Critical Examination of Transgender Mental Health Issues
Dai Guerra
Critical Diversity Studies

U.S. Transgender Population Facts
• Total population: approx. 700,000 (Gates, 2011)
• 10,279 initiated a name change and sex coding (Census, 2010)
• European American: 83.14%
• Hispanic: 10.54%
• African American: 6.66%
• 2+ races: 3.59%
• Some Other Race: 3.17%
• Asian American: 1.91%
• American Indian/Alaskan Native: 1.28%
• Native Hawaiian and Pacific Islanders: 0.26%

Intersectional Ecology Model of LGBTQ Health
• Transgender health - influenced by interactive effects of individual factors, group status and dominant culture.
• Heteronormative society creates stressful environments that adversely affect transgender health.
• Social stigma attached to transgender identity perpetuates the stress cycle.
• Individual factors such as social support potentially buffers against minority stressors.

Risk and Protective Mental Health Factors
• Stigma negatively affects transgender health by increasing stress levels and restricting access to important coping resources.
• Transgender individuals under-report hate crimes and abuse due to fear & discrimination.
• Social support systems are essential for positive health outcomes.

Transgender Mental Health Outcomes
• Transgender individuals face higher lifetime rates of depression (Nemoto et. al., 2011)
• Transgender individuals who experienced physical violence, sexual assault, and rape have higher rates of suicide attempts (Bongar, 2012)
• Individuals who society reads as transgender are more likely to abuse drugs and alcohol (Miller, 2012)
• Transgender women entered into prostitution at younger ages due to financial hardship (McCann, 2015)
• Hate crimes against transgender individuals negatively affect personal invulnerability, self-worth, and cognitions (e.g., viewing world as logical and reasonable) (Hein, 2012)

Recommendations for Improving USF Transgender Student Access to Services
• Transgender students at USF may underutilize campus resources due to lack of awareness of resources, restricted access, and lack of staff trained in transgender student issues.
• Campus outreach efforts can focus on utilizing social media to connect with the transgender population.
• Some campus resources can be improved by introducing gender inclusive housing and the concept of pronouns to incoming and prospective students during campus tours and orientation.
• Existing campus resources can improve by staffing their offices with people who are culturally competent in regards to the transgender students' population.

Future Directions for Research
• Scales that measure stressors unique to transgender individuals need to be developed.
• Intersectionalities between transgender identity and other identity dimensions need further attention in health research.

Intersectional Ecology Model of Sexual Minority Health (M.D. Mink et al., 2014)