

Still Serving in Silence:

Transgender Service Members and Veterans in the National Transgender Discrimination Survey

by Jack Harrison-Quintana and Jody L. Herman

On 20 September 2011, the repeal of “Don’t Ask, Don’t Tell” (DADT) went into effect in the U.S. military. The repeal marked the end of discriminatory practices in the military based on sexual orientation, but it did not end the prohibition on transgender military service. The National Transgender Discrimination Survey (NTDS) found that transgender Americans serve in the military at a high rate; 20 percent of NTDS respondents had served in the armed forces as compared to 10 percent of the U.S. general population. This study draws upon both quantitative and qualitative data about transgender soldiers and veterans who responded to the NTDS to describe who these transgender soldiers and veterans are and what their experiences have been in regard to their military service. This study outlines respondents’ reported issues in obtaining corrected identity documents, accessing military health care, and experiences of discrimination. This study finds that transgender veterans experience substantial barriers in these areas and also experience high rates of family rejection and homelessness.

INTRODUCTION

On 19 September 2008, United States District Judge James Robertson ruled in favor of the American Civil Liberties Union (ACLU) and Colonel Diane Schroer, finding that the Library of Congress had engaged in illegal employment discrimination against Schroer. The Library of Congress had revoked Schroer’s job offer after learning she planned to transition from the sex she was assigned at birth—male—to live in accordance with her gender identity as a woman. Schroer had been an Airborne Ranger–qualified Special Forces officer and received numerous decorations over her twenty-five-year career with the Army, including the Defense Superior Service Medal. When Schroer transitioned from male to female after retirement from active duty, these accomplishments did not protect her against anti-transgender employment discrimination. In some ways, Schroer’s story is unique because she was decorated, ranked highly, and was uniquely qualified for the job she sought. But this case raises the question: if Diane Schroer, with all of her accomplishments, faced employment discrimination, then what are the experiences of other transgender veterans?

The end of 10 U.S.C. § 654, more commonly referred to as “Don’t Ask, Don’t Tell” (DADT), came about on 20 September 2011. From that day forward, military personnel of all sexual orientations could serve without hiding their partners or identities. However, this repeal process did not allow for military service by transgender people because, though engaged in the same social movement that led to the repeal of DADT

and often conjoined by community affiliations in the greater culture, transgender people were technically never disallowed from service by DADT (Kerrigan 2011). The exclusion of transgender people is not mandated by Congressional legislation; it exists within the military medical code, which lays out exclusions on the basis of what are deemed “psychosexual disorders,” including transsexualism, as well as on the basis of cross-dressing or a history of gender transition (Witten 2007). Therefore, not only are transgender individuals who wish to join the military prohibited from doing so, but those already serving honorably in the armed forces can be ousted if suspected of being transgender.

In light of the repeal of DADT, as well as the high rates of anti-transgender discrimination reported throughout the United States, we sought to answer the following question: what is the situation for transgender service members, potential service members, and veterans today? In order to offer a holistic look at these groups, our study examines data collected through the National Transgender Discrimination Survey (NTDS) to provide a quantitative and qualitative analysis. First, we will review literature about the experiences of transgender service members and veterans. Second, we will describe the methodology for the NTDS and the current study. Third, we offer a demographic portrait of the respondents to the NTDS survey who served in the military. Fourth, we review life outcomes for NTDS veteran respondents versus NTDS nonveteran respondents. And finally, we provide findings from a qualitative analysis of open-ended questions from the NTDS to look more deeply at the experiences of those who were unable to join the military as well as others who served and/or mentioned military service in their free response answers.

LITERATURE REVIEW

Little peer-reviewed research has been published

regarding transgender service members or veterans. George Brown’s first study of transgender veterans described a motivation to join the armed forces that was common among those who had transitioned from male to female (Brown 1988). Brown named this motivation “flight into hypermasculinity,” which describes the desire to join the armed forces in an attempt to “correct” or repress feelings of incongruence of sex assigned at birth and gender identity (Brown 1988, 531). Brown hypothesized that the flight into hypermasculinity among transgender people assigned male at birth would result in an overrepresentation of transgender women in the U.S. military. Brown reported to Courthouse News Service that findings from a forthcoming study of data from five million service members will show that the prevalence of male-to-female transgender people in the military is twice that of the general population (Klasfeld 2012).

