



Connecticut Balance of State Continuum of Care

Ending Homelessness in Connecticut | Email: ctboscoc@gmail.com | Website: www.ctbos.org

Implementing Equal Access Rule, LGBTQIA2S+ Policies & Preventing Family Separations

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Pronouns: *she/they*

HOUSING
INNOVATIONS



Learning Objectives

- Understand the terms encompassed within the LGBTQIA+ umbrella
- Understand the requirements of HUD's 2012 and 2016 Equal Access Rules
- Understand HUD's prohibition on involuntary family separation
- Learn about the CoC's LGBTQIA2S+ anti-discrimination policies
- Review a sample agency-level anti-discrimination policy
- Understand how to create safe and inclusive projects through good policy and practice

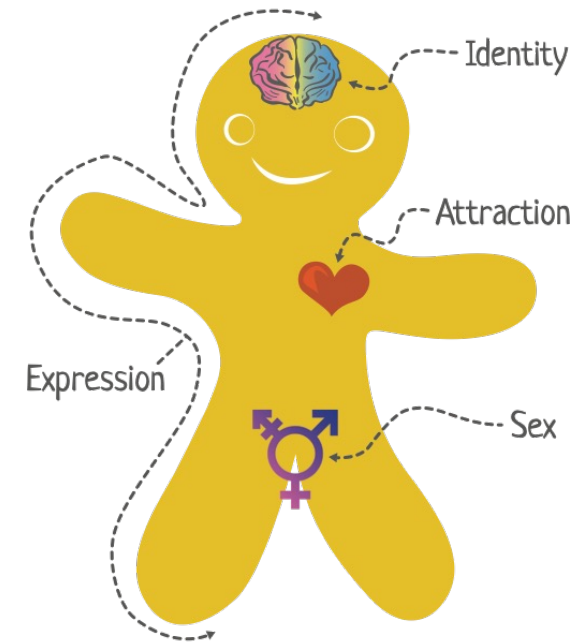


Using Terms Appropriately & Respectfully

- Gender Identity
- Gender Expression
- Sexual Orientation
- Transgender
- Transitioning
- Non-binary

<https://www.genderbread.org/resource/genderbread-person-v4-0>

The Genderbread Person v4 *by its pronounced METROsexual owner*



⊘ means a lack of what's on the right side

 Gender Identity

⊘ → Woman-ness
⊘ → Man-ness

 Gender Expression

⊘ → Femininity
⊘ → Masculinity

 Anatomical Sex

⊘ → Female-ness
⊘ → Male-ness

Identity ≠ Expression ≠ Sex
Gender ≠ Sexual Orientation

Sex Assigned At Birth
□ Female □ Intersex □ Male

 Sexually Attracted to... and/or (a/o)

⊘ → Women a/o Feminine a/o Female People
⊘ → Men a/o Masculine a/o Male People

 Romantically Attracted to...

⊘ → Women a/o Feminine a/o Female People
⊘ → Men a/o Masculine a/o Male People

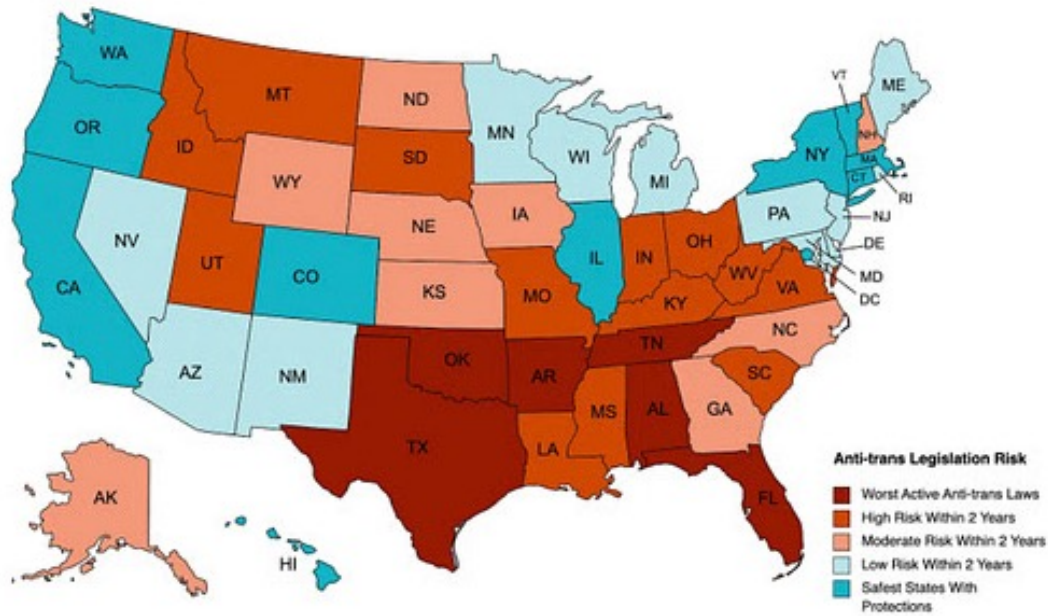
Learning more within the LGBTQIA2S+ Umbrella: Intersex Persons and Two-Spirit (2S)Persons



