gender the way we look at disability or sexual orientation, things like that, where it is you know our society we're very much we look and put someone in a box we're categorizing them when we don't always necessarily know, um, so I think with you know, some chronic illness, especially, you know, for me this is particularly salient for me this would also count as a disability. But, you know maybe for some folks it doesn't. So, it is, it is a really awesome nuanced conversation about what disability means to folks but also, again, just using that language.

And just remembering like especially if we're working with young adults and adults you know or even adolescents again giving that autonomy and modeling for them like, and being like -- look I understand you and, showing that respect. And instead of saying hey I'm the one that knows best, because we don't. Right.

All right DJ that's all you.

>> DJ RALSTON: All right. So, um, we decided that we thought, it was really important to spend some time focusing specifically on gender identity and working with transgender and gender expansive or gender non-confirming folks. And, we know that a lot of folk don't know a lot about transition other than they just know the word.

So our hope was that we could, give you all a little background, through essentially the transition 101, so, the American psychological association or the APA defines transition as -- the process of shifting

toward a gender role different from that assigned at birth, which can include social transition, such as new names and pronouns and clothing and medical transition such as hormone therapy or surgery. We're actually going to get into one more piece of this, which looks at the legal transition which actually can go along with the name thing but Lucas and I are going to walk back and forth through these pieces. And, we're actually, going to use someone from Instagram his name is Chris Mosier, trans man, athlete pro-athlete for Nike, all American, he is -- been on the, national -- he has been a national champion twice and six times on team USA for the USA triathlon team he is an athlete and professional speaker he posted the next few slides that we're going to share with you all, as an education piece on his account, Instagram account @thechrismosier he is a really great advocate for Trans folks if you have an interest in learning, more I would strongly encourage you to go check out his web site and/or follow him on social media.

So um, what does it mean to transition? We gave you the American psychological association definition and, what Chris kind of spells out for us is it refers to the process that a transgender identified takes to live consistently with their own gender identity.

And there are kind of 3 main categories of transition and the reason that we're going to talk about these is because, these actually have impact when we're working with folks, particularly as people a plying for jobs, um, understanding where they are, if they're transitioning if they're not transitioning if they are, where they are. So we'll talk about social transition significance, we'll talk about medical transition and we'll talk about legal transition.

Many people consider transition to be a life long process. Particularly if they're taking hormones that is part of a medical transition when people say a transitioned X years ago they are referring to when they started their process that can actually be, referring to their medical transition and it could be, their social transition, um, normally people will kind of state that, but maybe not. So you just have to that when they say a transitioned X years ago they are talking about when they started and what that process was, there's no right way to transition, this is a extremely personal process and, likely, um, is going to be different for each person, yeah, are there some common narratives occasionally. Certainly.

Um, but -- really, transition is a completely individualized process. Um and the goal of the -- one's transition, that's up to the individual. So some folks, may choose to socially transition so, um but maybe never medically transition or, maybe they -- their goal is to medically transition "Pass" which means to, um, present be perceived as the gender they identify as and that they transitioned to.

So, Lucas I'll kick it to you to take over here.

>> LUCAS DEMONTE: Sure thing.

So, I think it -- oh wait I think I'm on the wrong slide for myself.

(laughter).

All right.

So there is no blue print for transition right. So, you know I think of my experience kind of DJ what you touched upon, so for me I've been socially transitioning for 7 years, medically for six, legally changed everything for the last four or five, somewhere in there, somewhere in there.

So there was no, at least from my experience I can only speak from my own there's definitely not a blue print you just kind of stumble and fall hit walls until you figure it out. That's why I'm very passionate about this work I'm like well no one told me I figured it out it was not cute but I did. I rather be able to make it easier for other folks. Um, and so, people you know, say if they want to medically transition, um, but maybe they don't want any surgical interventions or maybe, they want to socially transition and maybe change their names or gender legal name or don't want to take hormones, people vary and vastly in what feels right to them.

Um, some people might like -- I want a little bit of effects I don't want the full effects of whether that is testosterone or estrogen. And -- people don't have to do anything, to be a trans person or gender expansive person, like people are who they say they are. Social transition can include, that is that changing name or pronouns you know, the way that people express themselves.

Hair styles, mannerisms, speech patterns.

Different bathrooms getting used and so many other things. This is just a brief, a brief list.

All right.

DJ am I throwing it back to you?

>> DJ RALSTON: Ah, yeah I think so. Sorry I think we may have been off a slide. I can -- I can take over and actually you know like I'll show social transition wise that was something a did a long time ago in my personal life for those of you who were on part one of this webinar series you actually, witnessed me socially transitioning in my professional life for the first time, in other words you witnessed me coming out in my professional life on part one. So those of you that were here thank you for joining me.

And in part one, being part of that.

Um, so, medically transitioning so, as -- Lucas was mentioning medical transition can actually, include any, all -- you know, just one or two of these.

So, medical transition can, include the use of hormone blockers, um, or hormone therapy, sometimes, or often shorthand referred to HRT, which, means hormone replacement therapy. You know, um, that would include, people, taking hormones that will help them to present consistent with the identity that they are.

