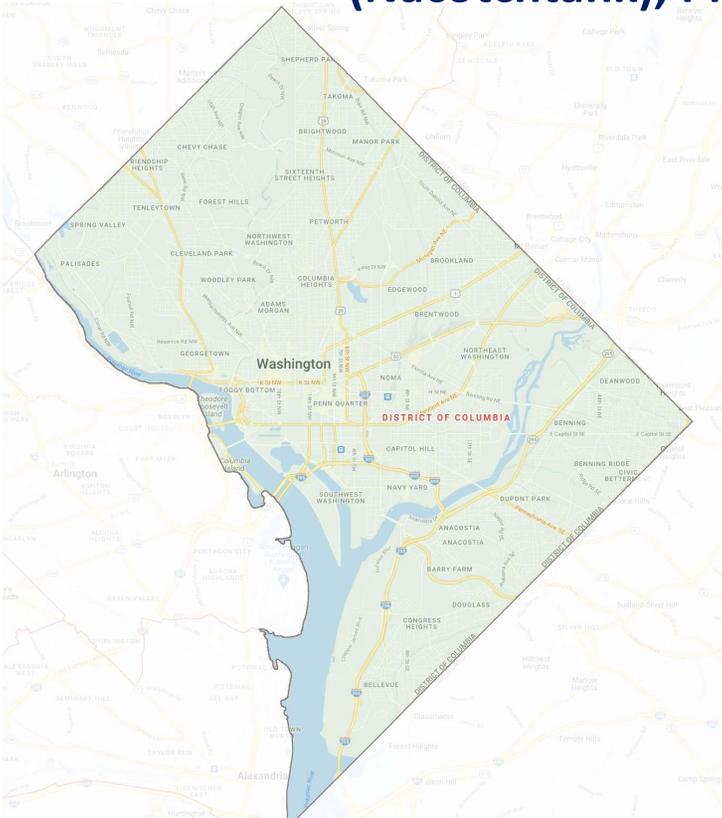


Sociopolitical Correlates of Psychological Distress among Transgender Adults

APHA Conference 2025

Tonia Poteat (she/her), Nancy Perrin, Wura Olawole, Carter Brown, Andrea Wirtz, Larissa Jennings Mayo-Wilson, Wiley Kornbluh, Ash Humphrey, Sari Reisner

Washington DC is located on the ancestral lands of the Anacostans (Nacotchtank), Piscataway and Pamunkey peoples



TO TAKE ACTION

- NCAI: National Congress of American Indians
<https://www.ncai.org/about-ncai>
- American Indian Society of Washington DC
<https://www.aisdc.org/>

TO LEARN

- NAFSA: Association of International Educators
<https://www.nafsa.org/programs-and-events/nafsa-land-acknowledgement>
- Association of Research Libraries
<https://www.arl.org/land-acknowledgment/>

No relationships to disclose

Escalating anti-transgender legislation

2025 anti-trans bills tracker

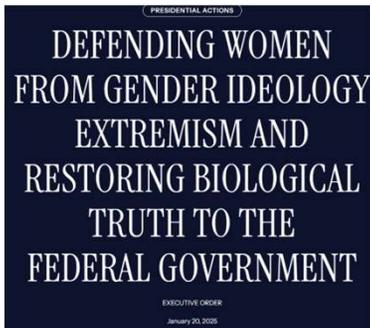
In 2025, anti-trans bills continue to be introduced across the country. We track legislation that seeks to block trans people from receiving basic healthcare, education, legal recognition, and the right to publicly exist.

1,000 bills 49 states

122 passed 497 active 381 failed

National anti-trans bills

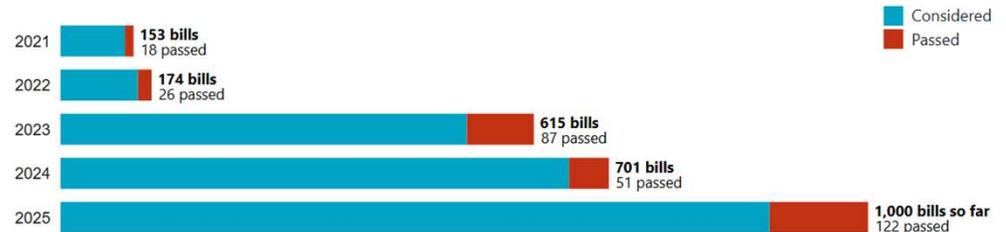
We're tracking 98 national bills in the United States in 2025.