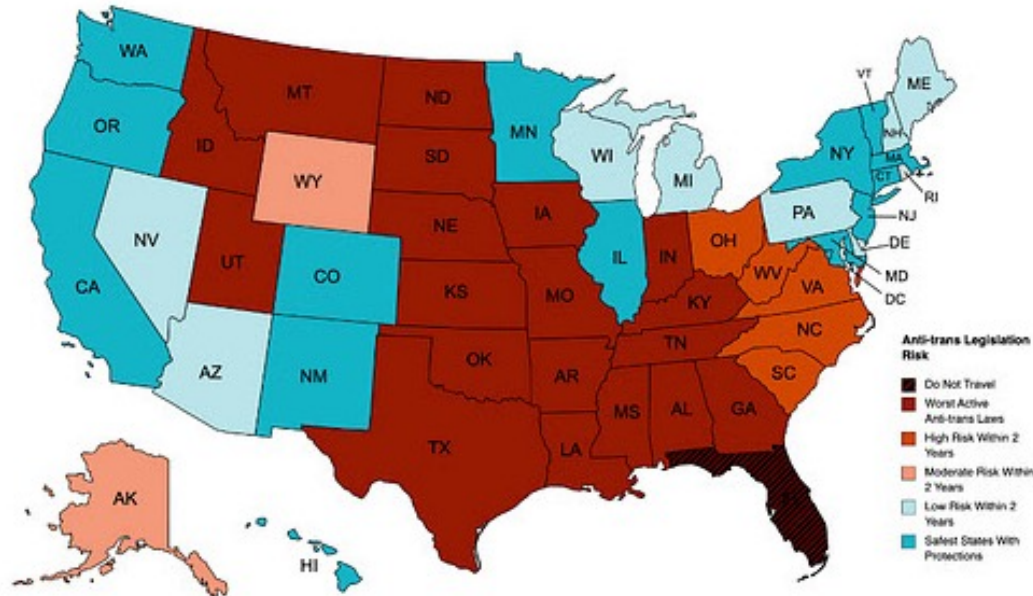
<https://www.youtube.com/watch?v=cAUDKEI4QKI&t=13s>



<https://www.youtube.com/watch?v=4Hj-a5AE-VM&t=82s>



June 2023



Thanks to [Erin Reed](#)!

More Than 40 Percent of Transgender Adults Have Considered Moving Due to Anti-LGBTQ+ Legislation in Their State

In the past year, have you considered moving out of your community or state as a result of anti-LGBTQ+ legislation?

Yes, I have considered moving out of my community or state

No, I have not considered moving out of my community or state

I have already moved out of my community or state as a result of anti-LGBTQ+ legislation

Not sure

LGBTQ+ adults

Topline



Transgender Identity

Identifies as transgender



Does not identify as transgender



Age

18-24



25-39



40-54



55-64



65+



0% 25% 50% 75% 100%

May 19-22, 2023 survey of 1,036 LGBTQ+ adults nationally

DATA FOR PROGRESS

<https://www.erininthemorning.com/p/us-internal-refugee-crisis-130-260k>

Realities faced by Adult Trans and Queer Individuals

What percentage of LGBT adults are living in poverty?

22%

What percentage of LGBT people are unemployed?

