

# OFFICE OF POLICY, PROCEDURES AND TRAINING

James K. Whelan Executive Deputy Commissioner

> DHS-PB-2019-015 (Replaces DHS 15-502)

SUBJECT:	APPLICABLE TO:	ISSUED:
Transgender, Non-binary, and Intersex Clients	All DHS Directly Operated or Funded Facilities/Programs Serving Individuals and Families Experiencing Homelessness, and DHS Staff	July 15, 2019

ADMINISTERED BY:	APPROVED BY:
Division of Family Services Division of Adult Services Street Homeless Solutions All DHS funded Facilities and Programs	Joslyn Carter, Administrator Department of Social Services/ Department of Homeless Services

#### **■ INTRODUCTION**

In October 2018, Mayor Bill de Blasio signed a bill (Local Law 954-A) to allow New Yorkers to change their birth certificates to reflect a non-binary option of 'X' as their gender marker. Effective January 1<sup>st</sup>, 2019, New Yorkers no longer need a letter from a physician or an affidavit from a licensed health care provider to change their gender on a NYC birth certificate. With consent of a legal guardian, this option is available to individuals under 18 years of age. DHS clients, even those without a New York City birth certificate, may now choose a non-binary gender designation of 'X,' among other options. DHS does not require any proof of gender and encourages clients to self-identify.

This procedure aims to close service gaps for clients of all gender identities, with a focus on respectfully accommodating clients who identify as transgender, non-binary, and intersex. DHS is committed to a policy of respect for all individuals and families and does not tolerate discrimination on the basis of gender identity or expression. No one will be denied access to a gender-affirming facility or program because of their sex assigned at birth. DHS makes every effort to place clients where they feel safe, and where staff can ensure appropriate, affirming, and culturally competent services.

#### ■ PURPOSE

This procedure provides guidance to all DHS and provider staff to ensure that clients who identify as transgender, non-binary, and intersex are treated with dignity and respect throughout their experience using DHS services.

DHS expects all staff and providers to follow the requirements in this procedure, as well as the DSS LGBTQI policy (<u>DSS-PD-2017-01</u>) to model appropriate behavior at all times. Staff or client discomfort about gender, perceived gender, or sexual orientation must not affect service delivery or the respectful treatment of clients.

#### **■ TERMS**

It is important to remember that transgender, non-binary, and intersex individuals use a wide range of terms to describe themselves. The best practice is to reflect the language that each client uses to refer to themselves.

**Note**: Sexual orientation (i.e., who you are attracted to) is not the same as gender identity or expression (i.e., who you are).

#### Terms to know:

- <u>"X" Gender Designation</u>: most people, including most transgender people, identify as male or female. Others identify differently, such as gender non-conforming and gender non-binary. The "X" designation allows non-binary individuals to indicate that their gender is neither male nor female.
  - Note: 'X' is not an identity.
- Gender identity: a person's internal sense of their gender; someone's sense of being male, female, gender non-binary, or another gender. For transgender and non-binary people, their gender identity is typically different than the sex they were assigned at birth.
- Gender expression: describes the external characteristics and behaviors that are socially defined as either masculine or feminine, such as dress, mannerisms, and speech patterns. A person's gender expression can change day to day.
- Gender binary: the idea that there are only two genders (male/female), and that every person is one of the two.
- Gender non-conforming: a person who is, or is perceived to have, gender characteristics that do not conform to traditional or societal expectations.
- Gender transition: when someone decides to bring their external gender expression in line with how they see themselves. This can involve legal changes, social changes, and medical changes. Some transgender individuals may begin or continue a medical process of hormone replacement therapy and/or gender confirmation surgery.

- Intersex: an umbrella term that refers to a range of situations in which a person has biological traits that are not typical for either male or female sex categorization (e.g., variations in external genitalia, XXY chromosomes).
- Non-binary or Gender non-binary: "non-binary" is an umbrella term used by some who identify outside of the gender binary of male/female or masculine/feminine.
- Sex or "biological sex": refers to biological and physiological characteristics associated with a particular gender such as organs, hormones, or chromosomes.
  - Note: On some forms and documents, "sex" and "gender" are used interchangeably, although they are not the same.
- Assigned sex: or "birth sex" is the determination of a baby's sex at birth. In most births, someone inspects the genitalia when the baby is delivered, and the sex is assigned as either male or female based on the external appearance of genitalia.
- <u>TGNC</u>: an acronym used to reference people whose identities fall under the "transgender and gender non-conforming" umbrella.
- <u>Transgender</u>: an umbrella term used to describe individuals whose sense of being male, female, or another gender (gender identity) and/or outward appearance of gender (gender expression) is different from what is typically associated with their assigned birth sex.
  - Note: The term "transgender" is preferred over "transsexual."
- Queer: an umbrella term that often refers to identities that are outside social norms when it comes to gender identity and/or sexual orientation. It can also be used to refer to people who are attracted to all or many gender expressions, similar to "pansexual."
  - Note: "Queer" is a reclaimed term with a formerly derogatory connotation and should not be used unless a person identifies that way.
- Gender affirming: A person, situation, or arrangement is gender affirming if it is inclusive and supportive to all gender identities or expressions. This practice centers an individual's own sense of their gender rather than preconceived or societal ideas about what is appropriate based on the person's assigned sex, anatomy, or legal documentation.
- Preferred Name: a name that may differ from a person's legal name but is used regularly. Similar terms include "name in use," "name you go by," and "chosen name."