Brown teamed up with Everett McDuffie for a follow-up to Brown’s 1988 study, in which they examined the records of seventy active duty service members and veterans who were evaluated for gender-related issues or distress (McDuffie and Brown 2010). They found that 43 percent of these veterans—who were predominately older than forty years of age, white, assigned male at birth and now identifying as women, and employed with at least a high school education—suffered from psychiatric problems such as depression, substance abuse, and combat-related post-traumatic stress disorder (PTSD); additionally, 61 percent reported suicidal ideation, with 11 percent attempting suicide (McDuffie and Brown 2010).

The majority of these soldiers and veterans described motivations for joining the armed forces similar to Brown’s flight into hypermasculinity. Those who had reported a flight-into-hypermasculinity motivation for joining the armed services frequently reported

that military service provided no relief from their distress related to their gender identity. Furthermore, McDuffie and Brown note, “This population of transgendered veterans generally described the health care systems in the Department of Defense and in the Department of Veterans Affairs as hostile and insensitive to their medical and mental health care needs in spite of the fact that they honorably served their country and were entitled to health care benefits” (McDuffie and Brown 2010, 28).

In 2008, the Transgender American Veterans Association (TAVA) and the University of California’s Palm Center fielded a survey among transgender veterans to learn more about their demographics and their experiences both in and out of the U.S. military and with the VA (Bryant and Schilt 2008). According to the survey, 64 percent of respondents identified as transgender on the male-to-female spectrum; 40 percent had a bachelor degree or higher; 44 percent made \$40,000 or more annually, while 10 percent reported an annual income of \$10,000 or less; and 54 percent owned their own homes (Bryant and Schilt 2008). Additionally, 38 percent identified their sexual orientation as heterosexual, while the remaining 62 percent identified as lesbian, gay, bisexual, or another sexual identity (Bryant and Schilt 2008). The DADT policy was in effect at the time of the survey, and respondents reported being questioned by peers (38 percent) and officers (14 percent) about their sexual orientation—a violation of the policy (Bryant and Schilt 2008). The report noted that removing the DADT policy would not be a panacea for the problems transgender service members and veterans face.

In addition, 97 percent of the transsexual-identified respondents to the TAVA survey said they were not able to transition until they had left the

military (Bryant and Schilt 2008). Outside of the military, nearly one-third of respondents reported experiencing some form of discrimination in hiring or in the workplace. One-third reported some form of discrimination outside the workplace, mainly in obtaining corrected identification documents. Transgender veterans who sought or received health care through the VA reported discriminatory treatment by doctors (22 percent) and staff (21 percent). Subsequent to Bryant and Schilt’s study, the Veterans Health Administration (VHA) issued a directive mandating that all VA-covered medical care be provided to transgender and intersex veterans in the VA health system in a manner free from discrimination and consistent with one’s self-identified gender (U.S. Department of Veterans Affairs 2011; U.S. Department of Veterans Affairs 2013). This directive, issued in June 2011 and renewed in February 2013, also states that “sex reassignment surgery cannot be performed or funded by VHA or VA” (U.S. Department of Veterans Affairs 2011, 2).

METHODS

This study utilizes data collected through the National Transgender Discrimination Survey, which was conducted by the National Center for Transgender Equality (NCTE) and the National Gay and Lesbian Task Force (the Task Force). Over a six-month period beginning in fall 2008, 6,456 transgender and gender nonconforming people in the United States, the largest survey sample to date, answered a seventy-question survey, reporting on their experiences of discrimination and abuse at home, in school, in the public sphere, and in the workplace (Grant et al. 2011). The survey also asked respondents about their military service, whether they had been discharged due to anti-transgender bias, and their ability to update military discharge records.

Respondents for the survey were recruited in collaboration with 800 active transgender-led or transgender-related organizations nationwide that announced the survey to their membership. The survey link was also disseminated through 150 e-mail lists that reach the transgender community in the United States. The survey was made available online and on paper. The final sample consists of 5,956 online responses and 500 paper responses.¹

In this study, we employ Pearson's chi-square tests of independence to measure within-sample relationships between service members/veterans and those who did not serve in the military. Pearson's chi-square tests are only generalizable when using random samples. The test's ability to find statistical significance may also be limited when utilized with a nonrandom sample. Yet, the test can be used to crudely measure a statistical relationship between two variables within this sample and provide hypotheses for future research (Lájer 2007). Qualitative data provided by respondents through write-in responses to the survey were coded and analyzed to provide a more in-depth understanding of service members' and veterans' experiences with the military.