9%

ages 16+

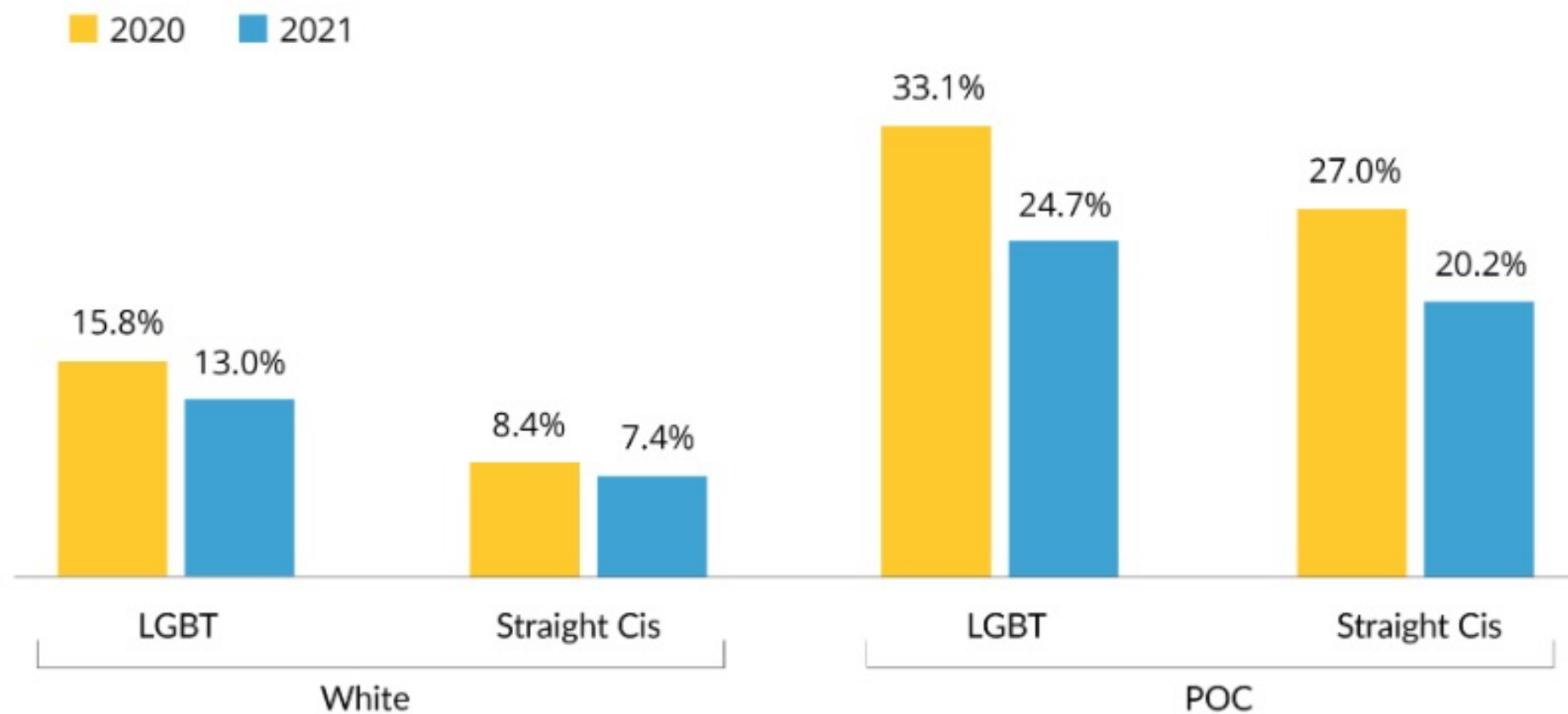
17%

of sexual minority adults have experienced homelessness in their lives

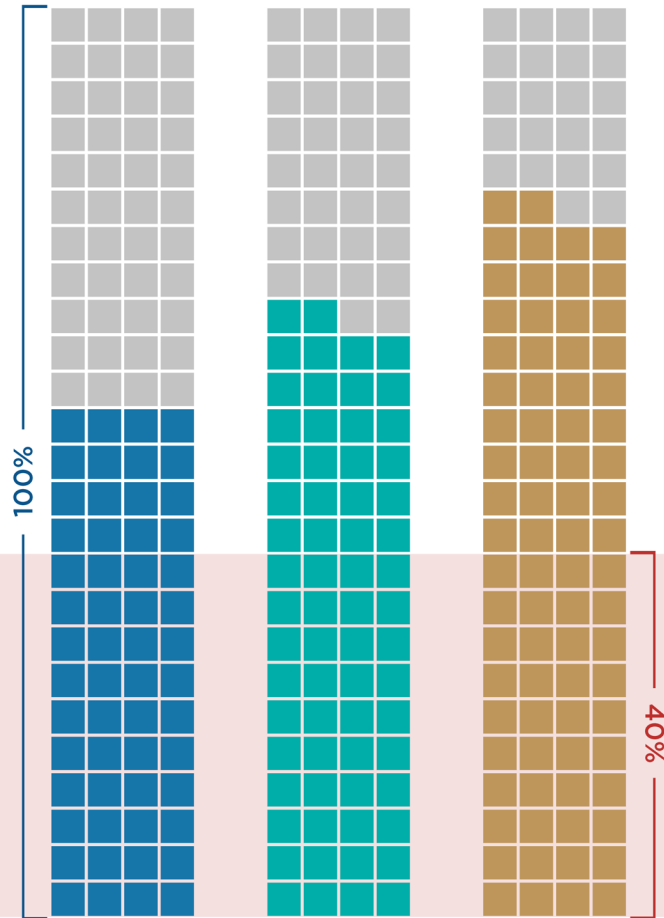
6%

of cisgender straight people have

US poverty rate, by LGBT status and race/ethnicity (2020-2021)



Non-Cisgender Homeless Individuals Face Higher Risk of Being Unsheltered



Of the unhoused non-cisgender population....

56% of transgender individuals

66% of non-binary or gender non-conforming individuals

78% of gender questioning individuals

are **unsheltered**.

Yet, the unsheltered rate for the overall homeless population is **40%**.