Um, so -- you know, for a transgender man, they may be interested in taking testosterone for a transgendered women, they may be interested in taking estrogen, this is what we're talking about when we say hormone therapy. Gender affirming surgeries referred to top or bottom forming surgeries I'll not get into the specifications, it is never appropriate to ask a transgender if they are having the surgery or had the surgery that's not okay. That's not something we ask or need you to do

>> LUCAS DEMONTE: I wish it was one surgery I'm jealous.

>> DJ RALSTON: Thing like electrolysis or laser hair removal and other gender performing procedures like voice therapy, there could be, things like, like physical therapy, in terms of to present carry in a certain way there's a lot of different gender affirming procedures and, therapies that, a transgender person can include, um, in their transition, if they are choosing to medically transition but they do not have to include all of them, um, or, any of them quite frankly, it is again a really personal process. Although, we will talk about, some of the legal transition issues in a minute and, Lucas I know you can add in some stuff to this, so, what does it mean to legally transition the legal transition is, when we're talking about by the way, #spoiler this has implications for folks we're working with, if someone legally transitions that means they have change their name, likely, and their Social Security card, their birth certificate, so, like changing their name and gender potentially, would legally, the legal process of changing one's name, right.

That means that if they do that then they're changing their banking documents think about all of the paperwork we fill out when we go to work for a job starting with the employment right you have to include your legal name on any application that you're submitting. Right. Like you have to, swear to all penalty of perjury all the information I provided is true and correct. Um and -- you know your feeling out your W-4, like all of that legal paperwork, um you're providing your identification for verification of I9 all of that stuff, if you have legally transitioned, then your documentation, thing like your driver's license Social Security card birth certificate will reflect the name and gender, potentially the gender, that you have transitioned to.

Um, so, what is interesting is, um, what we have to say here is, um, this is not an easy process because, it is actually, state and locally controlled.

So, like for example, where I live, you have to like go to the local municipal courthouse to get your name changed and there are a series of step to be done with that, some states will depending upon the state you're born in you can change the gender marker on your birth certificate some can't, some will allow you to change the gender marker on your birth certificate you have to go through certain types you have to have a surgery or two or you have lived, as your authentic self for X amount of time like

there's, you have to have letters from therapists, so, part what we can say about the legal transition is, it really wouldn't be legally transition is the locale and as well as the different steps one of the places we would direct you is the transgender law center national transgender law center is a really good resource a lot of times your state LGBTQ+ advocacy center Google it, I had someone ask me a question from Indiana the other day about changing their name I'm like -- click click here is the Indiana LGBTQ+ center.

Go talk to them. Like so that is the direction we would point you in, we'll get into that more.

I realize, that we're -- we're probably running -- behind so I don't want to say too much there, but, um, the point is not trans person wants to medically transition. Doing so or not doing so, does not make one or less Trans this is a very important thing there's no right way to transition there's only a right way for you, right. So, um, by the way some of this should actually sound really familiar to folks kind of parallel a lot about, what we say relative to disability. Right.

So, um, Lucas I think this is you?

>> LUCAS DEMONTE: I wanted to add in there's a couple of questions about you know, there was someone who asked, well, why would folks microdose hormones honestly that varies up to each person. It is a little bit newer in terms of the visibility piece in the medical field. Some folks, I mean the experience that I have been relayed because it's not my experience is, that it is like maybe I want some masculinity or feminizing effects but I don't want my voice to change, maybe I want some of my curves to go away but still maintain my singing voice it varies with each person. So that's something that to kind of keep in mind, everyone has different reasons to transition.

Um and -- like you said DJ different ways of transitioning. And yeah the paperwork part that's a whole other conversation since we are running behind I typed an out for someones I'll dive into pronouns.

So, with pronouns I think the biggest thing to recognize this is a question I get a lot, um, when you're referring to people, in the past, use the pronouns they use now. So, for example, for me I was assigned female at birth, raised as a girl and woman, not raised as a woman you get it.

Um, and I started transitioning socially, when I was about 21 but, you know, I would refer to myself as like oh like he -- even in the past, even if maybe at that time I didn't identify adds that. So, that's something that is really important to do. Because that's also, being respectful and acknowledging, folks the identity in the present their present self is like also, in their -- in their self. So as far as pronouns go, I am not going to spend too much time, you know there's different types of pronouns you know there's - - feminine, masculine, gender neutral, there's so many different types I think it comes down to modeling like how you could see on our screens. If you are able to, we have our name and then, right next to it, the pronouns that we use. Um, and that's a great way you know, to normalize pronouns and also, being able hey I'm so and so, my pronouns are blank and blank what are yours? That's a way when we normalize the conversation even when we use it with non-like gender expansive folks people ask, why are you asking me about my pronouns that is like what is going on, another way to complicate.

>> DJ RALSTON: Awesome thanks Lucas, so, um, for those of you get the reference to the Meme most interesting man in the world he is saying, to us I don't always use they as a singular pronoun when I do, I'm being gender inclusive.