While "preferred name" is useful for case work purposes and for recording information in CARES, individuals may not use or be familiar with the term. It is better to ask "How would you like me to refer to you?" See **ATTACHMENT A**.

For additional terms, please see the DSS LGBTQI Policy (<u>DSS-PD-2017-001</u>).

<u>Terms to avoid</u>: these terms have either complicated or derogatory meanings and you should not use them:

- Cross Dresser
- Drag Queen
- Hermaphrodite
- Tranny/She-male/She-he
- Transvestite
- Travesti (Spanish)
- Maricón (Spanish)
- Pájaro (Spanish)

**Note**: There are other terms used to address transgender, non-binary, and/or intersex people in a derogatory way. Don't use them.

#### **■** PROCEDURE

#### I. Client Interaction (See ATTACHMENT A)

#### A. Name, Gender Pronouns, Title

DHS respects a client's right to use a name other than their legal name. In order to comply with state and federal requirements, it is important to record a client's legal name at intake and in the case record.

Whenever interacting with a client for the first time, ask, "How would you like me to address you by name and gender pronoun?" and address them accordingly. Refer to the Script for Interacting with Clients for guidance (Attachment A).

When recording name at intake, request and record the client's preferred name, legal name, gender pronouns, and title.

- 1. <u>Preferred Name</u>: how a person refers to themselves; the name a person goes by.
  - a. Note: not all people who identify as TGNC and intersex use a name other than their legal name. Anyone, regardless of identity, may use a name other than their legal name.
  - b. For guidance about names and preferred names, please see **Appendix 3** of the DSS LGBTQI Policy (DSS PD-2017-01).
- 2. <u>Legal Name</u>: the name listed on a client's official government-issued documents.
- 3. <u>Gender Pronouns</u>: the pronouns a person chooses to use for themselves and that others use to refer to them in sentences and in conversation (e.g., she/he/they/ze).

- a. Never guess a person's gender identity. If you are unsure or if you are referring to them before interacting with them directly, you can use "they/them" pronouns.
- b. For more information about gender pronouns, see the DSS Gender Pronoun Guide (**DSS-6A**).
- 4. Title: e.g., Mr./Ms./Mx.<sup>1</sup>

Always refer to individuals by the name they use for themselves, as well as by their preferred title and gender pronouns, whether addressing them directly or referring to them in conversation. If you make a mistake, apologize and correct yourself. If staff know an individual's title, pronouns, and the name they go by, disregarding or refusing to address the person using this information is a form of harassment and unlawful discrimination.

# B. Confidentiality and 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.<sup>2</sup>

Answering "yes" to the questions below is a good guideline for determining if you need to discuss an individual's transgender status, non-binary status, intersex status, and/or medical history. Staff must inform clients that disclosing this information is voluntary and will not affect eligibility for shelter. These rules also provide guidance for interacting with other staff members.

When to Ask	When to Tell
Is the question necessary in order to perform your job function?	<ul> <li>Will sharing the information help you perform your job?</li> <li>Have you explained to the individual that you need to share this information?</li> </ul>

**Note**: The same rules apply when clients share their sexual orientation.

<sup>2</sup> Demographics such as name and gender are visible to all CARES users.

<sup>&</sup>lt;sup>1</sup> Mx (pronounced like "mix") is a gender neutral title.

#### II. CARES, StreetSmart, and HOME

# A. <u>Presenting Gender Marker Options and Asking for Preferred Name and Gender</u> Pronouns

Staff at intake must never give a gender designation, add gender pronouns, or enter a preferred name non-consensually. Staff must share all gender marker (or gender designation) options with all clients and have them select the marker that works best for them.

DHS added an "X (not male or female)" option in CARES, StreetSmart, and HOME. The X is an English language capital letter character "X."

