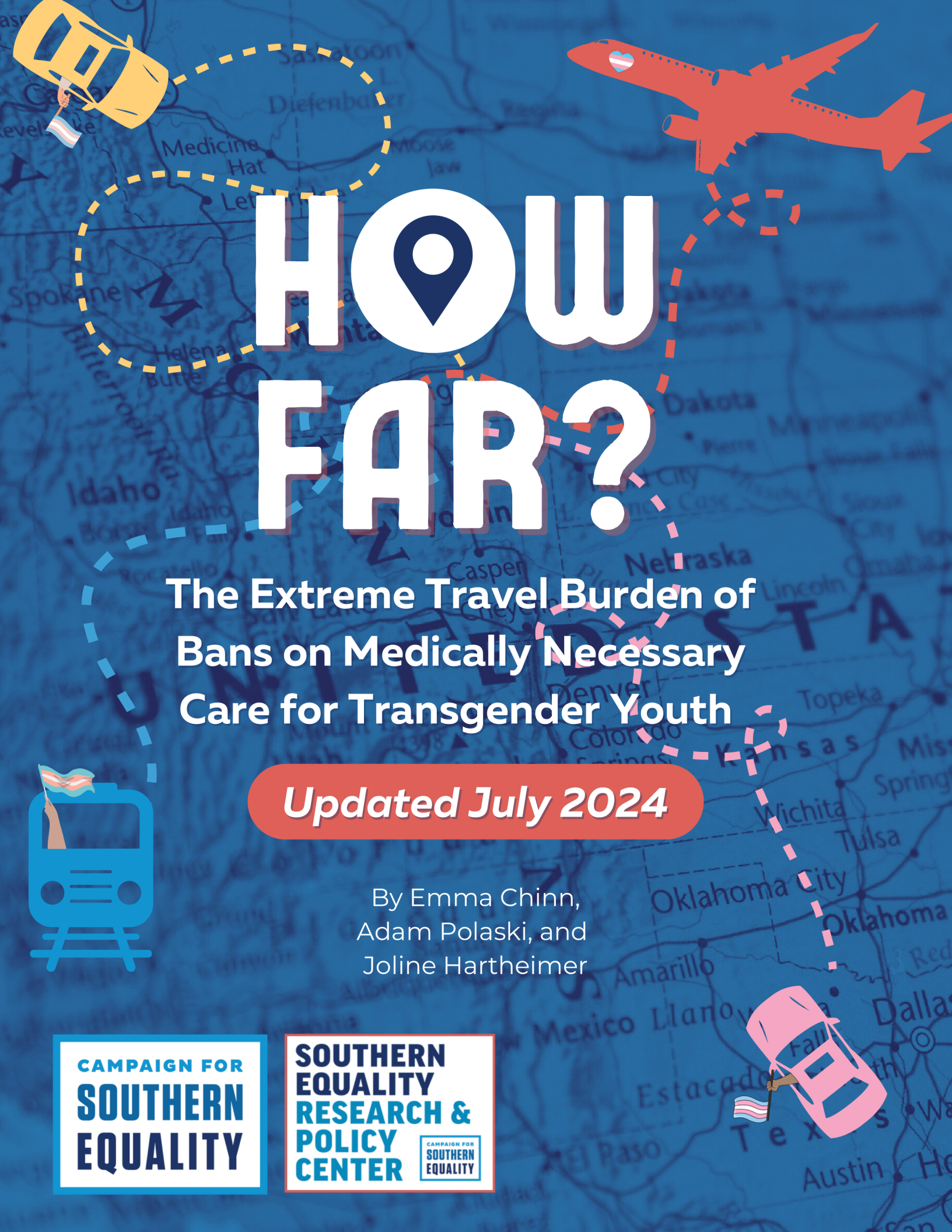


A map of the Southern United States, including parts of Texas, Oklahoma, Kansas, Nebraska, Colorado, and New Mexico, serves as the background. Overlaid on the map are several travel-related icons: a yellow car in the top left, a red airplane in the top right, a blue train in the bottom left, and a pink car in the bottom right. Dashed lines in yellow, red, and blue connect these icons, forming a circular path around the central text. The title 'HOW FAR?' is prominently displayed in the center, with the letter 'O' in 'HOW' replaced by a location pin icon.

HOW FAR?

