



LOS ANGELES COUNTY  
**COMMISSION ON HIV**



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*Join us in developing a progressive and inclusive agenda to address the disproportionate impact of HIV/STDs in our Transgender Communities.*

## TRANSGENDER CAUCUS VIRTUAL MEETING

Tuesday, August 26, 2025  
10:00am- 11:30am (PST)

Agenda and meeting materials will be posted on  
<http://hiv.lacounty.gov/caucus-taskforce-and-workgroups>

REGISTRATION NOT REQUIRED + SIMULTANEOUS TRANSLATION IN SPANISH AND OTHER LANGUAGES NOW AVAILABLE VIA CLOSED CAPTION FEATURE WHEN JOINING VIA WEBEX. CLICK [HERE](#) FOR MORE INFO.

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<https://lacountyboardofsupervisors.webex.com/lacountyboardofsupervisors/j.php?MTID=m8dc5353d0b667f1dc0a82c2ec3ccfa4d>

### TO JOIN BY PHONE:

Dial: 1-213-306-3065 | Access Code: 2538 834 5563

Meeting Password: TRANSPOWER

*If you experience challenges in logging into the virtual meeting, please refer to the WebEx tutorial [HERE](#) or contact Commission staff at 213.509.9199 or [hivcomm@lachiv.org](mailto:hivcomm@lachiv.org).*

# together.

**WE CAN END HIV IN OUR COMMUNITY ONCE AND FOR ALL**

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# TRANSGENDER CAUCUS

## Virtual Meeting Agenda

Tuesday, August 26, 2025 at 10:00 AM – 11:30 AM

### TO JOIN BY WEBEX, CLICK:

<https://lacountyboardofsupervisors.webex.com/lacountyboardofsupervisors/j.php?MTID=m8dc5353d0b667f1dc0a82c2ec3ccfa4d>

**Meeting Number:** 2538 834 5563

**Password:** TRANSPOWER (case sensitive)

### JOIN BY PHONE:

**Dial:** +1-213-306-3065 United States Toll (Los Angeles)

**Access Code:** 2534 020 3285

1. **WELCOME + INTRODUCTIONS + CHECK-IN** 10:00 AM—10:10 AM
2. **CO-CHAIR'S REPORT** 10:10 AM—10:20 AM
  - a. July 27, 2025, meeting recap
  - b. Meeting Calendar Review
3. **EXECUTIVE DIRECTOR/STAFF REPORT** 10:20 AM—10:30 AM
  - a. Operational and Programmatic Updates
4. **DISCUSSION** 10:30 AM—11:15 AM
  - a. Community Listening Session Summary Reports
    - i. [June 4, 2025: Transgender Women](#)
    - ii. [July 7, 2025: Black Transgender Community](#)
  - b. Planning Additional Community Listening Sessions
5. **MEETING RECAP + NEXT MEETING AGENDA** 11:15 AM—11:20 AM
6. **PUBLIC COMMENT + ANNOUNCEMENTS** 11:20 AM—11:30 AM
  - a. [“The Power of Aging: Navigating Services in Times of Uncertainties”](#)
7. **ADJOURNMENT** 11:30 AM



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**Solidarity Statement in Support of Transgender, Gender Expansive, Intersex, and Two-Spirit (TGI2S+) Communities**

(Approved by the Commission on HIV 4/10/25)

The Transgender Caucus of the Los Angeles County Commission on HIV condemns all forms of hate and violence and remains steadfast in solidarity with our Transgender, Gender Expansive, Intersex, and Two-Spirit (TGI2S+) community. The HIV/AIDS movement knows too well that the proliferation of disinformation created with the aim of restricting access to healthcare has real-life consequences. The harmful rhetoric of the current administration against the TGI2S+ community is rooted in the same forms of racism, discrimination, sexism, and misogyny that continue to hinder our progress in ending HIV/AIDS.