Amongst others, below are some of the options in CARES. Please refer to CARES for a complete list:

- "Female"
- "Male"
- "X (not male or female)"
- "Refused"

#### Explanation:

- Clients may designate or choose the gender marker that works best for them.
- Staff must accept a person's gender marker choice regardless if it matches the gender marker on their birth certificate or other identity documents.
- Clients are not required to provide proof of gender.
- Staff must always record preferred name, gender pronouns, and title.
- No one should be given a "transgender female to male," "transgender male to female," or "X" designation without consent.
- Families with children shelters must follow the usual procedure for adding an infant to the family composition. Staff must allow for legal guardians to designate an infant as "X" even if the birth certificate has a different marker. The "X" option should be discussed with all Heads of Case (HOC) adding an infant to the family case.
- For families with children, the HOC reports the gender designation for each family member under the age of 18; individuals 18 years old or older report their gender designation directly to a PATH-Family Intake staff during a separate interview. At Adult Family Intake Center, each client reports their gender designation.

**Note:** The gender marker options may change in the future. Make sure the client is aware of all available options listed in CARES and StreetSmart. Responses should be treated with confidentiality, but staff should tell clients that their case information will be available to staff accessing CARES.

#### B. Existing Clients and Re-Applicants

To change client information on the CARES Home Page, search for the client in CARES and navigate to the homepage. Identify missing or incorrect data and click the edit link.

# 1. Changing Preferred Name, Gender Marker, and Gender Pronouns

Clients may request to change their gender marker, gender pronouns, and preferred name at any time. Clients are not required to present external documentation when requesting a change. Staff must make changes immediately upon request.

Within the divisions of Adult Services and Family Services, case managers, program analysts, program administrators, and other shelter staff with permission to edit can make requested changes in CARES. When these changes are made, staff give clients an Action Taken on Request to Change Gender and/or Add Preferred Name and/or Gender Pronoun in CARES form (see ATTACHMENT B). The form informs the client that the Agency made the changes they requested. A copy of the form should be filed as a record in the client's case file.

Provider staff with the Division of Street Homeless Solutions must inform their program analyst if a client requests to change their gender marker and/or add their preferred name and gender pronoun. Program analysts can make the change.

#### 2. Changing Name, Social Security Number, Date of Birth, or Pregnancy Status

In addition to those fields mentioned above, clients may request to update the following: race, ethnic origin, veteran status, preferred language, social security number, date of birth, or pregnancy status.<sup>3</sup>

To change one's legal name in CARES and on DHS documents, clients must submit proof of legal name change, such as a name change order issued by a court, or State or Federal agency, or a new government-issued identification.

Adult Services' provider staff must continue to follow the steps above and submit a CARES Client Demographic Change Request Form to the DHS Program Maintenance Unit (at <a href="mailto:CARESMAINTENANCE@dhs.nyc.gov">CARESMAINTENANCE@dhs.nyc.gov</a>) for changes to legal name, date of birth, and social security number. DHS staff make the change upon receipt of the form.

<sup>&</sup>lt;sup>3</sup> Pregnant clients not already in a families with children shelter must be referred to PATH at: 151 E 151<sup>st</sup> Street, Bronx, NY 10461.

#### III. Shelter Intake and Assessment

Clients report their own gender, and staff must document self-reported gender in CARES. A client's gender need not match the gender marker on their identifying documentation. Staff must not ask clients to prove their gender with documentation, physical characteristics, or particular gender expression. For example, staff should not ask a client to dress 'more feminine' because they identify as female or are placed in a women's shelter.

Clients may present at any intake center. To the extent that DHS intake and assessment shelters ("intake/assessment shelters") are separated by gender, staff will assign the client to an appropriate site based on the client's choice. When making the assignment, staff will also prioritize and document any statements from clients about safety concerns in being assigned to a particular intake/assessment shelter.

#### IV. Street Homeless Solutions

Street Homeless Solutions (SHS) helps unsheltered New Yorkers on the streets and in the subway system access temporary shelter and permanent housing. To accomplish this, DHS contracts with non-profit providers to operate street outreach teams, drop-in centers, and safe havens. Drop-in centers and safe havens are low threshold service and shelter options. SHS provides an array of services that support moving unsheltered people inside while addressing mental health, substance use and other issues. Additionally, SHS directly employs DHS workers to proactively canvass targeted areas in NYC and to work jointly with other New York City agencies to further reach street homeless New Yorkers.

Due to the nature of their work, SHS staff and outreach workers interact with clients differently than in other contexts. With the priority of removing the person from street homelessness, interactions may differ depending on the individual.

# A. Safe Havens and Drop-in Centers

Drop-in centers accept clients of all genders. However, within a facility, chairs may be separated by gender ("male" and "female"). Clients may choose to sit in the section in which they feel most comfortable. Clients may choose to switch sections at any time. There is no limit to the number of times that a client may switch between sections. If there is a safety concern, staff will discuss it with the client in order to allow them to make an informed choice.

Most safe havens are gender-specific. Clients may choose the area which best fits their gender identity. Clients who choose to switch safe haven sites will be accommodated based on staff discretion.

#### B. HOME-STAT Canvassers and Outreach Teams

HOME-STAT canvassers and outreach teams record gender based on observation. Staff must use their best judgment in selecting gender designations based on observation. It's important to recognize that it is not possible to definitively determine an individual's gender identity without asking them.