DEMOGRAPHICS OF VETERANS AND SERVICE MEMBERS IN THE NTDS

Of the total NTDS sample, 1,261 respondents (20 percent) reported that they had served in the military at some point in their life.² This section examines the demographic makeup of those respondents by race, gender, age, age of transition, and how "out" or open they are about their gender identity. Table 1 presents this data alongside data for respondents who did not serve and the full NTDS sample. Chi-square tests of independence are noted both here and in Table 2, which we used to assess the relationship between military service and the demographic variable listed.

The majority of respondents who had served in the military were White (82 percent), multiracial (11 percent), or Latino/a (3 percent).³ Of those who served in the military, 88 percent were assigned male at birth. Respondents who served in the military were older in age, with 56 percent being over the age of forty-five. They were also more likely than nonveterans to have transitioned at an older age, with half (50 percent) having transitioned after the age of forty-five. Those who served are less likely to be "out" or open about their gender identity (48 percent).

LIFE OUTCOMES FOR SERVICE MEMBERS

This section will examine the relationship between military service among NTDS respondents and outcomes in seven areas of life: employment, education, housing, health, identification documents, experiences with police and jails, and family acceptance. Table 2 presents this data. Each of the questions in the NTDS that refers to discrimination specifically asked respondents to report discrimination due to anti-transgender bias. However, in some cases, the figures reported here may also speak to a complex interplay between transphobia and anti-veteran sentiment, whereby veterans are discriminated against because of a variety of assumptions made about them, such as PTSD and their mental health, their employable skills, and other assumptions.⁴

Employment

NTDS respondents who served are more likely to have lost a job due to bias (36 percent) and/or to have not been hired for a job due to bias (53 percent) compared to nonveterans (24 percent and 42 percent, respectively). Within the workplace, NTDS respondents who served are more likely to have been harassed (54 percent) and to have survived physical violence (9 percent) and sexual violence (8 percent) at work. However, those respondents who had served in

Table 1: Demographics of veteran and service member respondents, nonmilitary respondents, and the overall sample				
Demographic Category		Veteran and service member respondents	Nonmilitary respondents	Overall Sample
Race**	American Indian or Alaskan Native only	2%	1%	1%
	Asian or Pacific Islander only	1%	2%	2%
	Black only	2%	5%	5%
	Latino/a only	3%	5%	5%
	Multiracial	11%	12%	11%
	White only	82%	75%	76%
Gender**	MTF transgender women	68%	41%	47%
	FTM transgender men	9%	32%	28%
	Male-assigned-at-birth cross-dressers	18%	9%	11%
	Female-assigned-at-birth cross-dressers	1%	4%	3%
	Male-assigned-at-birth genderqueers	2%	3%	3%
	Female-assigned-at-birth genderqueers	2%	11%	9%
Age**	18-24	7%	22%	19%
	25-44	37%	56%	52%
	45-54	29%	13%	17%
	55-64	22%	8%	11%
	65+	5%	1%	2%
Age of transition**	<18	2%	7%	6%
	18-24	6%	35%	29%
	25-44	42%	40%	40%
	45-54	32%	14%	18%
	55+	18%	4%	7%
Outness**	Generally out	52%	61%	59%
	Generally closeted	48%	39%	41%
*Chi-square test of independence = $p < 0.05$				
**Chi-square test of independence = $p < 0.01$				

Table 2: Life outcomes of veteran and service member respondents, nonmilitary respondents, and the overall sample