We recognize the contributions and leadership of TGI2S+ people who continue to enrich the LGBTQ+ civil rights and the HIV/AIDS movements. We acknowledge the achievements of TGI2S+ people in the United States and across the world and recognize their bravery and resilience in their hard-fought work for equality, inclusion, and the full recognition of their human rights. We are determined to advocate fiercely, and unapologetically, for the safety, health, and well-being of our TGI2S+ community. This is not just our responsibility; it is our moral imperative. In the face of societal and political challenges that attempt to divide us, we affirm our unwavering stance:

- Every person—regardless of sexual orientation, gender identity, gender expression, background, disabilities, immigration status, race, faith, culture, or housing situation—deserves to be seen, feel safe, and supported.
- We reject any attempt to undermine dignity, create division, or deny the right to gender-affirming care, HIV prevention and care service delivery, and to be safe in the workplace.

We call on our allies to speak out against the demonization of the TGI2S+ community and remain diligent and committed to actively engaging in policy action that promotes health equity, eliminates barriers, and addresses social determinants of health.

We stand in memoriam of our TGI2S+ community members, siblings, and loved ones who have been lost to hateful acts of violence, police brutality, and HIV/AIDS. We celebrate the strength, joy, and courage of our TGI siblings who remind us that visibility is both a powerful act of resistance and ray of hope.

In solidarity,  
Transgender Caucus of the Los Angeles County Commission on HIV

*If you are interested in joining us in developing a progressive and inclusive agenda to address the disproportionate impact of HIV/STDs within our TGI2S+ communities in Los Angeles County, please contact us at [hivcomm@lachiv.org](mailto:hivcomm@lachiv.org).*



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**TRANSGENDER CAUCUS 2025 MEETING CALENDAR (Updated 8/25/25)**

<b>DATE</b>	<b>KEY AGENDA ITEMS/TOPICS (subject to change; for planning purposes)</b>
<b>Jan. 28, 2025</b> 10am to 11am <b>Virtual</b>	Nominate and elect caucus co-chairs. Meeting frequency review Brainstorm 2025 strategic priorities
<b>Feb. 25, 2025</b> 10am to 11:30am <b>Virtual</b>	COH Overview Caucus Member Expectations for 2025 Review and adopt 2025 strategic priorities
<b>Mar. 25, 2025</b> 10am to 11:30am <b>Virtual</b>	<a href="#">International Transgender Day of Visibility 3/31/25</a>
<b>Apr. 22, 2025</b> 10am to 11:30am <b>Virtual</b>	<a href="#">National Trans HIV Testing Day 4/18/25</a>
<b>May 27, 2025</b> 10am to 11:30am <b>Virtual</b>	Plan for Community Listening Sessions in collaboration with Women's Caucus and Black Caucus
<b>Jun. 24, 2025</b>	<b>Meeting Canceled</b>
<b>Jul. 22, 2025</b>	<b>Meeting Canceled</b>
<b>Aug. 26, 2025</b> 10am to 11:30am <b>Virtual</b>	Review summary reports for Community Listening Sessions
<b>Sep. 23, 2025</b> 10am to 11:30am <b>Virtual</b>	Aging Caucus event on 9/19/25 from 9:30am-3pm at Vermont Corridor. See flyer for more details: <a href="#">"The Power of Aging: Navigating Services in Times of Uncertainties"</a>
<b>Oct. 28, 2025</b> 10am to 11:30am <b>Virtual</b>	<a href="#">LGBTQ+ History Month</a>
<b>Nov. 25, 2025</b>	<b>Meeting Canceled</b> <a href="#">Commission on HIV Annual Conference 11/13/2025</a> <a href="#">Transgender Day of Remembrance 11/20/25</a>
<b>Dec. 23, 2025</b>	<b>Meeting Canceled</b>

## Transgender Caucus 2025 Strategic Priorities | (As of 08-25-25)

**PURPOSE OF THIS DOCUMENT:** To identify activities and priorities the Transgender Caucus will lead and advance throughout 2025

**CRITERIA:** Select activities that 1) represent the core functions of the COH and Caucus, 2) advance the goals of the [2022-2026 Comprehensive HIV Plan \(CHP\)](#), and 3) align with COH staff and member capacities and time commitment.