Outreach staff enter observed information about the client into StreetSmart before the client comes onto caseload. When outreach staff first interact with a person experiencing street homelessness, they treat that person as a prospective client. Where possible, outreach staff should note gender expression (e.g., masculine, feminine, androgynous) rather than perceived gender.

At the first appropriate opportunity, outreach staff must ask for preferred name, gender pronouns, and title in order to respectfully address the client. As soon as the client comes onto caseload, staff must review all previously recorded client information—including gender designation—with the client, allowing the client to change their demographic information (e.g., gender).

It is possible that a client may not disclose gender identity to the outreach team before completing intake paperwork (coming on caseload). In those instances, staff must inquire about preferred name, title, and gender pronouns. Note that a client might not disclose gender identity initially, but may do so at any point. Outreach staff will continue to work with the client even if they do not share certain demographic information (e.g., gender).

#### V. Forms

All forms include the client's legal name as recorded in CARES and StreetSmart. Where applicable, forms also record a client's preferred name, if it differs from their legal name. CARES rosters and bed sign-in sheets will display a client's preferred name, case number, and bed number. Client signatures, using legal or preferred name, confirm acknowledgement and acceptance.

To change a client's legal name in CARES and on DHS documents, clients must submit proof of legal name change, such as a name change order issued by a court, or State or Federal agency, or a new government-issued identification.

# VI. Placement

Adult families and families with children shelters are not separated by gender. Single adult clients choose placement in a shelter type (men's or women's) that feels safest for them based on their gender identity.

Marsha's House is a shelter for LGBTQI identified adults. Placement in Marsha's House depends on availability and other eligibility criteria, and is not guaranteed to clients. Staff must not assume that all transgender, non-binary, or intersex clients want to be placed in Marsha's House. Marsha's House works with transgender, non-binary, or intersex clients to find appropriate sleeping arrangements and other services. The option should be discussed with clients.

DHS cannot guarantee any client placement in a particular site. When requested, and when possible, staff must work with clients who identify as TGNC and intersex to find shelters, safe havens, and drop-in centers with resources that fit their needs and preferences

Intake staff record client requests in CARES case notes, and should always flag the comments. HERO placement specialists use the information recorded in the case note to make appropriate placements. Staff may use the Building Compliance System (BCS) to identify facilities with gender-affirming features.

These include, but are not limited to, the following:

- For all facilities:
  - borough preferences and geographic preclusions
  - facility type/location
  - on-site social services
  - facility capacity
- For single adults:
  - single occupancy bathrooms
  - smaller ratio of bathroom to client
  - smaller ratio of dorm to client

If a client requests a move from one facility type to another (e.g., from a single men's facility to a single women's facility), Adult Services' provider staff must submit a CARES Client Demographic Change Request Form to the DHS Program Maintenance Unit (at CARESMAINTENANCE@dhs.nyc.gov).

Reasonable accommodation moves must follow the Agency's Reasonable Accommodation procedure (DHS-PB-15-211).

#### **VII. Facility Logistics**

Client requests related to privacy and safety must be taken seriously and met when possible. When requests cannot be met, staff must record them in CARES and the client's case record. Staff must inform clients that while not all requests can be accommodated, they are dedicated to working with them to facilitate a dignified and safe environment.

#### A. Restrooms, Bathrooms, and Showers

Restrooms, bathrooms, and showers must be available to all residents of a shelter, safe haven, or drop-in center. In New York City, it is unlawful discrimination to require an individual to use a restroom or other gender-separated facility that does not match that person's gender identity or expression. It is Agency policy that all individuals have the right to access single sex facilities consistent with their gender identity and gender expression.

All single occupancy restrooms must be made available to people of all genders. When an individual does not feel comfortable or safe using single-sex facilities and there are no single-stall facilities available, staff must consider whether an alternative arrangement may be appropriate. For example, arrangements can be made for an individual to use the bathroom alone at a designated time. It is unacceptable to force clients to use single occupancy facilities because they are transgender, non-binary, or intersex.

#### B. Sleeping Arrangements

Agency and shelter, safe haven, and drop-in center staff must consider the needs of TGNC and intersex clients and, where possible, grant requests for specific arrangements based on location, proximity to staff, and proximity to a single occupancy bathroom (depending on the facility). TGNC and intersex clients must have a say in where they are placed.<sup>4</sup>

#### C. Dress Code

New York City Law makes clear that clients should never be required to adhere to any gender-specific dress or grooming standards. Clients are expected to follow code of conduct protocols for nudity.

