

How to receive a gender dysphoria diagnosis

If you identify as transgender and/or are seeking treatment or accommodations for gender dysphoria, you will have to self-identify to the Department of Correction. This can happen during the medical screening process at booking or at any point during incarceration.

Next, the lead Mental Health Professional will meet with you to conduct an assessment, which will include requesting a release of information (ROI) (Form 807.06A), so DOC can obtain relevant mental and medical records from community providers, if they exist. You are not required to have received treatment in the community before incarceration for DOC to provide gender-affirming care.

A health care provider will evaluate you for medical conditions that could affect treatment for gender dysphoria, such as congenital medical problems, disorders of sex development, cardiovascular disease risk, smoking history, hypercoagulable states, active liver disease, or disease secondary to substance misuse.

A mental health clinician (MHC) will review the case with a treatment team. If the treatment team provides a provisional diagnosis of gender dysphoria, the MHC will make a referral to the institution's psychiatrist or designee for confirmation of the diagnosis.

If you are convicted or accused of a sex crime, the department will refer you to a sex offender treatment provider for an additional assessment.

If the MHC determines you do not have gender dysphoria, the MHC should inform the psychiatrist and the Chief Mental Health Officer. They will determine if an additional review or evaluation should be conducted.

The final determination of gender dysphoria is up to the institution psychiatrist or designee.

Who develops treatment plans?

DOC develops individual treatment plans through a Gender Dysphoria Management Committee (GDMC), made up of the Chief Mental Health Officer, the Chief Medical Officer, the treating psychiatrist or psychiatric provider, the regional medical officer, a mental health clinician, and a healthcare provider.

The GDMC should be meeting four times per year to review cases of gender dysphoria.

- The GDMC should meet between regular meetings to discuss cases of gender dysphoria when a person who was being treated in the community is remanded to custody.

Transgender people receiving hormone treatment at their time of remand will be referred to a DOC provider.

The GDMC will develop individual treatment plans for individuals diagnosed with gender dysphoria.

What will treatment look like?

- **Members of the GDMC should meet with you** to discuss your treatment plan before it ever starts.
- **Mental health treatment for gender dysphoria should begin** as soon as the diagnosis of gender dysphoria is confirmed.
- **The GDMC's individual treatment plans might look different for each person** but will consider prior treatment, suicide risk, medical risk factors, and treatment goals. A treatment plan might also include referrals to specialists, but that is not guaranteed.
- **Treatment plans may include mental health services** focused on helping you to adjust to living conditions and to improve mental health, hormone treatment, and surgery for therapeutic purposes.
- **If you were receiving hormone treatment in the community** when you were booked, you will be referred to a DOC health care provider.
- **If the medical provider determines that the risks associated with stopping treatment are greater than the risks of continuing treatment**, and the incarcerated person understands the risks associated with the treatment and consents, hormone therapy will continue for up to 30 days or until the GDMC develops a treatment plan for the individual.
- **The medical provider should advise you** that the GDMC could stop or alter your hormone treatments after its review of your case.

Other things you should know

- **Incarcerated people with diagnosed gender dysphoria should receive other essential medical treatment** based on biological sex, age, and other medical conditions.
 - **DOC defines biological sex as categories of male or female** characterized by sex chromosomes, genital formation, reproductive capacity, or secondary sex characteristics, for example, breasts or Adam's apple.
- **Incarcerated people with a gender dysphoria diagnosis should be allowed to shower separately** from other incarcerated people.
- **DOC staff are not permitted to search or examine transgender prisoners** for the sole purpose of seeing the prisoner's genitals, but examinations may be performed for other medical reasons, like cancer screenings.
- **Personal hygiene products** are available in relation to an individual's biological sex.
- **Cosmetic products** will not be provided by DOC.
- **If you decline to be evaluated by a mental health clinician, DOC will not prescribe cross-hormone treatment** or other treatment for gender dysphoria.
- **DOC cannot ban literature, like books, magazines, or newspapers**, solely because the content is related to the LGBTQ+ experience, but DOC can ban sexually explicit material.

IMPORTANT: Failing to provide necessary medical care and treating someone differently than others because they are LGBTQIA2S+ could constitute a constitutional violation. To defend those rights in court, you will need to exhaust the grievance processes.

HOUSING

- DOC houses male and female prisoners separately.
- Currently, DOC houses people based on sex assigned at birth.