**CAUCUS RESPONSIBILITIES:** 1) Facilitate dialogue among caucus members, 2) develop caucus voice at the Commission and in the community, 3) provide the caucus perspective on various Commission issues, and 4) cultivate leadership within the caucus membership and consumer community.

#	ACTIVITY	ACTION STEPS	TIMELINE	STATUS
1	<b>Transgender-focused Needs Assessment</b> - <i>Collaborate with the Planning, Priorities and Allocations Committee to develop needs assessment focusing on the needs of Transgender People Living with HIV.</i>	<ol style="list-style-type: none"> <li>1. Identify locations and target populations.</li> <li>2. Develop needs assessment questionnaire(s).</li> <li>3. Analyze results and share findings and recommendations to address the needs of Transgender people living with HIV in LA County.</li> </ol>	Ongoing	<ul style="list-style-type: none"> <li>• <b>COMPLETED:</b> Listening session in collaboration with Women’s Caucus on 6/4/25 from 6pm-8pm at AMAAD Institute.</li> <li>• <b>COMPLETED:</b> Listening session in collaboration with Black Caucus on 7/9/25 from 6pm-8pm at AMAAD Institute.</li> </ul>
2	<b>Policy and Advocacy</b> – <i>Identify and act on opportunities to develop a progressive and inclusive agenda to address the disproportionate impact of HIV/STDs in TGI communities in Los Angeles County.</i>	<ol style="list-style-type: none"> <li>1. Draft statement in response to recent transphobic rhetoric from current administration</li> <li>2. Solicit feedback from caucus</li> <li>3. Send statement to Executive Committee/COH for review and approval</li> <li>4. Post and disseminate</li> </ol>	<b>COMPLETED</b>	COH approved the solidarity statement on 4/10/25. The document is posted on the <a href="#">COH website</a> and available for dissemination.
3	<b>Provide Caucus Perspective</b> - <i>on various Commission/HIV-related issues impacting the Ryan White Program</i>	Provide feedback on relevant Commission on HIV action items and motions including, but not limited to, service standards, priority setting and resource allocation, membership, and recruitment, and needs assessments.	Ongoing	Encourage members to participate in COH standing committee meetings and the full-COH meeting. Invite members to apply to become a commissioner.



## Summary Report: Transgender Women Listening Session

This report highlights the lived experiences and insights of transgender women living with HIV in Los Angeles (LA) County. It focuses on sexual health care access, provider interactions, prevention knowledge, stigma, and systemic barriers. The findings underscore the urgent need for gender-affirming, culturally competent, and holistic services.

### Knowledge & Comfort Discussing Sexual Health

Most participants reported feeling comfortable or very comfortable discussing sexual health with their healthcare providers. Healthcare providers who created safe, judgment-free environments enabled open conversations. Trust and feeling "seen" played a major role in participants engaging in care. A few participants expressed some discomfort when accessing sexual health services, citing internalized fear of judgment or prior bad experiences engaging in care. Common questions or concerns around sexual health included:

- How to practice safe sex with partners.
- Managing HIV disclosure and protection for partners.
- The possibility of maintaining a healthy, fulfilling sex life.
- Emotional support and peer dialogue around living with HIV.

These concerns underscore a desire not just for medical advice but for holistic guidance around intimacy.

### HIV Prevention & Intervention Awareness

Most participants were aware of HIV prevention tools and expressed interest in finding new ways to protect and/or provide them to partners.

Participants had mixed experiences when accessing HIV care services. Some felt seen and cared for when providers proactively offered education and prevention tools for partners. Others reported initial frustration and neglect, especially when focus remained solely on medication without acknowledging concerns around possible interactions with gender-affirming care (hormone therapy), mental health, or partner needs. Participants noted that connecting with LGBTQ+ and trans-specific clinics are vital for feeling respected, informed and empowered.

### Access, Referral & Collaboration

When seeking sexual health care, nearly all participants preferred to go to a trusted healthcare provider or doctor. Peer-led spaces and community clinics were especially valued for offering dignified, affirming, and nonjudgmental care. Several participants reported experiences of discrimination, misgendering, and outright denial of services. These include:

- Refusing care due to being transgender or HIV-positive.