# VIII. Complaints and Transfers

# A. Reporting and Documenting Incidents<sup>5</sup>

If a client experiences harassment, threats, discrimination, sexual assault, or a physical attack from another client on the basis of gender identity or expression, staff must follow the procedure for categorizing and reporting the incident as a Priority 1, 2, or 3, as outlined in <a href="DHS-PB-2018-004">DHS-PB-2018-004</a>. Domestic violence incidents may occur between intimate partners of any gender identity.

<sup>&</sup>lt;sup>4</sup> For more detail, refer to DHS-PB-15-211: Reasonable Accommodation Procedure for Clients with Disabilities.

<sup>&</sup>lt;sup>5</sup> For more detail, refer to <u>DHS-PB-2018-004</u>: Process for Reporting Incidents Occurring in Shelter.

The responsible provider staff records an incident report in CARES. Case management staff must document all engagement with the client after the incident to understand what happened and determine if follow-up services and/or supports are needed. Supervision must ensure staff members documenting these incidents and follow up.<sup>6</sup> Staff must document the client's verbatim description of the incident without assuming that the incident was discrimination-based unless the client says so. Documentation must consistently use a client's pronouns and preferred name.

If a client asks for help with filing a complaint, staff must explain that the client should contact the DHS Ombudsman's Office or DSS Office of LGBTQI Affairs. Clients may also file a complaint on site with the site director and/or case manager, and the staff member must immediately notify the DSS Ombudsman's Office or DSS Office of LGBTQI Affairs. The client may also submit a Client Grievance form, as outlined in <a href="DHS-PB-11-210">DHS-PB-11-210</a>.

- 1. **The DHS Ombudsman's Office** is an independent and impartial unit that is charged with resolving constituent issues and concerns.
  - a. Phone: 718-291-4141
  - b. Calls are answered Monday through Friday between the hours of 9 a.m. and 5 p.m.
  - c. Constituents may also submit a Constituent Grievance Form in writing to their site director or case worker.
- 2. The DSS Office of LGBTQI Affairs works to increase awareness and visibility of LGBTQI issues across the organization and tracks client complaints to assist with resolving concerns or complaints related to accessing DHS programs. Email: <a href="mailto:lgbtqi@dss.nyc.gov">lgbtqi@dss.nyc.gov</a>.
- 3. The DSS Office of Disability Affairs serves as a resource on disability issues across the Agency and works closely with program staff, advocacy groups and community-based organizations, and applicants/clients to address issues related to discrimination, complaints, access, and policies and services. Email: DisabilityAffairs@dss.nyc.gov.

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<sup>&</sup>lt;sup>6</sup> Refer to DHS-PB-11-003: Responding to Domestic Violence Incidents in Shelter.

#### B. Transfers

The HERO Transfer Unit manages transfers for all clients within the DHS system<sup>7</sup>, other than safe havens. There is no limit to the number of transfers a client may request; however, if staff notice a client is switching sites frequently, the program administrator and/or DHS designee must meet with the client to discuss the need to commit to a specific site for continuous service provision. When discussing transfers with a client, emphasize that committing to a facility is not committing to a binary gender identity. For additional support, the program administrator may contact the DSS Office of LGBTQI Affairs.

In DHS facilities other than safe havens, if a client requests a transfer, staff discuss the transfer with their program administrator, then enter the transfer request in CARES for approval. If approved, the client will receive notice at least 48 hours before the transfer, except in the event of an emergency transfer. Transfer is not always possible, but every case will be reviewed.

Refer to Agency procedures for specific transfer details for single adult shelters (<u>DHS-PB-03-402</u>), adult families, and families with children shelters (<u>DHS-PB-03-504</u>), and safe havens (DHS-PB-18-402).

## C. Access to Gender Affirming Facilities and Amenities<sup>8</sup>

Access to a gender-affirming facility is required by law and should be provided upon request. Clients are not required to formally request a "reasonable accommodation" when requesting gender-affirming amenities (e.g., proximity to a single occupancy bathroom). Staff approve requests based on the facility's layout and availability of amenities. When requests cannot be granted, staff must document the client's request in CARES/StreetSmart and the case record. However, some clients may bring in paperwork listing an accommodation for gender dysphoria. This documentation, and accompanying requests, must be accepted.

Please note that accommodating a client's request to access gender-affirming facilities and amenities is distinct from a reasonable accommodation based on a client's disability. A reasonable accommodation may be provided to any client with a disability in order to provide meaningful access to DHS facilities and programs. A reasonable accommodation may be provided as the result of the client's request or because DHS and/or provider staff observe that a person needs an accommodation.

<sup>&</sup>lt;sup>7</sup> For more detail, please refer to <u>DHS-PB-2018-15</u>: Housing Emergency Referral Operations (HERO) Procedure.

<sup>&</sup>lt;sup>8</sup> For more detail, please refer to <u>DHS-PB-15-211</u> Reasonable Accommodation Procedure for Clients with Disabilities.