The Extreme Travel Burden of
Bans on Medically Necessary
Care for Transgender Youth

Updated July 2024

By Emma Chinn,
Adam Polaski, and
Joline Hartheimer

CAMPAIGN FOR
**SOUTHERN
EQUALITY**

**SOUTHERN
EQUALITY
RESEARCH &
POLICY
CENTER**

CAMPAIGN FOR
SOUTHERN
EQUALITY

HOW FAR?

The Extreme Travel Burden of Bans on Medically Necessary Care for Transgender Youth

TABLE OF CONTENTS

<u>Abstract</u>	3	<u>Estimating Financial Burdens</u>	9
<u>Background</u>	4	<u>Illustrating the Impact</u>	11
<u>GIS Mapping & Increased Driving Time</u>	5	<u>Stories from Families</u>	13
<u>Additional Considerations About Travel</u>	7	<u>How to Help & Get Help</u>	14

ABOUT THE CAMPAIGN FOR SOUTHERN EQUALITY

The Campaign for Southern Equality (CSE) is based in Asheville, North Carolina, and works across the South to promote full LGBTQ equality – both legal and lived. Our work is rooted in commitments to empathy and to equity in race, class, and gender. www.southernequality.org.

RECOMMENDED CITATION

Chinn, E., A. Polaski, J. Hartheimer. 2024. “How Far? The Extreme Travel Burden of Bans on Medically Necessary Care for Transgender Youth.” Campaign for Southern Equality: Asheville, NC.

PRESS INQUIRIES

For media and other inquiries, contact Adam Polaski, Communications Director at the Campaign for Southern Equality by email (adam@southernequality.org).



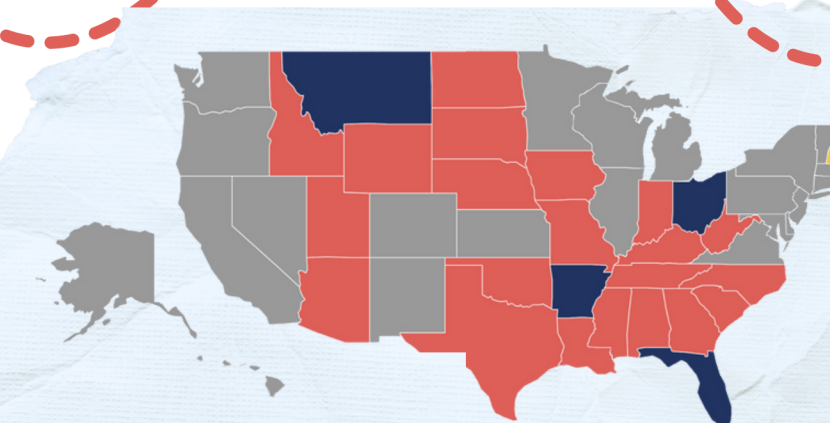
ABSTRACT

Since 2021, 25 states have passed laws that limit or completely prohibit access to lifesaving medical care for transgender youth. As a result, families of transgender youth have been forced to travel increasingly long distances to access medical care for their children, with some families making the difficult decision to move to a state that has preserved access to care. This report draws on the knowledge Campaign for Southern Equality (CSE) staff have gained through launching the Southern Trans Youth Emergency Project (STYEP), a program aimed at supporting the families of transgender youth living under healthcare bans with resources and information to ease the continuation of care for their children. Through STYEP, CSE has built a strong network of gender-affirming care providers in the South and across the country, and our patient navigators have had conversations with more than 500 parents of transgender youth – offering a pathway for their children to continue accessing gender-affirming care, even in the face of oppressive laws.

In the first section of this report, we provide a brief background about the history of gender-affirming care bans and a summary of the Southern Trans Youth Emergency Project. In the next section, we use GIS mapping to illustrate how gender-affirming care bans have significantly increased the driving time required to access gender-affirming care for families in the U.S. South. We also include an additional discussion of factors beyond driving time that make accessing gender-affirming care increasingly difficult for families living in states with bans. Next, we discuss the financial burden of traveling to access gender-affirming care. To showcase the magnitude of the financial burdens, we outline sample budgets for out-of-state trips that are based on the experiences of families that we serve. Finally, we provide narratives illustrating the full impact that traveling, or moving, to access medical care has on families of transgender youth, including not just the time and money spent, but the social and emotional costs. Through this report, we hope to provide an overarching snapshot of the negative impacts that gender-affirming care bans have on transgender youth and their families in the U.S. South and contiguous states.