Executive Orders:

- Redefine sex & gender
- Withholds K-12 funds
- Prohibits sports participation
- Bans from military
- Bans care for minors

<https://www.whitehouse.gov/presidential-actions/>
<https://lgbtqbar.org/programs/trump-executive-order-tracker/>



Anti-trans bills under consideration and passed, 2021-2025

ID H0668 PASSED
HEALTHCARE

Adds to existing law to prohibit the use of public funds for gender transition procedures.

NO PUBLIC FUNDS FOR GENDER TRANSITION -- Adds to existing law to prohibit the use of public funds for gender transition procedures.

“ Public funds shall not be used, granted, paid, or distributed to any entity, organization, or individual for the provision or subsidy of any surgical operation or medical intervention [...] for purposes of altering the appearance of an individual in order to affirm the individual's perception of the individual's sex in a wa...

[View Bill](#)

SC H4624 PASSED
HEALTHCARE

Gender Reassignment Procedures

Amend The South Carolina Code Of Laws By Adding Chapter 42 To Title 44 So As To Define Gender, Sex, And Other Terms, To Prohibit The Provision Of Gender Transition Procedures To A Person Under Eighteen Years Of Age, To Provide Exceptions, To Prohibit The Use Of Public Funds For Gender Transition Procedures, And To Provide Penalties; And By Adding Section 59-32-36 So As To Prohibit Public School Staff And Officials...

“ (A) A physician, mental health provider, or other health care professional shall not knowingly provide gender transition procedures to a person under eighteen years of age.

[View Bill](#)

WV HB4233 PASSED
BIRTH CERTIFICATES

Non-binary not permitted on birth certificates

The purpose of this bill is to require birth certificates issued in this state to include the gender of the child at birth and prohibit use of the term "non-binary" on birth certificates.

“ The birth certificate shall list the child's sex at birth as male or female and may not use the term "non-binary."

[View Bill](#)

ID H0421 PASSED
CIVIL RIGHTS

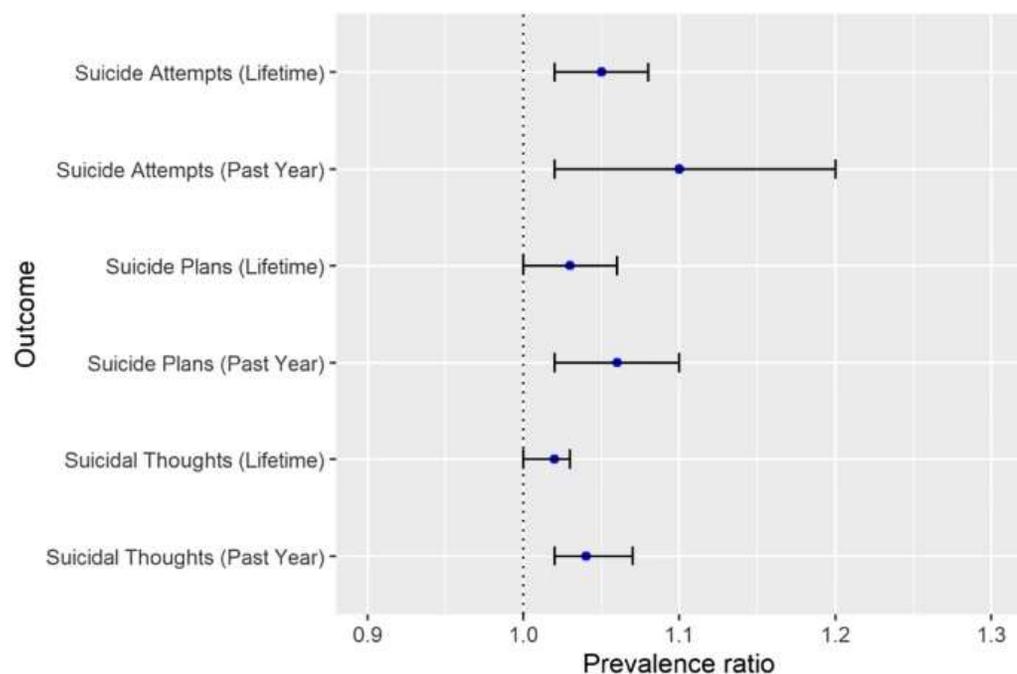
Amends existing law to define terms and to revise definitions regarding "sex" and "gender."