So clearly, something near and dear personal to me, if you are looking and if you remember from the beginning of this presentation, um, I identified my pronouns they, them, so -- just to kind of note for folks that would say, that's grammatically incorrect I can't use that, actually, Webster's dictionary add the singular they, that was the word of the year as 2019, is in the Associated Press style book and Chicago manual style which the two entities of the governing basically kind of news outlet in the world. So -- and then finally it is also been included in, the American psychological association or APA manual as well so when you're reading peer reviewed journal article it's is completely appropriate within style guides and grammatically correct to use they as a singular pronoun for folks so Katherine -

- we'll kick it off to you, to talk about a bit about the power and privilege.

>> KATHERINE HURLEY: I wanted to, as we get into the power privilege we're having some internet outages here in DC where I am, if anything, if I cut out I look forward to kind of kicking it to over to my colleagues I wanted to let you know in case I weird and quit. In terms of power and privilege, we wanted to begin the conversation around this topic and, something a way to start there I wanted to harken about the multicultural social justice incompetencies what you see is a -- that set of competencies used to talk about, power and privilege and marginal decision in the counseling field. The way that we do our work for those of us who are counselors in the room. Something to know, is that in counseling counselor has power.

Someone else's coming for help, and inherently there's a power dynamic there. Along with that there could be, privileged counselors privileged client and marginalized clients and marginalized counselors in terms of race -- (pause)

>>

>> DJ RALSTON: Did it really happen?

(pause)

Yeah. She did freeze.

Um, okay

>> KATHERINE HURLEY: Yep.

>> DJ RALSTON: So hopefully Katherine will be back with us, any second.

Um, but, let's, kind of Lucas do you want to help me jump in you may have more familiarity than me relative to the mental health side. But, um, so, um, --

>> KATHERINE HURLEY: I came back I'm not sure where I froze but I was speaking about internationality in terms of the client and counselors working together. So -- so let's move to the next slide, um as I am on borrowed time it seems.

So when we talk about power it is important I believe to think about every individual internally has power when we're saying someone has power doesn't have power in a situation it is no the to take from our clients or individuals, there's a power within all of us I wanted to kind of, call up here Viktor Frankl a founder of what we do in terms of psychotherapy, a holocaust survivor, between lows and response there's space in that space is our power to choose our response. And it is very important I wanted to start there, so we're not, saying people are powerless inherently we all have power inside of us, but when we look at the cultural structures, there are differences in power, um, culturally and societal if you don't mind going to the next slide, DJ.

So what does -- having power mean to you? That's, for everyone in the room, I offered some suggestions what it may mean to you. To start the conversation, um, so -- does power mean to you, physical might? Does it mean the ability to make an impact on the lives of those around us?

Does it mean the ability to make decisions that govern the way we live our own lives? Does it mean the way that we can -- we are able to decide how others live their lives? So, all of these, are true statements and there are many more ideas about what power is and what power means but if you don't mind going to the next slide, DJ.

We're going to talk about, we'll focus is on the ability to make an impact on the lives of those around us.

And the ability to make decisions on way we live our lives, and the way that others live their lives.

So if you don't mind going to the next slide, DJ.

So here, I have some visual representations, of moments when rights were up for debate, recent and in the past and these are representing also groups who have been marginalized to continue to have marginalized status in our see sigh society, if you look at the top left, if you you all recognize the Americans with Disabilities icon to show that's a time when you know rights of individuals with

disabilities, and employment other areas, were brought up it is someone is pointing out, it's 30th anniversary we celebrate that, that's part of the conversation we bring here today and a lot of the work we're able to do. Next to that in the middle, we see Dr. Martin Luther King junior shaking the hand of Dr. Johnson in 1964 with the signing of the Civil Rights Act. To the right of that we see supporters for equal rights, which was just happening, supporters for the LGBTQ+ employee rights that were just passed and we'll speak about that in a moment I would like to point out this flag, um, is the equal -- the human rights flag it's about equal rights for all when you see this in bumper stickers and flags that's what this is, equal rights on the bottom element we see the lovings if you see Mr. and Mrs. Loving in 1965, they were the Plaintiffs in the inter-racial marriage it was illegal to be married, they had at odds of the law they had to fight up to the Supreme Court to have their love their marriage be legalized and, in the idea of marriage also, marriage equality this is the key Plaintiff, in a case that ultimately, um, got -- us all rights, marriage equality for LGBTQ+ individuals.

And I love that picture. It makes me emotional.

Um, all the way at the bottom we also see sporters for the rehab act of 1975, individuals protesting the excreted for equal rights and access for Americans with Disabilities.

So I wanted to bring these up to say these are things that are, these photos from 1965 and 2020, just a months of ago, conversations being had one way to think about power in this imagery is, if you ever had your rights voted on, if other people got to decide who you love, what employment rights you should have and so forth, um, you have been in a marginalized class, if you never had that experience you're probably in a position of power.

And we will talk about intersectionality, you may be in a position of power and not in another aspect. For instance I identify as a lesbian I'm also a white Cis transgender woman I have a power in terms of the racial dynamics but my sexual orientation is marginalize I had the right to marry it is equal rights in the eyes of the law, 2015, employment rights 2020 -- um, if you don't mind going to the next slide.

>> DJ RALSTON: Are you with us maybe you're frozen --

>> KATHERINE HURLEY: Who started this, but -- probably some (choppy audio) on the internet.