<sup>&</sup>lt;sup>9</sup> Under NYC Human Rights Law, "disability" means any physical, medical, mental or psychological impairment, or a history or record of such impairment.

Please refer to the DHS Reasonable Accommodation Procedure for Clients with Disabilities (DHS 15-211) for more information about the reasonable accommodations process. Clients who feel they have been denied services, or discriminated against due to their disability, should contact the Office of Disability Affairs at <a href="mailto:disabilityaffairs@hra.nyc.gov">disabilityaffairs@hra.nyc.gov</a>. They can also contact the Office of the Ombudsman at 718-291-4141.

#### IX. Health and Medication

#### A. Self-Administration of Medication

All medications must be labeled with a client's legal name as it is recorded in CARES and/or StreetSmart. However, clients can label medication with their preferred 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 medication such as estrogen, progestin and testosterone. Clients have the right to keep their oral medication on them. If a shelter, safe haven, or drop-in center typically encourages medication to be stored in a 24/7 administrative office, this is voluntary for a client. 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, but 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 hormone medication requires refrigeration, staff must store it in the office in a designated refrigerator for medications. This requirement does not apply in families with children or adult families shelters that have an in-unit refrigerator set between 35°F and 46°F (2°C and 8°C).

#### B. Pregnancy and Reproductive Health

Staff must 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.

#### C. Gender-affirming Prosthetics

Gender-affirming prosthetics are not considered contraband, therefore clients are permitted to possess gender-affirming prosthetics in all shelters. Refer to the Control and Confiscation of Contraband procedure (<u>DHS 16-400</u>) for further information.

#### X. Providing Clients with Additional Resources

DHS staff must be aware of Agency and community resources available for all LGBTQI identities and share them with clients.

A. Name and Legal Document Changes:

National Center for Transgender Equality: ID Documents Center

- B. Community Resources:
  - Sylvia Rivera Law Project
  - Make the Road New York, LGBTQ Justice Project
  - New York Legal Assistance Group (NYLAG), LGBTQ Law Project
  - City Bar Justice Center, LGBT Advocacy Project
  - Transgender Legal Defense & Education Fund
  - Legal Services NYC, LGBT Unit
  - New York Anti-Violence Project (AVP)

This procedure supersedes Procedure DHS 15-502 (11/17/15): Transgender and Intersex Clients.

#### Effective Immediately

#### ■ ATTACHMENTS:

**Attachment A** Script for Interacting with Clients

DHS-45 (E) Action Taken on Request to Change Gender and/or Add

Preferred Name and/or Gender Pronoun in CARES

**DSS-6A (E)** Gender Pronouns - How to Take Important Steps in

Becoming a TGNC Ally!

#### ■ REFERENCES:

DSS-PB-2017-01: Facility Bathroom Signage Non-Discrimination Requirements

DSS-PD-2017-001: DSS LGBTQI Policy

DHS 11-210: Client Grievance Procedure

DHS-12: LGBTQI Ten Things to Know Document

DHS 15-211: Reasonable Accommodation Procedure for Clients with Disabilities

DHS 16-400: Control and Confiscation of Contraband Procedure

DHS-PB-03-402: Client Transfer Process

DHS-PB-03-504: Involuntary Transfers

DHS-PB-18-402: Safe Haven Transfer Procedure

DHS-PB-2018-004: Process for Reporting Incidents Occurring in Shelters

DHS-PB-11-003: Responding to Domestic Violence Incidents in Shelter

DHS-PB-2018-15: Housing Emergency Referral Operations (HERO) Procedure.

#### ATTACHMENT A: SCRIPT FOR INTERACTING WITH CLIENTS

<u>PURPOSE</u>: The purpose of this document is to guide staff through their first interactions with clients when collecting information such as name, gender pronouns, and gender marker. The italicized text represents what staff might say to clients in this scenario. Staff do not have to follow this script word for word. Rather, it provides a model of best practices for being respectful and affirming of all clients, particularly those who identify as transgender, non-binary, and intersex.

**NOTE:** Never guess a person's gender identity. If you are referring to them before interacting with them directly, use "they/them pronouns."

- Example [When talking to a coworker]: A client just came in the door. **They** are waiting at the window.
- When calling a client to an intake window, use their last name.

#### I. Name and Gender Pronouns

- 1. **Introduce yourself:** Hello, it's nice to meet you. My name is [name] and I use [pronouns, e.g., she/her] pronouns.
  - Best practice: Practice the share and invite model by introducing yourself to the client with your name and gender pronouns.
- 2. Name: How would you like me to address you?
  - Note: Staff must always refer to clients by their preferred name, except when a legal name is required. For example, legal name must be included when entering client information into CARES/StreetSmart or another database during intake and assessment, but preferred name should still be used to address the person and refer to them in conversation.
  - Legal name: What is your legal name, if different than the name you just gave?
    - <u>Note</u>: CARES/StreetSmart has two name fields: 'legal name' and 'preferred name.' Wait until you've asked the client these two questions before entering their name.
      - i. If the client's preferred name (or "name in use") is different than their legal name, fill in the fields accordingly.
      - ii. If the client's legal name is the name they use, leave the preferred name field blank.
- 3. Gender Pronouns: Which pronouns do you use?
  - Note: If the client is not familiar with the concept of pronouns, you may ask the following question: If I were speaking about you to someone else, should I say 'his name, her name, their name, or something else?