Life outcome		Veteran and service member respondents	Nonmilitary respondents	Overall Sample
Employment	Lost a job due to anti-trans bias**	36%	24%	26%
	Was not hired for a job due to anti-trans bias**	53%	42%	44%
	Was harassed by someone at work due to anti-trans bias**	54%	49%	50%
	Survived physical violence at work due to anti-trans bias**	9%	6%	7%
	Survived sexual violence at work because of anti-trans bias**	8%	5%	6%
	Was compelled to do sex work, drug sales, or otherwise engage in the underground economy for income**	12%	17%	16%
Educational attainment	No high school diploma**	2%	5%	4%
	High school diploma only**	8%	8%	8%
	Some college**	48%	39%	40%
	College degree**	23%	28%	27%
	Graduate degree**	19%	20%	20%
Housing	Was evicted from a home or apartment due to anti-trans bias*	14%	10%	11%
	Experienced homelessness*	21%	18%	19%
	Owned their own home**	48%	29%	32%
Health	Was refused medical treatment due to anti-trans bias**	24%	18%	19%
	Postponed seeking medical care when sick or injured**	22%	29%	28%
	Is HIV positive**	2%	3%	3%
	Did not know their HIV status**	6%	9%	8%
	Attempted suicide	40%	40%	41%
Police and jails	Was harassed by the police due to anti-trans bias**	22%	28%	27%
	Was put in jail or prison for any reason**	21%	14%	16%
Family life	Was generally rejected by their families due to anti-trans bias**	67%	55%	57%
*Chi-square test of independence = p<0.05				
**Chi-square test of independence = p<0.01				

the military were less likely to have been compelled to do work in the underground economy (12 percent), such as sex work or drug sales for income, than those who had not served (17 percent).

Education

NTDS respondents who served are more likely to have attained some college education, but less likely to have completed college or a graduate degree. Of NTDS respondents who had served, 48 percent attended some college, compared to 39 percent for those who did not serve. Yet they completed college at a rate of 23 percent, compared to 28 percent for those who did not serve. Nineteen percent of those who served completed a master's or professional degree, compared to 20 percent for those who did not serve.

Housing

In terms of housing, NTDS respondents who served in the military are more likely to have been evicted from a home or apartment due to bias (14 percent). Those who served in the military were also more likely to have experienced homelessness (21 percent) than those who did not serve (18 percent). This figure is nearly three times higher than the general population lifetime rate of homelessness (7.4 percent) (United States Congress of Mayors 2006). This high rate of homelessness for transgender veterans is not surprising, given that veterans of all gender identities are disproportionately represented in the U.S. homeless population. According to the U.S. Department of Housing and Urban Development (2011), nearly one in seven homeless adults is a veteran.

However, NTDS respondents who had served in the military were more likely to own their homes (48 percent). This is still much lower than the national average of 67.4 percent reported by the U.S.

Department of Housing and Urban Development in the second quarter of 2009, at approximately the same time as the survey was launched (U.S. Department of Housing and Urban Development 2009).

Health

Of NTDS respondents who served in the military, 18 percent go to VA clinics or hospitals to receive healthcare.⁵ The majority (58 percent) go to non-VA doctor's offices for their healthcare. NTDS respondents who had served in the military were more likely to have been refused medical treatment due to bias (24 percent). However, they were less likely to have postponed seeking medical care when sick or injured (22 percent).

Respondents who served in the military are less likely to be HIV positive (2 percent) and more likely to know their HIV status. Only 6 percent of those who had served said they did not know their HIV status, compared to 9 percent of their nonveteran counterparts. It should be noted, though, that all of these figures are higher than the general US population rates related to HIV, with a general US rate of 0.6 percent (UNAIDS and WHO 2007).

There was no statistically significant relationship between military service and having attempted suicide.

Identification Documents

Identity documents are a salient part of most Americans' lives and are needed when seeking employment and housing, for driving, and in a variety of other circumstances. Identity documents often list an individual's gender, and people who transition may desire to have their gender corrected on these documents. Military service records provide information about an individual's service in the armed forces, including discharge status.

Respondents were asked in the NTDS about their ability to update forms of identification, including military discharge papers (the DD 214, or “Certificate of Release or Discharge from Active Duty,” and the DD 215, the document used when original information is corrected or updated). Of respondents who had served in the military, only 5 percent said they had attempted to update those documents to match their current name and gender marker and were successful. Another 10 percent said they had tried but been denied, 64 percent said they had not tried, and 21 percent marked “not applicable.” There was no significant relationship between having updated nonmilitary identifications and having served.