- Humiliating interactions—e.g., being deadnamed in waiting rooms or being falsely judged for lifestyle assumptions.

These experiences led to delays in care, feelings of shame and mental anguish, and loss of trust in the system.

Suggestions to improve access to HIV-related care and support included more trans-led clinics and trans staff, more gender-affirming and culturally competent providers including increased training on understanding the unique health needs of transgender women. Additionally, participants noted that transgender women often face financial hardships, unstable housing or unemployment and suggested increased access to affordable care, expanded Medicaid for all, insurance coverage for gender-affirming treatment and housing/job support.

### **Cultural Responsiveness & Community Trust**

Many participants noted facing implicit and explicit racism, transphobia, and/or stigma, including dehumanizing language and dismissive tone, healthcare providers expressing discomfort or ignorance about treating transgender women, and false assumptions linking HIV status and trans identity to "irresponsible" behavior. These experiences led to many participants feeling unwelcome, ashamed, angry, and invisible. Some participants "brushed off" these experiences, but many were deeply impacted, leading to trauma, isolation, and avoidance of care.

### **Capacity & Support Needs**

Participants expressed the need for services that address the unique needs of transgender women. Specifically, a need for:

- Whole-person care with integrated services addressing mental health, physical health, housing, employment, and food security in one place.
- Peer-led support groups and community education.
- Mental health care and counseling for trauma, gender dysphoria, and stigma.
- Job training and financial support.
- Safe spaces where trans women feel respected and affirmed.

Participants called for comprehensive HIV care system that includes support from medical clinics, community-based organizations and County partners alike including:

- **Inclusive, nonjudgmental, and trauma-informed clinics** that provide respectful and supportive healthcare tailored to the needs of marginalized and underserved populations.
- **Community-based organizations** that offer comprehensive services, including legal assistance, peer support groups, food aid, HIV and STI testing and treatment, and guidance in accessing gender-affirming healthcare and stable housing.



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- **County-level services** that include expanded housing programs, job placement and employment support, and public education initiatives aimed at reducing stigma and discrimination in the community.

Transgender women living with HIV in LA County are clear: they want respectful, comprehensive, and affirming care. The system must evolve beyond clinical access to holistic care and unbiased inclusion. Implementing these recommendations will move LA County toward equity, justice, and compassion for the transgender community.





BLACK CAUCUS COMMUNITY LISTENING SESSIONS

# EXECUTIVE SUMMARY

JULY 9, 2025

“CENTERING THE VOICES OF THE BLACK TRANSGENDER  
COMMUNITY IN LA COUNTY ”

## INTRODUCTION

On July 9, 2025, the Black Caucus of the Los Angeles County Commission on HIV, in partnership with the Transgender Caucus and AMAAD Institute, hosted a community listening session at AMAAD Institute in South Los Angeles, centering Black transgender individuals and their experiences navigating sexual health systems of care. Facilitated by Diamond Paulk, the session explored stigma, access barriers, cultural responsiveness, and the need for affirming, wraparound care models. A total of eight participants attended and received a \$50 Visa gift card, refreshments, and community resources.

## OBJECTIVE

Through community listening sessions focusing on seven key populations identified in the Black Caucus (formerly the Black/African American Community Taskforce [BAAC]) recommendations, we aim to quantify the sexual health needs of Black communities in Los Angeles County. These discussions will guide improvements in HIV prevention and care service delivery, ensuring cultural responsiveness and a comprehensive understanding of the diverse sexual health care needs of our Black communities in Los Angeles County.



## KEY DISCUSSION TAKEAWAYS

**Stigma, Safety, and Structural Discrimination.** Participants shared the harsh reality of navigating systems that often criminalize their identities. Several expressed concern over recent rollbacks in DEI efforts and the chilling effect of national anti-transgender rhetoric. They described being highly selective about the spaces they enter, and how safety is never assumed. This heightened vigilance is a direct result of both anti-Blackness and transphobia.