Learn more at

endhomelessness.org/data

Source: U.S. Department of Housing and Urban Development, 2022 Annual Homeless Assessment Report to Congress (AHAR). The population categories of transgender, non-binary or gender non-conforming, and gender questioning are used here to align with HUD's terminology in the 2023 AHAR (Part 1).

Why are LGBTQIA+ protections necessary?

Almost all LGBTQ people going into shelters have a fear of them, because it isn't a matter of if it's dangerous, but just how dangerous it will be.

Alex Abramovich & Jama Shelton

Abramovich, A., & Shelton, J. (Eds.). (2017). Where Am I Going to Go? Intersectional Approaches to Ending LGBTQ2S Youth Homelessness in Canada & the U.S. Toronto: Canadian Observatory on Homelessness Press.



HUD's Equal Access Rules (2012 and 2016)

Both have been in effect since October 21, 2016

Equal access is provided in all HUD assisted programs regardless of sexual orientation, marital status or gender identity

Must place and serve individuals in accordance with self-reported gender identity

May not ask intrusive questions or require “proof” of gender identity

Must update policies and procedures to reflect the above

Must take non-discriminatory steps to address privacy concerns



CT BOS LGBTQIA+ Policies

Conduct	Professionalism and Staff Conduct
Privacy	Confidentiality and Privacy
Info	Collection of Demographic Information
Ask	Ask name, pronouns, and title—do not assume
Intake	Gender Separated Facilities and Services
Safety	Safety, Harassment, Bullying and Violence
Health	Gender-Affirming Healthcare
Dress	Maintaining gender neutral policies



Policy: Serving All Families

- When projects serve ANY families with children, they must serve ALL families with children.
- That includes families of any composition type: single dad, single mom, same-sex couples, opposite-sex couples, multi-generational, and non-romantic groups who present for services as a family
- For more information, visit <https://www.hudexchange.info/faqs/1529/how-is-the-definition-of-family-that-was-included/>

A photograph of two women sitting at a wooden table in a bright room with a large window. The woman on the left is an older Black woman with short hair, wearing a light-colored sweater. The woman on the right is a younger white woman with dark hair tied back, wearing a brown sweater. They are both looking at a tablet computer on the table. There are some papers and a patterned cup on the table as well.

Supporting Informed Decision-Making

For Coordinated Entry purposes...

- Which programs are LGBTQIA2S+ competent?
- Which programs offer services that are gender-affirming?
- Which programs have private or private-ish accommodations?
- Which programs have adequate staffing for safety and security?
- Which programs still discriminate against certain family compositions?
- Other considerations?

How to support someone to navigate a system that isn't designed or built for them

- Explain that all available shelter beds are set up in a binary way, serving only women, or only men, as applicable
- Make it clear that you understand that gender is not binary
- Provide information that helps the individual make an informed decision
- Support the individual to decide which placement would be most appropriate for them based on their needs for comfort, safety, and relative privacy



Agency-Level Anti-Discrimination Policies

- Eligibility for services
- Intake and gender identity
- Confidentiality and privacy
- Name and pronoun usage
- Physical accommodations
- Harassment and discrimination
- Medication
- Pregnancy and Reproductive Health
- Dress code



Policy: Eligibility for Services

Gender identity, gender expression, sexual orientation, and marital status shall not be used to deny any services to any individual or household. Staff, volunteers, and contractors may not ask questions or seek information concerning a person's anatomy or medical history beyond that necessary to determine program eligibility or choose to consider a client or potential client to be ineligible for services because their appearance or behavior does not conform to gender stereotypes.

Transgender and gender non-conforming clients who are approved for services shall be provided with the same range of services available to other similarly situated clients.



Policy: Intake and Gender Identity

- Clients shall report their own gender, and staff must document self-reported gender in HMIS and rely on the client's reported gender for the purposes of determining gender-appropriate accommodations within [agency]. A person's gender does not depend on whether they have had surgery or other medical treatments or whether they are perceived to "pass" as the gender with which they identify. Transgender people presenting for intake shall not be turned away or referred to another agency or facility because of their transgender status, the length or extent of their gender transition, or because they do not meet the expectations of what a man or woman is supposed to look like.
- Staff may not inquire into the medical or surgical status of a transgender client's transition outside of what is asked of all clients (i.e. medications and physical and mental health needs that can be addressed by our programs or partner referrals). Staff may not require a person's gender identity to match the gender listed on an ID or other documents, for the purposes of determining gender-appropriate accommodations or entering gender into HMIS.