QUALITATIVE FINDINGS FROM THE NTDS

Respondents to the National Transgender Discrimination Survey were provided with the opportunity to write in a response to the following question, Question 70: “Anything else you’d like to tell us about your experiences of acceptance or discrimination as a transgender/gender nonconforming person?” Seventy-four NTDS participants discussed the U.S. military in their responses. Those who chose to respond about the military were predominantly White (73 percent) or multiracial (19 percent), ages twenty-five through fifty-four (74 percent), assigned male at birth (77 percent), and had served in the military (80 percent). Respondents described a variety of experiences, including instances of harassment and sexual assault, and shared their thoughts on public policy regarding transgender military service. In this section, we review these write-in responses to describe experiences of those participants who want to serve in the military, experiences while serving in the military, experiences with identity documents and health care, and requested changes in public policy

related to the military.

A few young respondents, all transgender men from the ages of twenty-one to twenty-eight, expressed a desire to join the military and distress at not being able to serve. One young man explained, “I am a patriotic and God-fearing twenty-one-year-old male (of transsexual history) from a military family . . . I want to serve my country, badly, and think about this constantly.” Another young man was denied entry and described his situation, stating, “I scored high enough to go into the military and die for our country as a ranking officer—but I was denied because of my genitals not matching what my gender marker was on my license.” A twenty-eight-year-old transgender man described his dismay at not being able to serve: “What bothers me most is I’ll never get to join the military. That breaks my heart . . . as I grow older I am really beginning to think if I am not able to serve my country like that in some way, it’s going to be one of my regrets in life.” Another young transgender man describes the difficult choice between transitioning and military service: “I have wanted to enlist in the military or take a federal job my entire life . . . and now I am finally having to come to terms with the fact that I will either have to delay my transition for eight or more years, or give up on my dreams.”

In order to serve in the military, eleven respondents described how they hid their gender identity from others, including delaying transition until being discharged or having retired from the service. One transgender man described how he went back to living as his assigned sex at birth—female—in order to serve in the military after having lived full-time as a man for two years. Others described the personal price they have paid in order to serve in the military. One veteran explained, “I have thirty-five years of service though and throughout my career I have been

highly regarded. I feel that many others do not have the experience that I have. But I did pay the price for my success . . . I gave up most of my life and lived a lie.” A current service member stated, “To date I have experienced few instances of discrimination because I have continued to present primarily as my birth gender in order to avoid losing my position in the military. Conversely the sure knowledge that I must do this must qualify as severe discrimination and harassment.” Another current service member, a cross-dresser assigned male at birth, described how the military created distress in not being able to live an authentic life but simultaneously curtailed some potential negative outcomes of that distress. He explained, “Many of the requirements necessary to stay in the military have made acting out and self-medicating with drugs to escape the pain impossible. Without this structure I might not have developed the discipline and strength necessary to overcome my pain.”

Seven respondents described how they suffered verbal, physical, and sexual harassment in the military based on their gender expression or perceived sexual orientation. One veteran described her experience in the military, stating she “experienced extreme sexual harassment and abuse when in the military.” She described a specific incident with an officer: “I was once verbally and physically bullied by an Army Colonel because I was a ‘freak,’ even though I served four years in the infantry.” One respondent related incidents of harassment she had experienced while serving in the Navy Reserve. She explained, “I was harassed because I was observed with, of all things, shaved arms. The harassment was shunning . . . While on a field exercise, I was silently offered sex contact with my tent mate. I said nothing and did not respond in any way to his overtures. The purpose of this attempt

was to obtain the necessary evidence to remove me from military service. It failed.” Another veteran described sexual harassment she endured, based on a misperception of her sexual orientation: “Sexually harassed in the military for being perceived as gay. Actually was pre-out transsexual. Gender behavior nonconformity with societal norms is why I was perceived to be gay—much in the same way that effeminate males are often perceived to be gay.”

Four respondents reported they were raped, and one reported suffering attempted rape while in the military. Four of these respondents reported they were targeted for sexual violence due to their gender nonconformity or gender identity. One Navy veteran attributed her rape to others’ reactions to her gender identity: “My US Navy enlistment was short, two years of a six-year enlistment because when my gender feelings were discovered I was twice raped at sea.” Another veteran explained, “I was raped twice in the military because I was butch/lesbian/gender nonconforming. The first time was a gang-rape.” One respondent described going AWOL (absent without official leave) subsequent to being raped while in the Marines and told to not report it:

At age sixteen, while in the Marines I was raped in the barracks and when I reported it I was told that I would be dishonorably discharged if I allowed it to become officially reported. No action was taken against the rapist and I was placed back into the barracks with this same person. I went AWOL and remained in that status for twenty-eight years. When I was finally arrested, I lost my high six-figure income job that I had had for twelve years and ended up losing everything and became homeless for about a year. All of this because I was transgender.