**Culturally Responsive and Affirming Care.** The need for care that understands and affirms Black transgender identity was a resounding theme. Participants described feeling unseen by providers, misgendered at intake, and dismissed in clinical settings. Many providers, they noted, lack the cultural education and humility necessary to meet their needs with dignity and respect.

Education was called out as grossly lacking in the healthcare system—with a clear consensus that trans-competency, racial equity, and cultural humility must be mandatory components of medical and allied health provider training.

**A One-Stop Hub for Health & Wellness.** There was strong support for the creation of a centralized, comprehensive health and wellness hub—designed by and for Black trans people. Such a space would offer wraparound services including HIV prevention, hormone therapy, mental health support, job readiness training, housing referrals, and spiritual support—all in one location.

**Barriers to Access.** Barriers included being turned away due to mismatched identification, fear of mistreatment, and providers who lacked gender-affirming training. Participants noted that while programs may exist, they are often siloed or unknown within trans communities.

**Spirituality and the Role of the Church.** Faith-based community members acknowledged the need to create inclusive and affirming dialogue within spiritual spaces. One participant noted that while they found support within their own spiritual community, “the church must also be the place where these conversations happen.” Given the church’s centrality in many Black communities, participants emphasized the importance of engaging faith leaders in sexual health and trans advocacy.

**Perspectives from Non-Trans Participants.** Providers and allies in attendance expressed gratitude for the opportunity to listen, learn, and be educated. Several emphasized that understanding culturally appropriate language is a critical first step toward providing responsive and affirming care. They acknowledged the need for deeper training and ongoing relationship-building with trans communities to ensure their services are truly inclusive.

## CONTACT INFO

**EML:** [hivcomm@lachiv.org](mailto:hivcomm@lachiv.org)

**WEB:** <https://hiv.lacounty.gov>

**TEL:** 213.738.2816



## FINDINGS & RECOMMENDATIONS

- **Establish** trans-led wellness hubs with wraparound services.
- **Require** intersectional cultural humility training for providers, including mandatory trans and racial competency curricula.
- **Fund** and **amplify** trans voices in health planning and policy development.
- **Engage** Black faith-based institutions in affirming conversations about gender and sexual health.
- **Expand** community health worker and peer navigator programs led by Black trans individuals.

## CLOSING REFLECTIONS

The session concluded with appreciation for participants' honesty, courage, and willingness to share. The Black Caucus reaffirmed its commitment to uplifting these voices and translating their insights into concrete policy recommendations, systems change, and program investments.

Participants recommended continuing these conversations and hosting a 'Bridging the Gap' collaborative session. This future gathering would invite broader community participation to learn from one another, share experiences, and collectively bridge the gap that too often divides us and fosters stigma.





## Subordinate Working Unit Leadership Meeting Summary

Thursday, August 14, 2025

Attendees: Co-Chairs of Caucuses, Task Forces, and Workgroups

### Overview & Purpose

The meeting was well-attended by leadership from across the Commission's subordinate working units, including caucuses and task forces. Staff opened the session with a brief overview and refresher on the purpose of subordinate working units. As outlined in [Commission policy #08.1102](#), these units serve as extensions of the Commission, helping to fulfill its planning responsibilities by elevating consumer voice, developing recommendations, and supporting work around priorities such as the PSRA process, service standards, recruitment and outreach, the Assessment of the Effectiveness of the Administrative Mechanism (AEAM), and overall HIV service delivery planning in Los Angeles County.

### Brown Act Compliance

Staff informed participants that as part of the guidance from County Counsel in reviewing the proposed changes to the Commission's bylaws, Caucuses are currently out of compliance with the Ralph M. Brown Act due to their standing monthly meeting schedules. Under Commission policy and public meeting laws, only formal legislative bodies—like standing committees—can hold regularly scheduled meetings. All other subordinate units (such as Caucuses and Task Forces) must meet on an as-needed basis to avoid triggering Brown Act requirements.