#### ATTACHMENT A: SCRIPT FOR INTERACTING WITH CLIENTS

- <u>II. Presenting Gender Marker Options:</u> When determining which gender should be entered into a tracking system such as CARES, Streetsmart, or others, please use the following protocol:
  - 1. **Privacy:** The Agency respects your privacy. This information is visible to any member of staff accessing CARES, but will not be discussed or shared with staff or clients, unless staff must do so to ensure safe and respectful service delivery.
    - Single Adults: The information given will also be used to guide staff in discussing shelter placement options.
  - 2. **Present gender options:** I will now present gender options listed in our system of record for you to choose from. Please select the option that best describes you. Your selection does not have to match your official identity documents.
    - Families with Children and Adult Families: Please note that your gender marker will be visible to your Head of Case.
    - Below are some of the options in CARES (and StreetSmart). Please refer to CARES (or StreetSmart) for a complete list:<sup>1</sup>
      - "Female"
      - "Male"
      - "X (not male or female)"
      - "Refused"
    - Note: The gender marker options may change in the future. Make sure the client is aware of all available options. Do not assign a gender marker without the client's consent. No one should be given 'transgender female to male' or 'transgender male to female' without consent.
    - Explanations: The following explanations may be offered for 'transgender female to male,' 'transgender male to female,' and 'X (not male or female).'
      - Transgender female to male: This option allows you to indicate that you identify as a transgender male. Please note that you do not have to select this option if you identify as male and transgender. This option may be useful if you have legal documents that don't match your gender identity.
      - Transgender male to female: This option allows you to indicate that you identify as a transgender female. Please note that you do not have to select this option if you identify as female and transgender. This option may be useful if you have legal documents that don't match your gender identity

<sup>&</sup>lt;sup>1</sup> Gender options must be self-reported. Do not assume and enter on a client's behalf without their knowledge.

# ATTACHMENT A: SCRIPT FOR INTERACTING WITH CLIENTS

■ X (not male or female): This option allows you to indicate that you do not identify as either a male or female. For example, you may wish to select this option if you identify as non-binary or intersex.

# III. Review the information

Thank you for sharing your information. I will now read through your responses. Please let me know if you would like me to make any changes.



# Action Taken on Request to Change Gender, and/or Add Preferred Name, and/or Gender Pronoun in CARES, and/or Move from a Gender-based Facility

Section I – Current Case Information (completed by client or staff) Client Name: CARES ID: Date of Request: Facility Name: Facility Address: Phone Number: **Email Address:** Section II – Acknowledgment and Action Taken Note to Client: The information entered and the box(es) checked below indicate the action taken in response to the request you made to correct the demographic information that we maintain on file for you, and/or to move facility types due to a gender-based request. ☐ CARES updated, oreferred name added as (only add one); ☐ CARES updated, gender pronoun added as (only select one): ze/zir/zirs (neutral pronouns) ☐ he/him/his (masculine pronouns) ze/hir/hirs (neutral pronouns) ☐ she/her/hers (feminine pronouns) ☐ Other: ☐ they/them/theirs (neutral/pronouns) ☐ CARES updated, gender marker now reads as (only select one): □ Male ☐ X (Not Male or Female) ☐ Don't Know ☐ Female ☐ Transgender Male to Female ☐ Other: \_\_ ☐ Transgender Female to Male ☐ Refused **ADULT SERVICES FACILITIES ONLY** For requests to switch facility types based on gender identity: ☐ Shelter move request submitted/documented: ☐ Move from male/female shelter (circle one) to a male/female shelter (circle one) Staff Name: Staff Signature: Staff Title/Office Name: Date:





#### **GENDER PRONOUNS**

How to Take Important Steps in Becoming a TGNC Ally! (TGNC = Transgender and Gender Non-Conforming)

#### What is a Pronoun?

A pronoun is a word that refers to either the people talking (like *I* or *you*) or someone or something that is being talked about (like *she*, *I*, *them*, and *this*). Gender pronouns (like *he* and *hers* and *them*) specifically refer to people that you are talking about.

#### What is a "Gender Pronoun"?

A "gender pronoun" is the pronoun that a person chooses to use for themselves. Gender Pronouns are the pronouns that we use to refer to people in sentences and conversation.