One hundred seventeen survey respondents (9

percent) who had served reported they were discharged because of being transgender or gender nonconforming. In Question 70, thirteen respondents described having their positions undermined, being denied promotions, being forced out of the military, or being discharged. A transgender woman working for the Army described how her position was undermined after she transitioned: “Upon my transition, key individuals acted so as to deny me access and communication to fulfill my duties.” She was terminated. Several respondents described situations where they were forced out of the military, but not officially discharged. Another transgender woman explained, “I served in the US Navy when I figured things out and was told to leave or be dishonorably discharged.” Another respondent found his career path stunted: “Even though I wasn’t forced out of the military ‘officially’ due to my transgender status, because they knew of it and made me seek counseling I knew I had no opportunities to make it a career and left at the first opportunity.” Four respondents reported being discharged or fired from military employment. One transgender man was discharged as mentally unfit to serve under Section 8 for being a lesbian but noted that they intended to discharge him for being transgender but utilized Section 8 to do so.⁶

In Question 70, five survey respondents described their experiences with updating their military records. Two of these respondents outlined problems that arise from having military records that don’t accurately reflect their gender. One veteran explained, “[I was not] able to obtain a new military DD 214 with [my] new name, otherwise [I] cannot use it and prove prior military service, so [I] am denied many services.” Another veteran described his situation that impacted his income and health care:

On the DEERS [Defense Enrollment Eligibility Reporting System] I am listed by my male name with the gender listed as female. I have a court order stating that effective [January 2008] my male name is _____ and my gender is male. Still the military refuses to recognize this. This refusal affects the name on my Army retirement check, disability check, and is causing havoc with my military health care.

The VA provides a number of services for veterans of the armed forces, including health care services administered through the VHA. Veterans who responded to Question 70 provided a wealth of information about health care they had received both inside and outside of the VA system. Fourteen wrote about specific experiences with VA health care, facilities, doctors, and staff, ranging from very positive experiences to very negative. One transgender woman noted, “I happen to be a disabled war veteran who has a letter from the VA stating that I’m overdue for a mammogram. How cool is that?” Other respondents related positive experiences with the VA when needing job-related physical evaluations and when needing a second opinion on a diagnosis. However, 71 percent of responses about the VA were negative. Eight veterans described distress at not being able to receive transition-related health care services through the VA, including hormones, or experiencing discrimination, including denial of regular health care services, by VA doctors and medical staff.⁷ Another transgender woman stated she was raped at a VA hospital.

Eighteen respondents offered their opinions on what public policy changes should take place to improve the military for transgender people who want to serve or are currently serving. The most common public policy suggestion, offered by eight respondents, was to allow transgender people to serve

openly in the military. One respondent declared, “I should have the right to risk my life for my country.” Four respondents suggested that the VA and military health insurance cover transition-related health care. Other public policy suggestions included allowing military records (such as DD 214) to be changed to correct one’s gender, military adoption of anti-harassment measures to protect service members and veterans, federal anti-discrimination protections that cover employment (such as ENDA), and training and education on transgender issues.

The lack of public policies to address transgender military service and the needs of transgender service members and veterans left several veterans dismayed. One veteran declared, “Very angry about serving in the first Gulf war, being a 100 percent service-connected disabled vet and having my rights and benefits . . . being denied.” Another veteran explained, “I’m a combat veteran and am discriminated against because I am ‘nonconforming.’ I earned the right to be myself.” Finally, a Navy veteran asked, “Served twenty years in the Navy, highly decorated, with honor. [I was] protecting America’s rights. WHAT ABOUT MINE?”

CONCLUSION

Many transgender people desire to serve their country in the armed forces, yet are not allowed entry or allowed to remain in the service if they wish to live their lives true to their gender identities. Transgender service members and veterans have reported wide-ranging experiences of discrimination, harassment, and physical and sexual assault while serving in the military. Outside of the military, transgender veterans in the NTDS experienced higher rates of homelessness, incarceration, and family rejection than those who did not serve. Transgender veterans described unique challenges and barriers to obtaining necessary health care and

accurate identification documents. The repeal of “Don’t Ask, Don’t Tell” does not provide a public policy solution for these problems transgender service members and veterans experience. Though the VHA has begun to address transgender veterans’ health care concerns, it will be necessary to make additional changes to military policies in order to allow transgender people to serve openly and with honor.