>> DJ RALSTON: You froze a little bit -- you froze up you may have to start from the beginning Katherine with us.

>> KATHERINE HURLEY: The conversation --

>> LUCAS DEMONTE: He can't hear us.

>> KATHERINE HURLEY: Okay. Okay.

>> DJ RALSTON: You're back, your voice -- yeah there you go. Start this slide from the beginning.

>> KATHERINE HURLEY: In terms of this image, um, against, perceive quality you know -- um, and -- what we've seen I think everyone can hear me now.

You probably have seen this page in terms of, this is, something that is on the internet and many iterations I'll talk about and we'll go through. In terms of when you talk about equality, what are we, what do we mean? And so here you see this image of 3 people, watching a soccer game. Um, and in this image, I see that I'm off and on, um, in this image you see, an individual who is tall enough to see over the fence and an individual who is medium height can see over the fence with the help of this crate and an individual who is not able to see over the crate with the -- over the fence with this crate.

Um, and am I able to be heard?

>> DJ RALSTON: Well you were Katherine but then you you just cut out. I think I can pick up at least this portion and -- Katherine it was also recommended maybe you should, turn off your video, because that will save some of your bandwidth. Um --

>> KATHERINE HURLEY: Yeah.

>> DJ RALSTON: Yeah. Are you there?

>> KATHERINE HURLEY: I'm able to hear you I'm going to, if it's okay, stop my video just to see if that helps with the issue.

>> DJ RALSTON: Perfect.

>> KATHERINE HURLEY: Okay. So, talking about equality and, forgive me if it's redundant, but quickly going through this image, equality is everyone gets the same amount of step tools in this image everyone gets a crate to stand onto see the soccer game we can see the individual is tall, and the individual who is kind of medium height can see with this crate. There's someone left out not able to see over this fence.

If you go to the next slide DJ -- then we have equity the idea of equity, when we talk about it, where equity is, people getting the crates that they need, so the individual is tall doesn't need the crate you can see that now the individual who is -- the shortest height gets two crates is able to see the game. So that's what, a visual representation of equity is. When people talk about, we fight for equality this is what this is.

I want show you this is -- equality and equity. This meme is all over the place many different iterations here we see a drawing where equality is a an individual in a wheelchair equity in this way the drawing is being shown, is -- including things that people need which we know from, our work you know Rehabilitation Act, ADA these are things that people fought for, this is part of our conversation every day both of these images. You mind going to the next slide DJ.

So, then I'm going to show you some other takes on this idea. So, justice -- this is an idea of justice and justice is, a chain link fence because no one needs a crate, why is the barrier opaque to begin with? Um that's a way of seeing through. So, these are ways to start the conversations about what are we really saying when we're thinking about these very complex concepts. Um, do you mind going to the next slide.

Then here we have another drawing I was able to find who drew this one the other ones are owned by the internet it seems that here's the equality and equity and liberation why is there a fence in front of meme at all. These are conversations people are having within the community and groups of advocacy on the streets of I didn't think it is all over the country when we talk about equality and equity, what is liberation, why do we need a fence? Why do we need that is opaque, so forth I wanted to draw your attention to the center for story based strategy, which is the fourth box if you're ever in a conversation working with a client or yourself, there's the option to draw the fourth version at that site. These are artist renditions ways to start these conversations. Um, there's more, just like the conversation we're having before, about -- the way that people identify, the words change, these ideas you know up for us to continue and grow and push forward.

Do you mind going to the next slide, DJ.

So privilege.

>> DJ RALSTON: We lost Katherine. So --

>> LUCAS DEMONTE: We were doing so good --

>> DJ RALSTON: Yeah.

>> KATHERINE HURLEY: Talk about power and privilege in the world -- let me --

>> LUCAS DEMONTE: You might need to start over.

>> KATHERINE HURLEY: Okay. So -- so apologize this is, um -- a very, I know annoying for everyone and very stressful for me. So, privilege -- in the world these images -- the people who are privileged are the ones that could always see. They never needed a box, they could always see over the fence in fact, appears to be built to their height their specifications.

They, you know, the fence is built thinking that people can see over it, these are the people in these images. Um, who are always seem to never be hindered by the fence if we go to the next slide -- DJ if you can hear me, if I'm still here -- okay. Great.

Intersectionality, I wanted to use the same images because, in other areas of their lives just because

they're tall, um, which gives them, privilege in this, in this world of cartoons, they may not have privileges in other areas they may not have power. So, you see that, all 3 of these appear to be men of color, people of color. And -- that's where we start to talk about intersectionality, when we look at this cartoon world, because you're tall the fence is built for you don't you live in that tense, that's when we touched on this, I talk about this, in part one, I want to you know, invite the conversation to continue here.

We're talking about intersectionality, this is, other imagery using the Venn diagram to think about the ways we interact with who we are, the sexual orientation and gender identity and disability status, can also be your Nationality, your -- your um, citizenships status the racial identity, so this is a non-exhaustive Venn diagram you can see there are, we match up in different ways some ways I said I'm a white Cis gendered women I'm privileged in other ways my sexual orientation, may be marginalized and people might be voting against my votes, for origins it, if you don't mind, um, going to the next slide DJ.