INDIVIDUAL'S SEX -- Amends existing law to define terms and to revise definitions regarding "sex" and "gender."

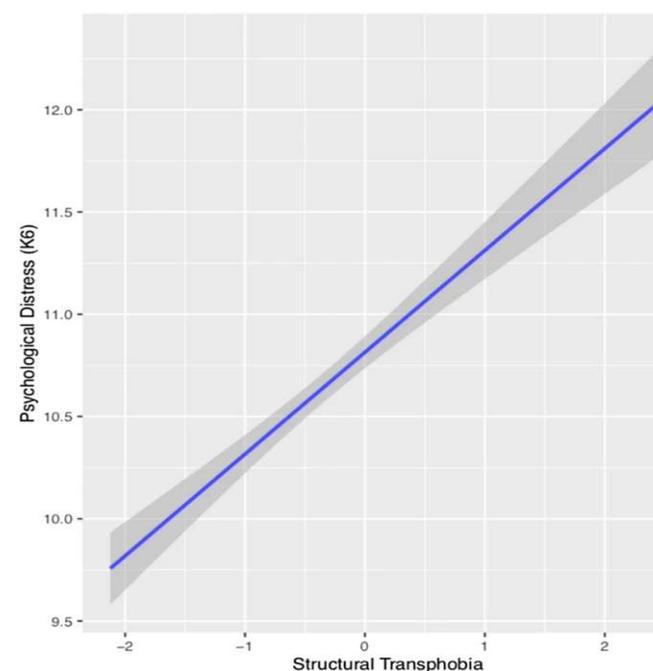
“ In human beings, there are two, and only two, sexes: male and female; (2) Every individual is either male or female; (3) An individual's sex can be observed or clinically verified at or before birth;

[View Bill](#)

Anti-trans legislation associated with worse mental health



Prevalence ratios for past-year and lifetime **suicidality** by state-level transphobia.



Effects plot of past-month **psychological distress** by state-level transphobia.

Price, M.A., Hollinsaid, N.L., McKetta, S. et al. Structural transphobia is associated with psychological distress and suicidality in a large national sample of transgender adults. *Soc Psychiatry Psychiatr Epidemiol* 59, 285–294 (2024). <https://doi.org/10.1007/s00127-023-02482-4>

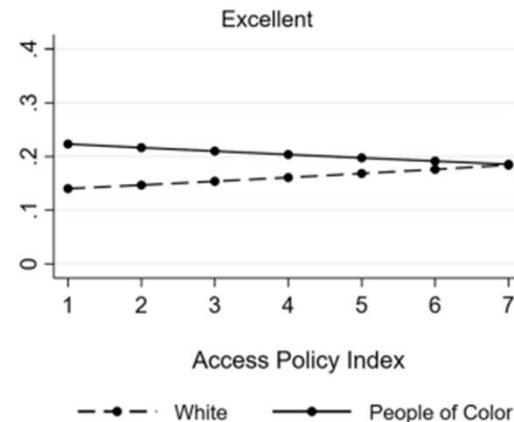
Effects of legislation vary by White v. People of Color

Racial/ethnic differences in the association between transgender-related U.S. state policies and self-rated health of transgender women



Wesley M. King^{1*†}, Kristi E. Gamarel¹, Nancy L. Fleischer², Asa E. Radix³, Tonia C. Poteat⁴, Linda M. Chatters^{1,5}, Don Operario⁶, Sari L. Reisner^{2,7}, Andrea L. Wirtz⁸ and American Cohort to Study HIV Acquisition Among Transgender Women (LITE) Study Group

Overall, our results indicate that both access and equality policies may be more health-promoting for the self-rated health of White transgender women as compared to transgender women of color.