Intake and Gender Identity in Practice: Responsive HMIS Data Collection

3.06 Gender (until Sept 30,2023)

What is your current gender identity? (Check or circle ALL that apply)

- ☐ Female
- ☐ Male
- ☐ Gender that is not singularly 'Female' or 'Male' (e.g., non-binary, genderfluid, agender, culturally specific gender)
- ☐ Transgender
- ☐ Questioning
- ☐ Decline to answer
- ☐ Do Not Know

3.06 Gender (beginning Oct 1, 2023)

What is your current gender identity? (Check or circle ALL that apply)

- ☐ Woman (Girl, if child)
- ☐ Man (Boy, if Child)
- ☐ Culturally Specific Identity (e.g. Two-Spirit)
- ☐ Transgender
- ☐ Non-Binary
- ☐ Questioning
- ☐ Different Identity (fill in; free text box)
- ☐ Client doesn't know
- ☐ Client prefers not to answer
- ☐ Data not collected

Policy: Name and Pronoun Usage

Staff shall only refer to clients using the client's given name and pronouns. This includes all verbal or written communications with the client, as well as those communications about or in reference to the client with other staff or clients, and in all reports or other documents relating to the client's case.



**ASK ME MY
PRONOUNS.**

Name and Pronoun Usage in Practice

What steps should staff take?

- Practice approaching legal and chosen names with clients
- Practice using your own pronouns and asking about others' pronouns
- If feasible, given state laws, learn the process to update names on vital documents
- Make clients aware that you will assist with changing legal names on IDs or birth certificates

3.01 Name (HMIS Data Element)

- First, ask what name the client goes by
- Second, ask if the name is different from their legal name
- Observe discomfort or change in demeanor?
- If yes, proceed with assumption of trauma associated with legal name

*Systems may elect to utilize an extra field(s) for alias or for notes on name changes.

*Don't have an extra field? Request it from the CoC and HMIS Lead

Not in HMIS – recommend also asking:

What pronouns do you use? (he/him, they/them, she/her, she/they, ze/zim, etc)

IDs and Birth Certificates as Service Barriers

47%

of trans people in states with fewest policy barriers have corrected their driver's licenses

26%

of those in states with the most policy barriers have corrected theirs

476K

transgender adults have no ID with the correct gender marker

16%

of trans people in states with fewest policy barriers have corrected their birth certificates

8%

of those in states with the most policy barriers have corrected theirs.

Vital Records: An Opportunity to Support Trans Clients

Sex Amendment to Reflect Gender Change

How Do I Request an Amendment to the Sex Designator on a Birth Certificate?

If you would like to request an amendment to the sex designator on your birth certificate, you must send the following documents to the Vital Records Office at the Department of Public Health, 410 Capitol Avenue, MS #11VRS, Hartford, Connecticut 06106.

- A certified copy of a court order granting your legal name change, if you would like your amended birth certificate to reflect a new name;
- A photocopy of a valid, government issued photo identification;
- A notarized affidavit from you, signed under penalty of law, requesting a replacement birth certificate be created to reflect that your gender differs from the sex designated on your current birth certificate. If the registrant is a minor, a parent must complete an affidavit.
- A notarized affidavit completed by a licensed physician, a licensed advanced practice registered nurse, or a licensed psychologist, stating that you (or in the case of a minor, your child) have undergone surgical, hormonal or other treatment clinically appropriate for the purpose of gender transition.

- <https://portal.ct.gov/DPH/Vital-Records/Gender-Change>
- [Procedure for Applying to the Probate Court for Change of Name](#)
- [PC-901 REV. 5/22 Petition for Change of Name \(Adult\)](#)
- [PC-910.pdf](#)
- [Request/Order Waiver of Fees \(Petitioner\)](#)
- Other Questions? [Ask Lambda Legal's Help Desk](#)

<https://portal.ct.gov/DPH/Vital-Records/Gender-Change>

How can staff be more responsive?

- Use last names if calling a new or potential client in a waiting room or at a front desk
- Don't make clients feel like their presence is a problem to be dealt with
- If you make a mistake, simply apologize and move on. Don't dwell on the moment – it will only make someone feel more uncomfortable.
- Practice with your colleagues!



<https://www.youtube.com/watch?v=NEHxImFBRrA>

Policy: Confidentiality & Privacy

All clients have the right to privacy. Staff must not share a client's transgender status, non-binary status, intersex status, or medical history without the client's direct permission. This applies to both private and professional settings, including conversations with other staff members. If necessary, staff may share a client's preferred name and gender pronouns to ensure that staff and clients respectfully address the client.



Confidentiality and Privacy in Practice

- Maintain data confidentiality
- Be transparent about who will see the information
- Have a conversation with the client about why sharing their information can improve their experience
- Affirm that responses will not affect services provided
- Affirm that the agency is committed to providing a safe and respectful space
- Do not ask transgender people about their medical history



Policy: Physical Accommodations

Gender-appropriate bathroom and bedroom facilities, as well as changing areas, will be made available to transgender and gender non-conforming clients in accordance with their gender identity.