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ENDNOTES

1. Though the research team and staff members conducted widespread outreach efforts, including to rural areas, to recruit survey respondents from a variety of regions, literacy levels, and socioeconomic backgrounds, there are certainly segments of the transgender population that are not represented or are underrepresented in this survey. Therefore, while this is by far the largest sample of transgender experience collected to date, with respondents hailing from all fifty states and the District of Columbia, it is not appropriate to generalize the findings in this study to all transgender and gender nonconforming people because it is not a random sample. More details about the composition of the survey sample can be found in the report “Injustice at Every Turn: A report of the National Transgender Discrimination Survey” (Grant et al. 2011).
2. A study by Shipherd et al. (2012) found that 30 percent of transgender women in their survey sample served in the military, whereas 10.1 percent of the U.S. general population had ever served in the military as of 2009. This is similar to the findings from the NTDS, where we find that 29 percent of transgender women had ever served in the military.
3. For comparison, the racial makeup of all active duty military service members in 2010 was as follows: 70 percent White only, 17 percent Black only, 4.9 percent other, 3.7 percent Asian only, 2.1 percent multiracial, 1.7 percent American Indian or Alaskan Native, and 0.6 percent Native Hawaiian or other Pacific Islander. Additionally, 10.8 percent of active duty military service members were Hispanic or Latino/a (U.S. Department of Defense 2010, 20).
4. A preliminary multivariate analysis found that military service remains a significant predictor of some negative life outcomes, even when controlling for age, race, and gender. Future research is needed to understand the complex interplay between demographics, military service, and experiences of discrimination.
5. Shipherd et al. (2012) figures on VA use differ slightly from ours, though the difference could be attributable to differences in the survey questions that were fielded. Here we find that 18 percent of transgender veterans use the VA when sick or in need of advice about their health. This figure jumps to 20 percent when only considering transgenderwomen veterans. Shipherd et al. (2012) find 9 percent of transgender women veterans use the VA for primary health care and 16 percent had used VA services in the last six months.
6. Section 8 refers to a type of administrative discharge for a “sexual perversion” that rendered an individual “unfit” for military service. A Section 8 discharge no longer exists within the military. For more information about the development and use of administrative discharges and policies regarding sexual minorities in the U.S. military, see Evans, Rhonda. 2001. U.S. Military Policies Concerning Homosexuals: Development, Implementation, and Outcomes. Santa Barbara, CA: The Palm Center (formerly the Center for the Study of Sexual Minorities in the Military).
7. The data presented here was collected before the VHA directive (issued in 2011 and updated and renewed in 2013) mandated provision of all VA-covered medical care to transgender veterans in the VA health system in a manner free from discrimination and consistent with one’s self-identified gender identity (U.S. Department of Veterans Affairs 2011; U.S. Department of Veterans Affairs 2013).

Jack Harrison-Quintana is a queer Latino activist and researcher currently serving as the manager of the Policy Institute of the National Gay and Lesbian Task Force. In 2011, he was a coauthor of the groundbreaking report “Injustice at Every Turn: A Report of the National Transgender Discrimination Survey.” Since the publication of the study, he has continued producing new research products based on the NTDS data including state and regional reports as well as a series on racial justice-related findings. Additionally, he is a coauthor of “A Gender Not Listed Here: Genderqueers, Gender Rebels, and OtherWise in the National Transgender Discrimination Survey,” published in the 2012 LGBTQ Policy Journal.

Jody L. Herman holds a PhD in Public Policy and Public Administration from The George Washington University, where she also earned her MA in Public Policy. She currently serves as the Peter J. Cooper Public Policy Fellow and Manager of Transgender Research at the Williams Institute at the UCLA School of Law. Before joining the Williams Institute, she worked as a research consultant on issues of voting rights in low-income minority communities and gender identity discrimination. She served as a co-author on the groundbreaking report “Injustice at Every Turn,” based on the National Transgender Discrimination Survey conducted by the National Gay and Lesbian Task Force and the National Center for Transgender Equality. Her main research interests focus on the impact of gender identity-based discrimination and issues related to gender regulation in the built environment.