And I wanted to call up this is a slide from our first presentation, because we're, we're talking in this group about sexual orientation disability gender identity and, we all have intersectionalities, we all have different parts of us, and we talked about an example, of thinking about um, you know age, other you know being -- one way we talk about it, who has power and privilege is right handed people have you know the world is built for them, the best vests are right handed scissors are right handed and left-handed people have difficulty, the world is not built for them. So I wanted to bring up this, this -- definition, because when we talk about intersectionality in a way, it is specifically related to, I'll read it right off the slide -- the interconnected nature of social categorizations like we're talking about race, class gender and more -- regarded as overlapping and interdependent in systems of discrimination and disadvantage when we're taking about this, inherent to this is a level of discrimination or disadvantage and where, where your intersections play in this way. This is, this conversation around intersectionality.

Mind going to the next slide DJ.

So I -- um, I will start this conversation, but this one is going to be open to us all. So I wanted to talk about it as I touched on the inherent power of the counseling relationship we're talking about creating safe paces for those who feel marginalized it is very important for me to say, um, some very good advice, I received from a supervisor way back when, you do not, as a counselor, as anyone, get to decide that this is a safe space.

The person who is coming into it, the person who may be marginalized and so forth, gets to decide, this is a safe space for me. So, sometimes I think we use language of oh I've created a safe space I want this to be a safe space we can strive towards making it that way, in you know learning about using correct language all the other ways adhering to the ethics but the person coming into it, decides / this is a safe space for me. The conversation about, intersectionalities, we can be knowledgeable on one this is a place where we're continuing to learn and grow, always.

And, there are just some -- here's a smattering of words how you show up to a space to attempt to make it safe and that's you know we come to authentically and open mindedly, come with accountability and thinking about having done some work who we are intersectionalities how I step into the room, how my identity may be effected or thoughts about it changed we do internal work and come with human or and forgiveness including for ourselves and everything else that you are, you bring into that space.

Lucas do you want to continue the conversation on the slide?

>> LUCAS DEMONTE: I can do that, just quote note if folks do have content related questions use the QA chat because I mean, as the presenters were not really looking much at the, the general chat because it moves very quickly.

So, thank you just wanted to make that note.

You know I really appreciate that you said like we don't determine what the safe space is, our clients do.

Um, because you can think, you know, you can think that you're a safe person but then, you're like -- well wait I'm not getting certain referrals any more but like what is going on here? And, the -- the fact of the matter is, that the community talks whatever community that is, or communities that, again, intersect. For example, like with a lot of youth that I worked with, um, there's a time that I was like the only trans identified counselor in the whole area and as soon as one person heard that they told everyone I got influx with trans youth I'm not mad, but it very instant, it was instant, versus in the community where you're the safe not a safe people, people will tell other people it is almost like think of it you get a Yelp review, some people will either you know, really endorse you or they will really not endorse you. So -- (laughter) -- so, these are thing maybe you get five stars maybe you get one, the thing is it's not about us when we are recognizing that we may be need to do some things better it is not a attack on you as a person. Um, same with privilege it's not an attack, it is more like okay, how do I show up in a space that I can be welcoming and affirming and, just like be a better human? So, so we have kind of challenge our views and I like to challenge cultural competency is not enough I know the thing, how are we applying the competencies how are applying this. A lot of times it's not enough to know, same from webinar is taking concepts and using them, in applying them. I want to be mindful of time so just very quickly you know, again there's a note about, decolonizing versus unsettling you know, it is, that's a very nuanced conversation for white folks it would be specifically for unsettling folks of color would be decolonizing that's something that just for sake of time we'll have to get into, another time.

>> DJ RALSTON: Real quick to add on there was a question speaking about challenging our world views and culturally responsiveness there's a question being transgender whether being transgender would be considered -- would be considered, as having a disability that answer is no.

The question that was raised there, actually a really good question, came from a person of non-judgment purely wanting to understand I think that's a great question raising that, quite frankly, people that are transgendered at a disadvantage because society considers, many parts of society, considers folks who are transgender as, though there's something wrong with them. They actually even, asked, as it related to the physically to the DSM looking at previous diagnosis for that person that asked the question if you have not seen our part one, we encourage you to go back and wax it we walked through the historical kind of progression through the DSM. And -- you know as it relates specifically to the folks that gender expansive and transgender really the only kind of defining diagnoses in the DSM is gender Dysphoria we talked a bit about, as it results to -- to the an experience that some trans people can have, but not all trans people necessarily have it. And, whether you have, gender Dysphoria does not determine whether you're transgender, there's a lot of great information out there I wanted to be able to answer that question.