Objectives

1. Identify intervenable socio-structural risk and protective factors associated with psychological distress among transgender adults
2. Examine whether Whiteness (conceptualized as social capital) moderates relationships between these socio-structural factors and psychological distress

Methods

- Baseline data from 360 trans and nonbinary adults enrolled in CARES between December 2023 – March 2025
- Psychological distress outcome measured using Kessler 6 (K 6)
 - Higher scores = greater distress
- Bivariate and multivariable linear regression modeling of associations between socio-structural factors and K6
 - Social support, intersectional discrimination, gender non-affirmation, financial self-efficacy, trans community connectedness, neighborhood safety, gender discrimination
- Interaction term for Whiteness included with each factor
 - Tested each interaction separately



12 month randomized trial designed to test the efficacy of monthly microgrants with or without peer mentoring to reduce psychological distress among transgender adults in the South experiencing material hardship

Participant characteristics (N=360)

Age mean (sd)	30.13 (8.41)
Gender	
Man or Male	106 (29.4%)
Woman or Female	117 (32.5%)
Non-binary	137 (38.1%)
Race	
White	230 (63.9%)
Black or African American	122 (33.9%)
Asian	14 (3.9%)
American Indian/Alaska Native	20 (5.6%)
Latinx/Hispanic	32 (8.9%)
Another race	8 (2.2%)

Education	
Completed high school or less	84 (23.3%)
Some college or associates degree	161 (44.7%)
College, tech, vocational, grad	111 (30.8%)
Employment	
Unemployed	101 (28.1%)
At least part-time employment	137 (65.9%)
Disability	22 (6.1%)
Health Insurance	
Public	112 (31.1%)
Private	156 (43.3%)
Uninsured/Don't know	92 (25.6%)

Baseline adversities (N=360)

Material Hardship	
Worried food would run out	93.1%
Could not pay full rent/mortgage	63.6%
Could not pay full utilities	62.2%
Phone service cut off	40.0%
Utilities turned off	26.7%
Evicted	8.3%



Psychological Distress	
K6 scores (possible range: 0-24)	
Mean (sd)	13.6 (sd=5)
Median	14.0
Level of distress	
Moderate (K6 \geq 5 and $<$ 13)	32.5%
Serious (K6 \geq 13)	62.2%

Associations between psychological distress and demographics

	Beta	p-value
Age mean (sd)	-0.287	<.001
Gender		
Non-binary	Reference	
Man or Male	-0.047	.422
Woman or Female	-0.079	.183
White (yes/no)	0.093	.079
Black or African American (yes/no)	-0.141	.007
Unemployed	0.070	.183
Income	0.036	.494
Insurance		
Private	Reference	
Public	.020	.732
Uninsured/Don't Know	.152	.008

Older age and **Black race** associated with **lower** psychological distress

Uninsured/Don't know insurance status associated with **higher** psychological distress than private insurance status

Bivariate linear regression models

Socio-structural factor	Bivariate	
	Beta	p-value
Social Support	-0.216	<.001
Intersectional Discrimination	0.313	<.001
Non-affirming gender experiences	0.301	<.001
Financial Self-efficacy	-0.255	<.001
Community Connectedness	-0.230	<.001
Neighborhood Unsafety	0.237	<.001
Gender discrimination	0.295	<.001

More social support, financial self-efficacy, and social connectedness associated with lower psychological distress

More intersectional discrimination, gender non-affirmation, gender discrimination, and neighborhood unsafety associated with higher psychological distress

Higher K6 scores = more psychological distress

Multivariable linear regression models

	Unadjusted		Adjusted*	
	Beta	p-value	Beta	p-value
Socio-structural factor				
Social Support	-0.112	.035	-0.161	.002
Intersectional Discrimination	0.173	.002	0.265	<.001
Non-affirming gender experiences	0.179	<.001	0.089	.079
Financial Self-efficacy	-0.185	<.001	-0.204	<.001
Community Connectedness	-0.139	.008	-0.141	.005
Neighborhood Unsafety	0.089	.082	0.067	.167
Gender discrimination	0.063	.266	-0.026	.645