Physical Accommodations in Practice: Creating Safe Spaces



When trying to access services, people will ask:

- *Is this a place where I can be myself, or will I have to hide who I am?*
- *Is this a place where I will experience violence from people around me—employees, volunteers, or other residents?*
- *Will the people who work here understand what I need?*
- *Am I safe enough here to stay off the streets tonight?*

Make sure you have visible materials that communicate “all are welcome here”



Policy: Reasonable Accommodations

Reasonable accommodations may be made for any individual, transgender or non-transgender, who has expressed privacy needs. Reasonable accommodations are made according to each individual's needs and the ability of the agency to provide such accommodations.

Under no circumstances will a transgender or gender non-conforming client be required to use alternative facilities—including as an “accommodation” for another person's discomfort. Unfortunately, shelter clients sometimes express discomfort regarding a transgender person sleeping in or using a bathroom facility that is consistent with the transgender person's gender identity. Another client's discomfort is not a reason to deny access to or equal treatment for the transgender person. Staff shall work with the clients expressing discomfort to foster understanding of gender identity for the purpose of creating an environment that respects and values all clients.



Reasonable Accommodations in Practice: Consider the Possibilities

- Doors on bathroom stalls that can be latched or locked
- Separate single-use toilets and/or showers
- Curtains or other devices in bathrooms or showers that provide the client with privacy
- Alternate times to use the bathrooms or showers, if requested
- Monitoring of showers or bathrooms to control entrance and exiting
- Alternate housing arrangements, such as a hotel or motel voucher
- Set-aside sleeping, such as rooms or beds that are separate from others, if requested
- Segregated sleeping where one wing is set aside
- Private bedroom (may not be reserved solely for transgender individuals)
- Availability of beds close to night staff



Policy: Harassment and Discrimination

This agency does not tolerate verbal, physical, or any other kind of harassment. Discriminatory and prejudice-motivated comments or other behavior that creates a hostile environment will not be tolerated from staff, volunteers, contractors, or other clients.

If a transgender client experiences harassment, the incident of harassment shall be reported to a staff member as soon as possible, and staff shall take immediate action to ensure the safety of the transgender client. If harassment is committed by staff member(s), the incident of harassment shall be reported to the appropriate supervisor(s) as soon as possible and the supervisor(s) shall take immediate action to ensure the safety of the transgender client. All incidents of harassment must be documented in writing.

Any staff, contractor, or volunteer refusal to work with a client due to the client's characteristics or demographics, e.g. sex, transgender status, gender identity, gender expression, sexual orientation, marital status or civil union status shall result in disciplinary action.

Combating Harassment and Discrimination in Practice

- Regularly educate and promote respect for LGBTQIA2S+ individuals
- Take threats of violence seriously
- Use conflict as an opportunity to educate and work with the harassing client
- Don't ignore bullying or microaggressions
- Don't wait until the moment of conflict to address harassment and discrimination. Make it part of the agency norms now.
- Consider a participant agreement that sets the tone for treatment of others inside your facility.

SAMPLE DOCUMENT:

Communicating Anti-Discrimination Policy to Clients

(Project Name) welcomes individuals who are heterosexual, bisexual, gay, lesbian, transgender queer and/or gender non-conforming of different races, classes, religions, ages and backgrounds. I will be respectful of the other program participants and staff. I understand that any oppressive or abusive language or actions are not acceptable. If I have any questions about this policy, I can ask a staff member to explain it to me.

If a program participant or staff member is acting in an abusive or oppressive way towards me, I know that I can report this behavior to a staff member. If I feel that the issue has not been addressed, I can then report it to the project coordinator, _____. If the issue has still not been appropriately addressed, I can bring the issue to the executive director, _____.

Signed: _____

Date: _____

Policy: Medication

All medications must be labeled with a client's legal name as it is recorded in HMIS. However, clients can label medications with their chosen name and use that name when requesting access to their medication. Facilities must provide a way for clients to label their medication (e.g., a sticker). Medication must be accessible at all times. Some transgender, non-binary, and intersex clients may use hormone medications such as estrogen, progestin or testosterone. Clients have the right to keep their oral medication on them. Staff must allow clients to keep their oral hormone medication with them if requested. Clients must store medical syringes in the administrative office of the facility and must be given access to a private and sanitary space to administer the medication. In those instances, shelters must have sharp disposal containers at the site. If a client's medication requires refrigeration, staff must store it in the office in a designated refrigerator for medications.



Policy: Pregnancy and Reproductive Health

Staff, volunteers and contractors shall refrain from making assumptions about patients' contraceptive plans, sexual orientation and gender identity and expression. Staff must offer all clients access to the same reproductive health information and services regardless of client appearance or gender and must not make assumptions about a client's reproductive status or functions based on the client's appearance, behavior or any other trait. Information on reproductive status must come only from the client.