To address the Brown Act compliance concerns, it was recommended that all future meetings be scheduled on an as-needed basis, from one meeting to the next, rather than following preset or recurring calendars. This approach aligns with the newly introduced [PURGE](#) tool, which helps determine whether a meeting is necessary based on specific criteria. Additionally, it was recommended that staff consult with County Counsel to explore any alternative options or structures that may support compliance while preserving the intent of the working groups.

### Introduction of the PURGE Tool

To assist working units in determining when a meeting is warranted, staff introduced the PURGE tool, which outlines five key criteria that must be met before a meeting is scheduled:



**P – Purpose:** Is there a defined objective or deliverable?

**U – Urgency:** Is the issue time-sensitive and unable to wait?

**R – Readiness:** Are materials and participants prepared, including commitment from at least two Commissioners in good standing?

**G – Goal Alignment:** Does the topic support Commission mandates or planning priorities?

**E – Engagement:** Is there meaningful community or stakeholder participation expected?

The recommendation is that all future meetings meet all five criteria, and that this tool be used to determine and justify each scheduled meeting, helping avoid automatic, standing schedules that can lead to compliance issues.

### **Federal Guidance on DEI Language and Impact on Caucuses**

Staff also shared updates from a recent meeting with the Commission’s HRSA Project Officer, where it was conveyed that under HR-1 and new Executive Orders, language referencing race, gender identity, sexual orientation, and other DEI-related categories must be sanitized from official government documents and planning frameworks.

This directive impacts the structure and naming of existing Caucuses, particularly the Black Caucus and Transgender Caucus, which will need to be reimagined in a way that aligns with federal guidance.

Co-Chairs were asked to share this information with their respective working groups and gather input on creative ways to continue the work in a compliant format. Staff acknowledged that while the structure may change, the core purpose of the Caucuses which is to support and uplift the voices of priority populations—must remain central to Commission planning.

Staff also noted that HRSA will be providing additional guidance on how to continue reflecting and engaging priority populations in planning without conflicting with current federal mandates.

### **Capacity Constraints & Recommendations**

Given the reduction in staff, looming additional budget cuts in PY 36, and the broader Commission restructure, staff emphasized the need for subordinate working units to reimagine their structure and activities. Working groups must align their work with both the current staffing capacity and the intent outlined in Policy #08.1102, which centers on planning, analysis, and supporting Commission



priorities—not simply meeting to plan or host events. Staff encouraged all working units to assess whether their current functions and meeting schedules are responsive to Commission-driven objectives and whether they are sustainable considering available resources. While there was support for increasing working unit independence, several members expressed concerns and cautioned against removing staff support entirely, noting the vital role staff play in ensuring consistency, coordination, and continuity across the Commission’s work.

### **Proposal to Create a Client/Consumer Committee**

One proposal raised during the discussion was to establish a formal Client/Consumer Committee that would function under the Brown Act and explicitly focus on ensuring consumer participation is embedded in all Commission planning processes. However, it was noted that if such a committee is formed, it would be subject to Brown Act requirements, including in-person meetings, quorum, and formal notice provisions.

As part of that recommendation, there was discussion about the potential to sunset the existing affinity-based Caucuses and instead create an umbrella structure that consolidates them while still carving out dedicated planning space for each priority population. Staff acknowledged that the safe space created by these Caucuses has been essential for many community members who do not feel comfortable at the main Commission table.

### **Next Steps**

Participants agreed to bring this information back to their respective working groups to gather feedback and ideas from members. The discussion will continue at the upcoming Executive Committee meeting and in subsequent planning meetings.

Commission staff and leadership remain committed to working collaboratively to ensure that the voices of communities most impacted by HIV remain centered in all aspects of Commission planning, regardless of structural adjustments that may be required moving forward.