Higher K6 scores = more psychological distress

*Adjusted for age, race, and health insurance status

Whiteness as moderator of associations with psychological distress

- Nonsignificant interactions
 - Social Support (p=.547)
 - Intersectional Discrimination (p=.269)
 - Gender discrimination (p=.570)
- Significant interactions
 - Non-affirming gender experiences (p=.005)
 - Financial self-efficacy (p=.003)
 - Community connectedness (p<.001)
 - Neighborhood safety (p=.002)



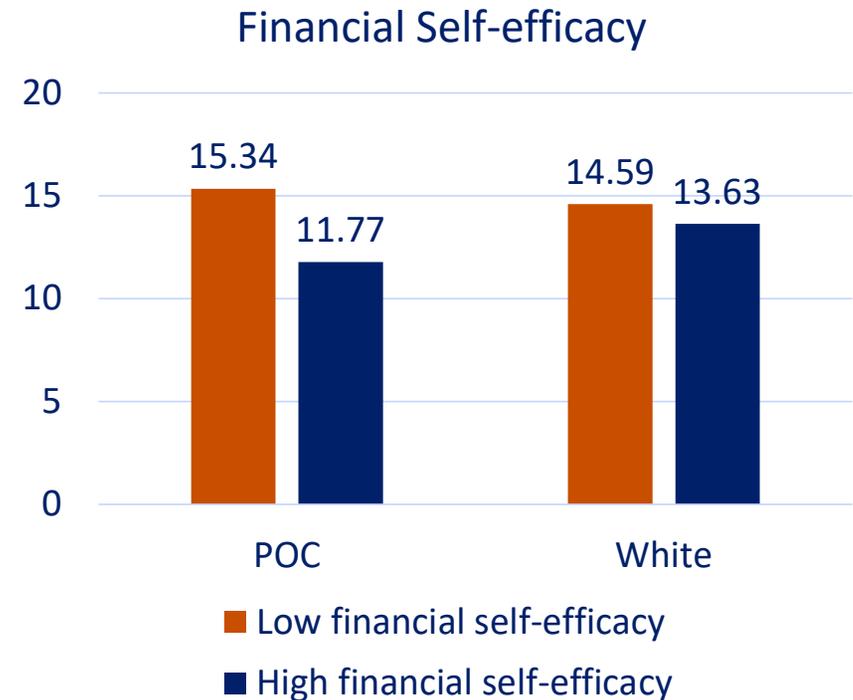
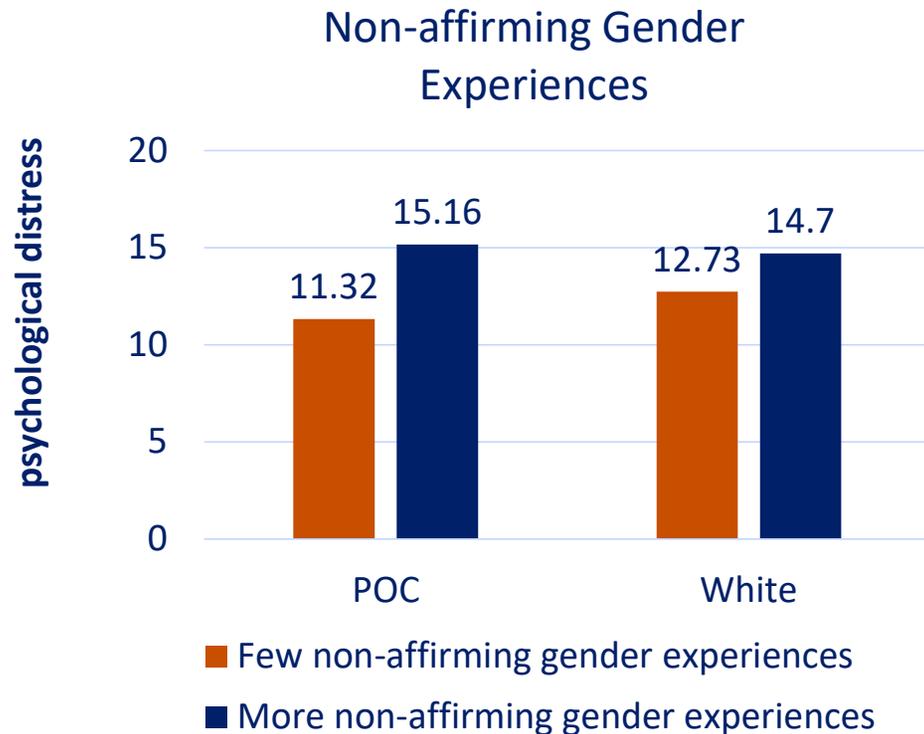
FROM PULITZER PRIZE WINNER JOSE ANTONIO VARGAS