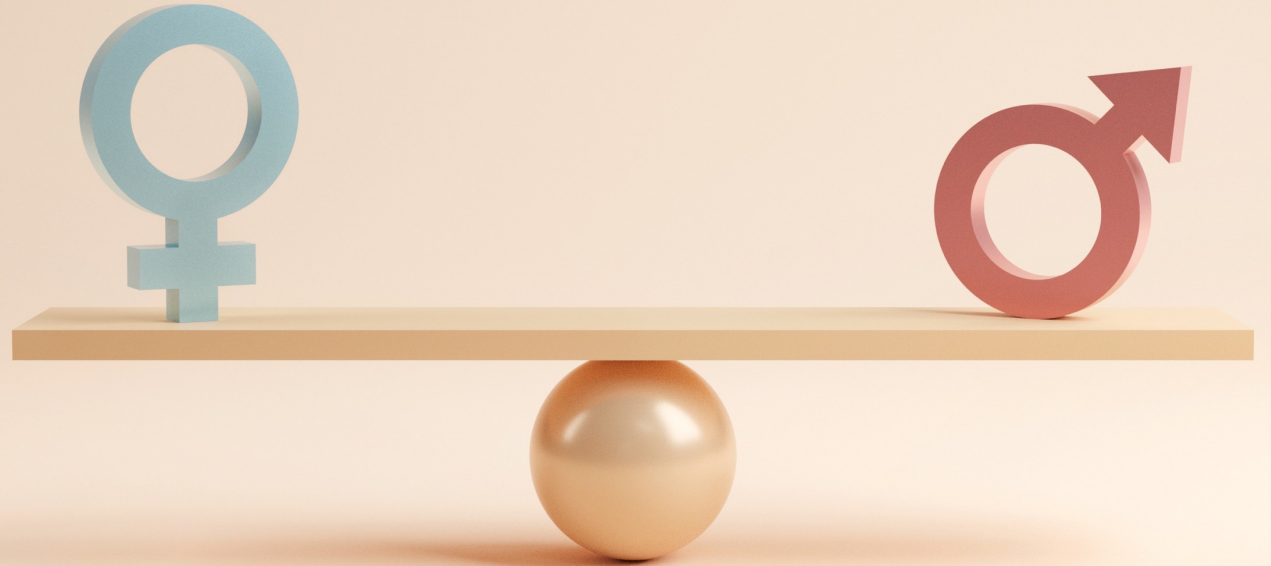
Responding to Transgender Healthcare Needs in Practice

- Educate yourself and colleagues about:
 - LGBTQIA2S+ competent medical care available in your area, or, if none exists, available telehealth services
 - LGBTQIA2S+ competent mental health services
 - LGBTQIA2S+ support groups, affinity groups, and other opportunities for community connection



Policy & Practice: Dress Codes

No additional dress code restrictions shall be placed on transgender clients outside of what is asked of all clients. If a dress code is deemed necessary by the agency, it should be gender neutral. If there are gendered dress codes, transgender clients should comply with the dress code associated with their gender identity; gender nonconforming clients are allowed to choose the dress code with which they feel most comfortable.



Permanent Housing: Referral and Placement Considerations

- Consider higher rent standards (up to reasonable rent) to live in a safer neighborhood
- Consider unreimbursed medical expense deductions in rent calculations
- Extended case management enrollment (as long as allowable) post-subsidy if someone cannot find affirming care elsewhere
- Build a list of affirming landlords
- Ask clients about safety concerns:
 - Do you feel safe in your home? Neighborhood? Where you're getting services? What can we do to help you feel safer?



Where do you believe your program(s) have the most room for improvement?

- More responsive policies
- More responsive employee standards/guidelines
- Increased staff comfort with serving queer and trans folks
- Making our physical spaces more inviting and responsive
- Increased volunteer and contractor comfort with queer and trans folks

Use this resource as you explore and plan for improvements:

<https://www.hudexchange.info/resource/6836/shelter-safety-guide/>

Read more about terminology:

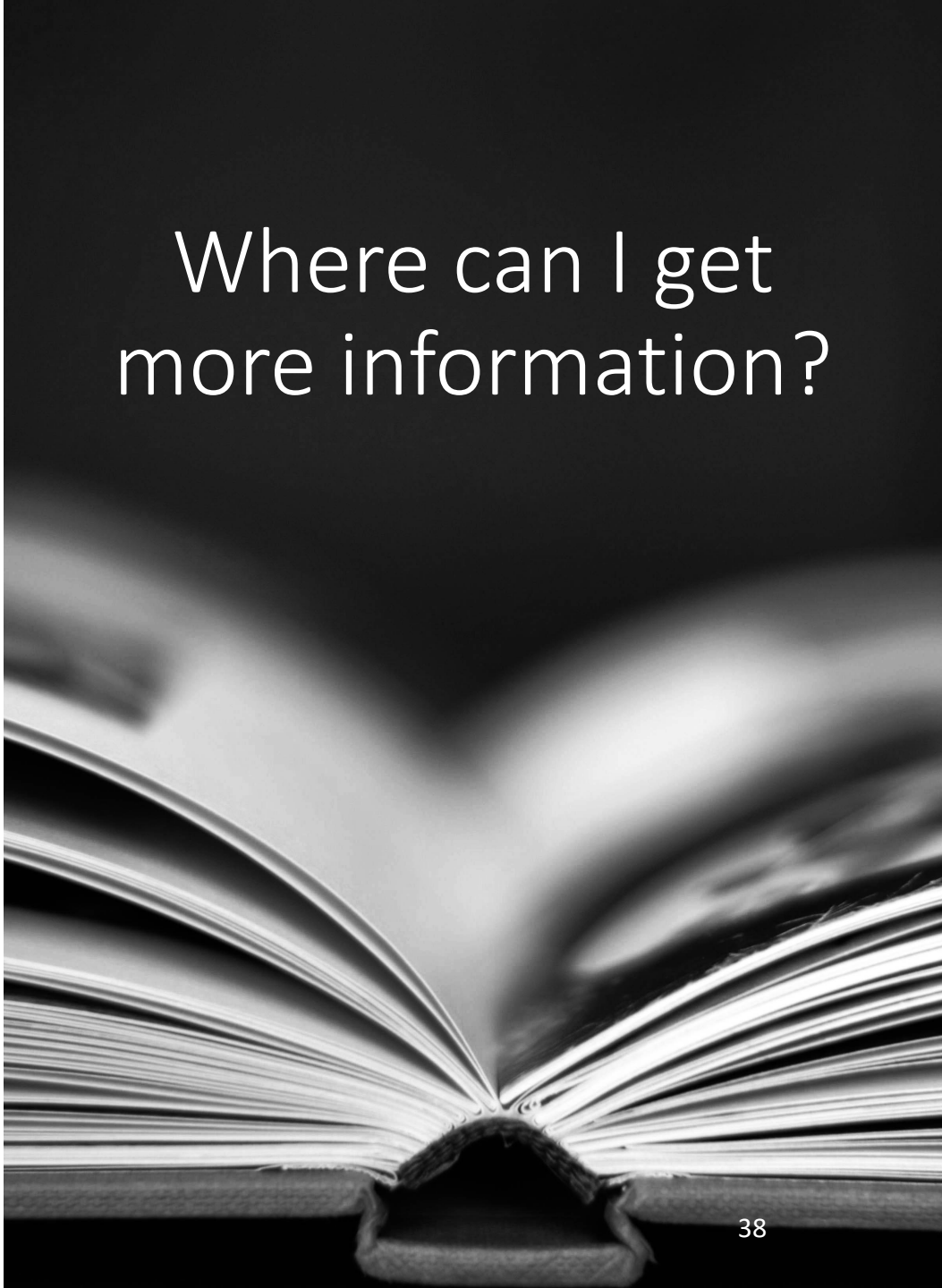
- <https://transequality.org/issues/resources/understanding-transgender-people-the-basics>
- <https://www.apa.org/pi/lgbt/programs/safe-supportive/lgbt/key-terms.pdf>
- Deadnaming:
<https://www.healthline.com/health/transgender/deadnaming#if-you're-the-one-being-deadnamed/>
- Non-binary: <https://www.psycom.net/nonbinary>

Find trainings and other practical materials:

- <https://truecolorsunited.org/out-work/training-education/network/>
- <https://hudexchange.info/resource/4951/equal-access-staff-training-scenarios/>
- <https://www.hudexchange.info/resource/4959/equal-access-for-transgender-people-supporting-inclusive-housing-and-shelters/>
- <https://www.tnlr.org/en/training-education/>

Follow state legislative bills:

- <https://www.erininthemorning.com/>



Where can I get
more information?

How do I maximize support for my clients?

- Find Connecticut-based LGBTQIA+ services at:
- <https://portal.ct.gov/DMHAS/Programs-and-Services/Finding-Services/LGBT-Services>
- <https://ctcommunitycare.org/lgbt-resources>
- Utilize Connecticut's fair housing materials:
https://www.hud.gov/program_offices/fair_housing_equal_opportunity/online-complaint
- Get familiar with CT state laws on name changes, and gender marker changes to drivers' licenses and birth certificates:
- <https://portal.ct.gov/DPH/Vital-Records/Gender-Change>
- <https://www.glad.org/connecticut-birth-certificate-tool-kit/>



Where Can I File a Complaint?

- File complaints at the **federal** level:
https://www.hud.gov/program_offices/fair_housing_equal_opp/online-complaint
- Or Call 1-800-669-9777
- File complaints at the **state** level:
<https://portal.ct.gov/CHRO/Commission/Commission/Contact-Us>
- Or Call 1-800-477-5737 (TDD: 860-541-3400)
- File complaints with **CT BOS Grievance Committee** by emailing ctboscoc@gmail.com or call 917-449-3918



Thank you for participating today!