>> LUCAS DEMONTE: There's a few, really someone asking about, the trans train is a good documentary I never heard of that, but I would recommend if you do want to watch the documentary I would watch disclosure. It is beautifully done, it is, capturing the experience from, all sorts of gender expansive folks some maybe you'll recognize as prominent actors actresses some people maybe you won't. That's a really great way to dive deeper into the different narratives that permeate, society and have historically and are currently. So that, to answer -- to answer that piece and then the two too young I want to get to that, maybe we'll get to that in a second I don't want to be mindful of the time so let me move forward. So if we're looking at, you know -- power and privilege working with youth there's a lot of, I mean again there's, yes, someone loved disclosure, great documentary. Working with youth, there is again, how Katherine talked about, there is that, inherent power dynamic especially when it comes to age and a lot of times you know, societal we don't value youth as much as we could, you know that would be called ageism if the sense that these kids don't know what they're talking about, they're too young to transition right. I think a lot of it comes down to, you know, strategizing and listening to youth, every time I ask youth it's like what do you want providers what do you want

people to know just listen to what we're saying, but not listen and then do nothing, listen and apply the things we're saying.

Um, and I think, you know, that comes with being a clinician and VR and you know, it just comes with listening to what your clients are saying, because we don't know best we maybe know to be like a sherpa right I don't know if you can hear my dog she is dreaming currently (laughter) -- so, you know, we are not all knowing identities we're all kind of collaborating together.

And so, that's how we can strategize with youth some folks may not be out to their families but maybe are out socially or maybe not out to anyone and it is may be the first person they're talking to is safe to have these conversations with maybe guardians or you know, with future work and I think that another big thing too, is you know, making sure that you're in touch with resources, in the community as well as national, which again, we have a list we have some we'll talk about what resources are reliable or not.

>> DJ RALSTON: Right. Lucas there's a really great question in the QA that kind of comes right with this, and like, relative to not wanting to out folks like what is an approach for p.m. who are starting to ask questions about maybe someone in your family has not come out to the rest of the family how do you handle that? Particularly I this we see this, in the context of young folks so I am wondering if you wanted to answer that really quick or -- if you had thoughts.

>> LUCAS DEMONTE: Yeah. It is a very nuanced conversation that's something we can have with an own presentation on, it comes back to that listening, listening to youth and having open transparent conversations I have something done is I help facilitate conversations between youth and guardians that sometimes doesn't go very well. So sometimes, it does again it is collaborative piece, if you can go back -- to the other side --

>> DJ RALSTON: Yeah.

>> LUCAS DEMONTE: I want today describe what the meme is, it is saying you're the chosen one I wanted to throw that in there.

>> DJ RALSTON: Okay. Yeah.

>> LUCAS DEMONTE: Looking at bridging the gap we have 12 minutes left, I want to be mindful. So, you know, how we talk about in this conversation, you know reconciling language, so like meaning of queer and -- you know, persons with disability, versus disabled these are nuanced conversations it comes down to that how do we collaborate intergeneration tally, how do we use the language of youth and young adults how do we bridge that gap? And so that's building that self-awareness I highly recommend get a TikTok if you have not, get it, get a sense of what, you know the youth are you know, posting about, talking about, same with Instagram follow some well-known, trans folks, et cetera. You know, but that listening to youth directly, um, and that due diligence in making sure that we continuously educate as well, model those communication skills and active listening when folks feel heard and seen I say that in the general sense, because -- again, everyone's ability varies it is, it creates an environment where people will -- open up to you and it will be safe. Because you're creating a space of like DJ mentioned you know creating grace right? As well as, being like I'm open to having these conversations. Um, and, I think the biggest thing too is language is always changing so is culture, maybe some 90s, early 2000s clothing is coming back right now we're in 2020 things are constantly changing or things will come back.

So, I think it's normal to not know everything I mean, you would agree being in the community we don't know everything I like to think as a -- adult, and continuing to age I think the older I get I'm like I really don't know if that's the cool part you get to be curious about everything.

And so, just you know, making sure that when you're asking people questions or taking you know, if you're documenting, for your case files I had that -- I see that question is more just about, what is relevant, what is not.

Don't ask or write things down because it is irrelevant or if you're like I want to know you know, what they got, um, between their legs like is it relevant, are you a physician? You need to know these

things? Or are you just kind of being curious it's in away being curious this is not actually my business. So, you know, really wanted to hammer that home DJ seems like you were going to answer a question?

>> DJ RALSTON: No?

>> LUCAS DEMONTE: Okay.

>> KATHERINE HURLEY: I'm happy, I'm here -- to -- make sure I'm not echoing to start the discussion I know, mindful of time here, but, this is a header for thing that we're going to start conversations around.

Or, at least you know, leave you to think about, if we don't have enough time, um, so -- disability disclosure in the work place -- just, a reminder about as DJ kind of started the conversation, disclosure has, um, roots in all of this conversation for individuals LGBTQ+ and individuals who have disabilities and so forth. So thinking about, protections that individuals have ADA rehab act of 1973 and specifically to the question of disclosure, with disabilities, um, guidelines very good guidelines I think, um you may, you know have other communities with askjan.org, guidelines how and when you may consider disclosing.

The most important part, there's a typo in that one the decision is singular decision is yours, specifically. So you can read guidelines you can -- um, other people may have input about you know, what they think you should do, but you get to decide, if you -- if, where, to whom, when and so forth you disclose or not you don't mind going to the next slide, DJ.