#### What are some examples of Gender Pronouns?

Gender pronouns can look like and are not limited to:

- he/him/his (masculine pronouns)
  she/her/hers (feminine pronouns)
  they/them/theirs (neutral pronouns)
  ze/zir/zirs (neutral pronouns)
  ze/hir/hirs (neutral pronouns)
- Here are examples of Gender Pronouns in use:
  - She, Her, Hers
    If Chris's gender pronouns are she, her, and hers, you could say "Chris ate her food because she was hungry."
  - They, them, theirs (Chris ate their food because they were hungry.)
    This is a pretty common gender-neutral pronoun.... And yes, it can in fact be used in the singular. You can use this pronoun as a neutral identifier if you are unsure what pronoun someone uses.
  - Ze, hir (Chris ate hir food because ze were hungry.)
     Ze is pronounced like "zee" can also be spelled zie or xe, and replaces she/he/they.
     Hir is pronounced like "here" and replaces her/hers/him/his/they/theirs.
  - Just my name please! (Chris ate Chris's food because Chris was hungry)
    Some people do not to use pronouns at all, using their name as a pronoun instead.

# Why is it important to respect people's Gender Pronouns?

You can't always know what someone's gender pronoun is by looking at them.

- Asking and correctly using someone's pronoun is one of the most basic ways to show your respect for their gender identity.
- When someone is referred to with the wrong pronoun, it can make them feel disrespected, invalidated, dismissed, alienated, or dysphoric (or, often, all of the above.)
- While many people use the wrong pronoun by mistake, sometimes people use the wrong pronoun intentionally to hurt or disrespect TGNC people. Repeatedly being misgendered can be a source of great distress.

It is important to use the correct pronouns when referring to someone because it honors their gender identity and is a sign of mutual respect between the involved parties. It is also important to use the correct pronouns for the safety of the person involved. Using incorrect pronouns can potentially put the person in an unsafe situation by "outing" them. Outing someone is when you do something to expose someone's identity without their consent.

#### How do you ask someone about their Pronouns?

Try asking: "What are your gender pronouns?" or "Which pronouns do you use?" or "Can you remind me which pronouns you use for yourself?" It can feel awkward at first, but it is not half as awkward as getting it wrong or making a hurtful assumption.

Asking people about their gender proncups has become common place in LGBTQI and safespace communities. Outside of those communities, asking someone about their gender pronouns is greatly appreciated instead of making assumptions about someone's gender pronouns.

Examples of how you can ask someone about their gender pronouns are.

- "What gender pronouns should I use to refer to you?"
- "What are your gender pronouns?"
- "I don't want to make any assumptions, so what gender pronouns do you use?"
- "How should I refer to you in conversations?"

# What do I do if I called someone by the wrong Pronoun?

People make mistakes and it can be a bit difficult to adjust to using someone's correct gender pronouns. If you accidentally misgender someone (calling them by the wrong gender pronouns/gender) just say sorry and continue the conversation using the correct pronoun. This can look like:

"Chris is going on Tour. She - sorry, they said they are really excited for this year's lineup."

In social situations, it is best to simply say "sorry" and continue the conversation using the correct pronouns. Many people find it uncomfortable when people give a long apology for misgendering them and it could also potentially out them.

# What do I do if I called someone by the wrong Pronoun? (continued)

When in doubt, it is best to use neutral pronouns like they/them/theirs. The person can correct you or you can ask them for their gender pronouns. That way, you decrease the risk of outing them or exposing them to an unsafe situation.

#### What if I want to change my Gender Pronouns?

Gender pronouns are not set in stone. As people step into whom they are, their pronouns can change, and that's perfectly okay. You have the right to change your gender pronouns to match who you are and your gender identity.

# Why is it really important to respect someone's Gender Pronouns as a Provider, Vendor, or Agency Staff?

As a provider, you are often in a position of power.

- Asking your participants what their gender pronouns are and consistently using them correctly can determine within the first few minutes if they will feel respected at your establishment or not.
- You will be setting an example: If you are consistent about using someone's gender pronouns, others will follow your example.
- Many participants will be learning about gender pronouns for the first time, so this will also be a learning opportunity for them that they will keep forever.

# What is Pronoun Privilege?

If your gender pronoun is something that never matters to you or that you rarely think about, then you may have pronoun privilege. It is a privilege to not have to worry about which pronoun someone is going to use for you based on how they perceive your gencer.

# How do you ask someone about their Pronouns in activities or at events?

If you are asking as part of an introduction exercise and you want to quickly explain what a gender pronoun is, you can try something like this: "Tell us your name, where you come from, and your gender pronoun. That means the pronoun you like to be referred to with. For example, I'm Chris, I'm from New York, and I like to be referred to with she, her, and hers pronouns. So you could say, 'she went to her car' if you were talking about me."

Discussing and correctly using Gender Pronouns sets a tone of respect and allyship with transgender and gender non-conforming people and the LGBTQI community members overall.