<https://www.youtube.com/watch?v=xbl0weDHwAQ>

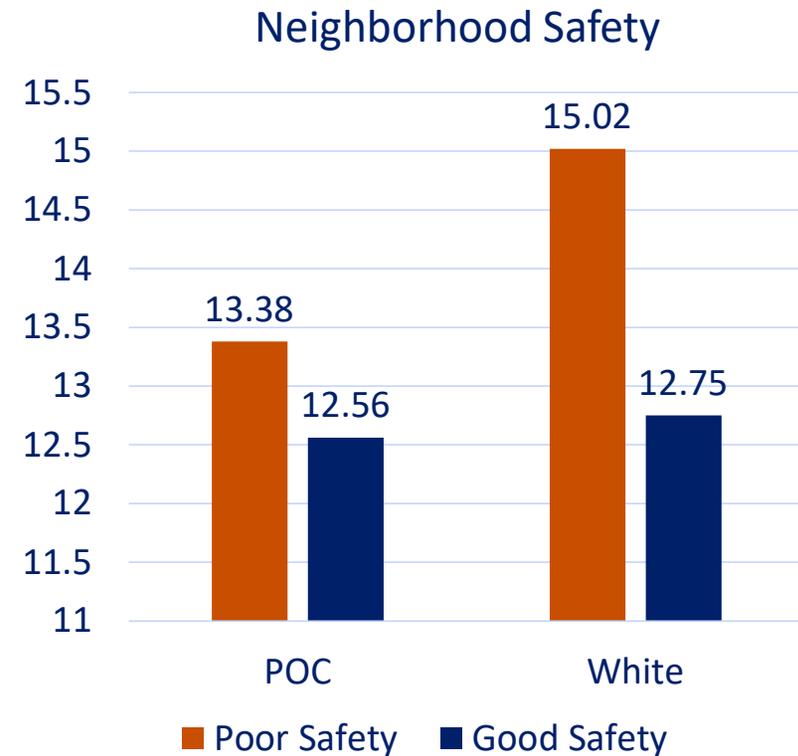
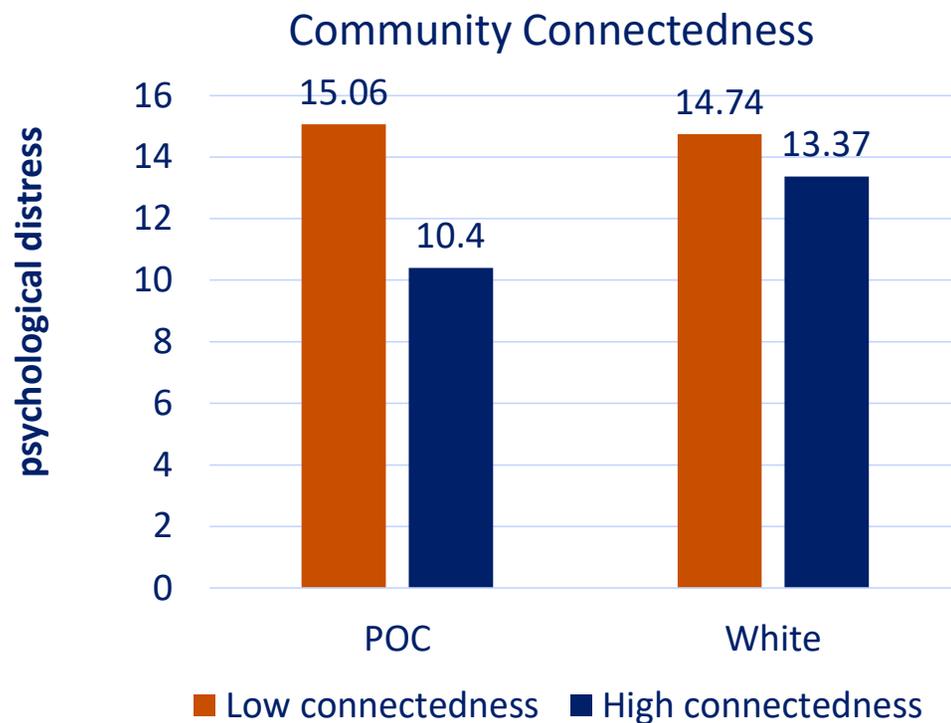
<https://www.imdb.com/title/tt4846132/>