In terms of, LGBTQ+ in the work place talking about the recent Supreme Court rulings, so again, that conversation, around disclosure the decision being yours is the time, um, in January 15th the Civil Rights Act was deemed to include work place discrimination for LGBTQ+ employees.

So that was a win, where -- I talked about this in the first part, but -- one of the Plaintiffs was fired from his job because he joined a gay softball team. So that's how we think that how rights have gone and, not too long ago someone was fired because they joined a gay softball team those rights were won and, but also calling your attention to July 8th the Supreme Court determined a ministerial exception if you're working in a religious setting, um, in those kind of affiliated ways, you can be fired for being LGBTQ+, so -- um, the conversation and the advocacy and so forth continues.

If you don't mind going to the next slide.

>> LUCAS DEMONTE: The steps forwards and the steps back and then you know -- I mean that in a general sense, um -- you know, we saw the work place productions right. But then on the flip side, the health care rights were reversed so it is like you know, that, that piece of like okay, so maybe my working rights, are mostly protected, you know -- but, my ability to get health care, you know, you know someone can say no and -- I mean there's plenty of cases where folks have, died in the ambulance because they would not treat them because they were trans or LGBT, that's something I wanted to --

>> KATHERINE HURLEY: Just to, kind of Harken about the earlier part of the conversation when we were talking about power and privilege the same conversation about, people are making the decisions for the way other people can live their lives in all of these ways and -- you know, to be mindful of that, um, as we're working with individuals as they come and how stressful how much of an impact this can have in the people that we're working and -- ourselves.

>> LUCAS DEMONTE: Lots of great questions I can start this, we can tag team DJ, okay.

>> DJ RALSTON: All right.

>> LUCAS DEMONTE: How you discussed familiarizing yourselves with the legalities of transition. You know are they adult, are they minor, you know, do they have like the -- um you know, guardian or power of attorney? You know, what is your government ID say I mean, I was medically transitioning for quite some time, before I was able to legally change everything because -- it can be a very lengthy and -- pricey process. If you don't -- have the right resources which again I stumbled and fell after I

paid -- all this money to do things I need to do.

Um, you know, so, I think someone was asking me, asking the QA before, you can absolutely transition medically and/or socially, without legally changing anything. I mean, I mean -- my -- birth certificate I'm from Florida I wasn't able to change it, in Florida until I had gotten top surgery.

And then because maybe I was able to change it on my driver's license but my actual birth certificate, I could not.

So, um, that has changed some states have been using an X adding an X for gender markers which is, much more gender neutral. So these are things to be aware of state to state. I happened to read out there's a drop down menu picture where it says female, male and a sense of existential dread there's costs and fee waivers with name change those are things you can work with locally want to throw DJ get your take

>> DJ RALSTON: There's a lot of thing here and some questions that have come into the chat we're about to get to policies and some of that stuff within your own agencies but, what happens when you're working with someone who may be has socially transitioned and maybe, even medically transitioned but they have not legally transitioned they are applying for work? Well, if you're working with someone who is using their resume, resumes they should be using their chosen name. Um, you know, on a resume nothing that says that you have to -- use your legal name, however, once we start to get into application processes, you have to use your legal name. Part of this, um and part of you being a incompetent counselor is being able to have that conversation, with your transgender clients who, may not have legally transitioned and, helping them, A to recognize this is the legality of it, by the way they're going to be acutely aware of it, they're going to know it, they may need some support it's from you, relative to, hey maybe, you guys do some, um -- just like we do mock interviewing do, some of the mock interviewing with them, where they have an opportunity to come in and say -- you know, the -- you play the role of the employer like you know, it is nice to meet you and they say -- yes, I actually go by insert chosen name, that's something that is not way out of your wake at all. So because we really, most trans folks who, have not legally transitioned. They have to use that name, they're going to have to know they have to use the government issued ID, how does that impact them? Can they be something that is difficult? Yeah. What can you do, as a counselor working with that person you can say, hey I recognize, this may bring up some feelings for you S there anything, that you want to talk about? Um, as it relates to this, are you feeling comfortable? Some folks may be okay. They may recognize that, they may go -- I know this is going to be an issue I know this is something I have to get through. So, some folks may want to do that practice like hi my name is -- you know and -- so, that way they can get through that and they can build up that confidence and that space.

Those are definitely things that, I would say that you want to think about, um, so again like resumes, most resumes like, you can put your chosen name that's not going to be an issue on job applications, put that legal name, um but you know sometimes what folks can do too they can put their legal name and in parenthesis on the application, put their chosen name. That's something like guess what guys DJ is not my legal name I've been DJ since I was ten years old. So I have been, putting that name, everywhere, in addition to my dead name that totally Meme, school work with my dead name all over it, someone used my dead name, in my doc program, I about had a heart attack, which is me, Sponge Bob seeing the name looking at it, going -- what is this garbage and throwing it in the fire. Because that's about how I felt. Right.

Um, so, what are some things you all can do within your agencies? Um and examples of agency policies and practices so, one considering your language. There were some questions about, what do I do in a case note, use the person's pronouns, that they are using. So, um, I'll get to the actual policy example for you all -- in like one more slide you have to hang tight.