**Attachments: [8.14.25 Meeting Packet](#)**



# ***THE POWER OF AGING: NAVIGATING SERVICES IN TIMES OF UNCERTAINTIES***

**September 19, 2025 | 9:30am - 3:00pm**

**Lunch will be provided.**

**Vermont Corridor**

**510 S. Vermont Ave 9<sup>th</sup> Floor, Los Angeles, CA 90020**

**VALIDATED PARKING: 523 SHATTO PL, LA 90020**

**Scan QR code to  
RSVP.**



Questions? Email  
[hivcomm@lachiv.org](mailto:hivcomm@lachiv.org) or  
call 213-738-2816



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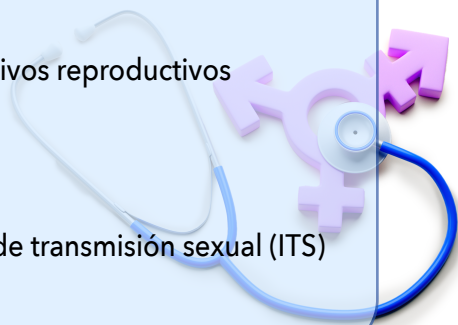
Health Services  
LOS ANGELES COUNTY

# PROGRAMA DE SALUD DE GÉNERO DE LA HEALTH SERVICES

**El Programa de Salud de Género de LA Health Services atiende a pacientes transgénero, no binarios y no conformes con su género, de todas las edades.**

**Los siguientes servicios están disponibles dentro del Programa de Salud de Género:**

- Conversaciones educativas con un proveedor sobre las opciones de atención de afirmación de género
- Terapia hormonal de afirmación de género
- Supresión de la pubertad
- Servicios de salud mental y servicios de apoyo social
- Consejería/educación inclusiva de género sobre salud sexual y objetivos reproductivos
- Acceso a cirugías de afirmación de género
- Depilación
- Terapia de voz
- Detección, tratamiento y prevención (PrEP y PEP) de las infecciones de transmisión sexual (ITS)
- Anticoncepción



**Para más información escanee el código.**

Pacientes actuales de LA Health Services deben hablar con su médico y pedir una referencia para tener acceso a este programa.

LA Health Services siempre está aceptando nuevos pacientes.



Visite [dhs.lacounty.gov/es/patient-information](https://dhs.lacounty.gov/es/patient-information) o llame al **844-804-0055** para más información.

En LA Health Services, entendemos que la atención de afirmación de género es una necesidad médica y vital para el bienestar de nuestros pacientes. Nuestros equipos médicos se comprometen a brindar atención en un ambiente receptivo y respetuoso.

¿Tiene preguntas sobre cobertura de seguro? Llame al **844-804-0055**.



@WeAreLAHealth | @LAHealthEnEspañol





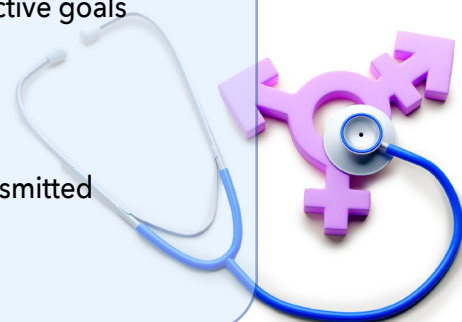
Health Services  
LOS ANGELES COUNTY

# LA HEALTH SERVICES' GENDER HEALTH PROGRAM

The Gender Health Program at LA Health Services sees transgender, nonbinary, and gender-nonconforming patients of all ages.

The following services are available through the Gender Health Program:

- Educational discussions with a provider about options for gender-affirming care
- Gender-affirming hormone therapy
- Puberty suppression
- Mental Health Services and Social support services
- Gender-inclusive counseling/education for sexual health and reproductive goals
- Access to gender-affirming surgery
- Hair removal
- Voice therapy
- Screenings, treatment, and prevention (PrEP and PEP) for sexually transmitted infections (STI)
- Contraception



## Scan the QR code to learn more.

Current LA Health Services patients should speak with their doctor and request a referral to access this program.

LA Health Services is always taking new patients.



Visit [dhs.lacounty.gov/patient-information](https://dhs.lacounty.gov/patient-information) or call **844-804-0055** to learn more.

At LA Health Services we understand that gender-affirming care is a medical necessity and vital to the well-being of our patients. Our medical teams are committed to providing care in a welcoming and respectful environment.

Questions about insurance? Call **844-804-0055**.



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