Whiteness as moderator of each factor and psychological distress



- Non-affirming experiences had greater negative effect on distress for POC (v. White) participants
- Financial self-efficacy had a greater positive effect on distress for POC (v. White) participants

Whiteness as moderator of each factor and psychological distress

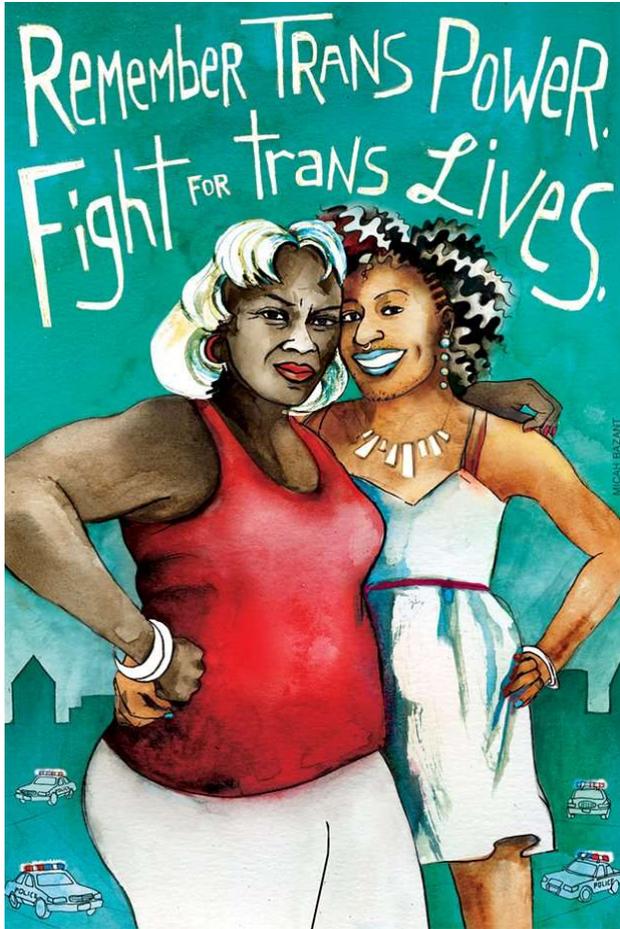


- Higher community connectedness had a greater positive impact on POC (v. White) participants' distress
- Poor neighborhood safety had a greater negative impact on White (v. POC) participants' distress

Conclusions

- Among trans adults living the South and experiencing material hardship
 - **Intersectional discrimination** is associated with greater psychological distress
 - **Social support, trans community connectedness, and financial self-efficacy** are associated with lower psychological distress
 - POC experienced greater **negative** effects of gender non-affirmation and greater **positive** effects of financial self-efficacy and higher community connection on psychological distress.
 - White participants experienced a greater **negative** effect of poor neighborhood safety on psychological distress.
- Increasing access to social support and trans community connection as well as financial self-efficacy may help to **mitigate harms** wrought by negative political forces
- The moderating role of race emphasizes the importance of **tailoring these interventions** for trans people of color

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<https://www.micahbazant.com>

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- *The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.*