As far as you know, the MIS system and RSA because I have already seen all these questions in, yes, if people have not changed their legal like they have not legally transitioned they have to include all the legal mumbo jumbo their legal name I recognize that, most of your applications actually make

someone, um, indicate their legal sex.

Assigned which is, typically their sex assigned at birth unless they have the opportunity to legally transition. Which is not the case here.

So, that is going to be indicated, but -- part much what we can do, within our application form and MIS systems if you have that ability or if your state has that ability to add an extra field for preferred name. Add an extra field for pronouns that way they can be identified. And when you case note, you'll use the person's pronouns they're using. So, hopefully that makes sense to you all, other things to think about what are the birth room situations look like, making sure that bathrooms are inclusive, we included the -- the sign in our part one, um, I apologize for not having that there I know we're at right at 3:30, I know that, this is a big one for you all. So -- this would be an example policy amendment that would be specifically, cover pronouns and preferred or chosen names. So -- this is what you could, and by the way you all feel free to literally take this right off the slide and send it to your management, concerned to your state level administrators the people who are doing your policies, um, that are doing that.

When a participant identifies as transgender (reading from the slide)

Indicates a preferred name, other than their legal name, and specifies a pronoun that does not align with the sex assigned at birth or their legal sex, counselors and staff will use the preferred name and pronoun, when working with the participant. For the purposes of the MIS record, if the participant has not legally transitioned the MIS record shall reflect their legal name and gender to match identification, however, counselors and staff are still expected to use the person's identified name and pronoun.

If the participant has legally transitioned i.e. government identification reflects name and affirmed gender the MIS record should reflect the name and pronoun consistent with that legal documentation in that instance. So -- this, PowerPoint presentation don't worry it will be posted to the web site. This same place you'll go to get your CRC credits you can download the PowerPoint and borrow the language send to whoever you would like. The long and short of it is folks is what we're really talking about here, is just, your basic principles of being a good VR counselor mental health counselor or social worker you all know what those are and that's to talk with your folks. Establish and create the safe space someone can say to you, question these are what, this is what I go by. You know what? Guess what? How many clients do you have, named Robert, who go by Bob? What do you call Robert? You call him Bob. Don't you? Because he says I go by Bob. So, there's no difference if someone comes in and says, you know, like, I go by -- like my legal name might be Joseph I go by Shawna you call the person Shawna it's no different right I guess I'm on my soap box a little bit I don't mean to be but I do think it's really important I really just, I know you all have these skills I know you all are here, because you really desire to want to help folks, and be kind and -- understand, um, and -- it goes back to that conversation of grace right you all. Like -- trust me if you're making an effort if you let the folks that you are working with know that you desire, to their ally, they're going to extend you that grace, they will speak up and hopefully feel more comfortable correcting you those in those cases the last part of this presentation is really about, you also do not have to be the expert there was a question that came in at one point what do I do, if they're having issues that are really precluding them, really inhibiting them to reveal today their gender identity? That's not your job shall you're not the expert in that, right. You can be the expert in connecting them to resources and experts so -- you're not expected to be the expert we would encourage you to be familiar with the local resources I can guarantee you, if you are, um, in a state you Google your state and LGBTQ+ center you'll see a list of resources that is going to pop up, you can also look at your equality chapters like there's equality Ohio where I am or a equality Florida or equality DC if you search equality, and put your state's name after it likely, you might find that or if you're near a bigger city in suburb you're close enough to a city you'll find that.

We talk about GLAAD the Trevor project if you're working with youth, the Trevor and it gets better project you can watch a series of it gets better, those are really powerful for young folks human rights campaign Katherine touched on PFLAG parents and friends or parents and family I can't remember at

this point. So -- um, yeah. We have a series of other resources, these resources are always listed as a handout on the trainvr.org web site that accompany the archive of part one and part two will be -- posted.

Katherine -- Lucas -- I'm going to throw it back to you.

>> LUCAS DEMONTE: I'm sitting answering questions, um -- as -- best and fast as I can.

I think, there's a really great -- comment about -- maybe frustration, not how folks would feel as I think as clinicians it is our due to make space for that frustration, even if it's not necessarily targeted at us or if it is, that's us to listen be like what do we do to make this, will you frustrating that's something, you know, otherwise I'm responding to folks comments Katherine I'll throw to you.

>> KATHERINE HURLEY: Thank you I wanted to thank everyone for being here as DJ touched on the reason that you're here is you, you want to make more inclusive you know, open space and you want to learn and -- we want to have these conversations, so, really, thank you everyone, who is here. Who has to leave we're mindful of your time thank you for spending this time with us and you know continuing this conversation.

Um, beyond borders of Zoom call.

>> DJ RALSTON: Yeah I can't thank you all enough I think at some point we had like 800 people today, so just, um, it makes me feel good, I'm sorry if I got a little preachy at the end.

We are here, you can find us, certainly, so please feel free to email and reach out, and -- we will do that. Thank you all so much for being here thank you to both of our fabulous ASL interpreters and to our Captioner Terry -- so Kristen and Katie and Terry thank so much for making this accessible and to all to the panelists, you rock for answering the questions we look forward to maybe seeing you on a future series that gets -- even more into the weeds of that desire is there thank you everyone take care.