CURRENT NATIONAL LANDSCAPE

of laws banning or restricting medically necessary health care for transgender youth as of July 1, 2024



KEY: BAN IN EFFECT • SOME PARTS OF BAN ON HOLD BY COURT ORDER, OTHER RESTRICTIONS IN EFFECT • BAN SET TO TAKE EFFECT • BAN UNDER CONSIDERATION • NO BAN

BACKGROUND

In 2021, Arkansas became the first state to pass a ban on medical care for transgender youth, and the following year, Arizona and Alabama followed suit. 2023 saw an avalanche of gender-affirming care bans, with nineteen states passing some form of gender-affirming care ban.¹ Currently, 25 states have passed bans on gender-affirming care, resulting in an estimated 113,900 transgender youth now living in a state where their medical care is banned or limited.²

Gender-affirming care bans differ from state to state – but most ban the provision of puberty-delaying medication, hormone replacement therapy, and surgery for transgender youth. The penalties associated with violating the bans vary from state to state, ranging from taking away providers' medical licenses to felony penalties or even charges of child abuse. Due to ongoing litigation brought by transgender people and advocates in states that have passed bans, not all of the bans that have passed are currently in effect.³

Even prior to the passage of gender-affirming care bans, accessing gender-affirming healthcare was difficult for transgender people due to anti-trans discrimination, inadequate coverage for gender-affirming care in mainstream insurance plans, and a lack of availability of care, especially in geographically isolated, rural areas. Gender-affirming care bans greatly increase the barriers to accessing care. Transgender youth and their families are saddled with the burden of finding an out-of-state provider (many of whom are at or near capacity due to an influx of out-of-state patients), and traveling great distances out-of-state to access care. Many families have even made the decision to completely relocate to a state where gender-affirming care remains legal for their child. In response, CSE, in partnership with state-based advocacy and youth-serving organizations, launched the Southern Trans Youth Emergency Project (STYEP) in March of 2023.

SOUTHERN TRANS YOUTH EMERGENCY PROJECT

STYEP has expanded to include more than twenty partner organizations, and serves families of transgender youth in 15 states (including non-Southern states with bans, such as Missouri, Oklahoma, and Ohio). Through STYEP, families of transgender youth can access \$500 grants to support immediate needs, including travel expenses, medication costs, and mental health or wellness needs. Our patient navigators work one-on-one with families of transgender youth to help them find an out-of-state gender-affirming care provider that works for their unique situation. Further, the STYEP program provides up-to-date information about gender-affirming care bans and their impact in each state through our website, publications, and community “town hall” events, held in partnership with state-based organizations.

**SOUTHERN
TRANS
YOUTH
EMERGENCY
PROJECT**

Learn more at www.southernequality.org/STYEP

Using GIS Mapping to Show **INCREASED DRIVING TIME** to Gender-Affirming Care Clinics Post-Ban

Gender-affirming care bans have caused an exponential increase in the distance families of transgender youth must drive to reach a gender-affirming care appointment. To show the impact that bans have on driving time, we utilized CSE's existing data about gender-affirming care providers. Since 2010, CSE has maintained the *Trans in the South Guide*, a database of transgender-affirming healthcare providers in the South, including gender-affirming care providers. Through launching STYEP, CSE has built a network of gender-affirming care providers in states without gender-affirming care bans across the country, in order to refer families of trans youth to these providers.

Using CSE's data, we performed geospatial analysis using GIS mapping software to show driving times from any given location in the U.S. South and contiguous states (including Alabama, Arkansas, Florida, Georgia, Louisiana, Kentucky, Mississippi, Missouri, North Carolina, Ohio, Oklahoma, South Carolina, Tennessee, Texas, and West Virginia) to the few remaining gender-affirming care clinics in the region, including in access states like New Mexico, Colorado, Kansas, Illinois, Indiana, Michigan, and Pennsylvania. We included only clinics where transgender youth can have in-person appointments, excluding telehealth-only providers. Driving time calculations were performed using the Origin Destination Cost Matrix network analysis tool in ArcGIS Pro 3.0.0. As a proxy for patient home locations, we utilized population-weighted centroids of U.S. census tracts based on the Esri USA 2020 Census Tract boundaries. Side by side, these maps illustrate the extreme travel burden affecting families of transgender youth living in states with gender-affirming care bans.



ABOUT THE TRANS IN THE SOUTH GUIDE

The recent passage of anti-transgender legislation has legally restricted access to care in many states – but the reality is that even without these bans, identifying inclusive, affirming, and competent medical care has long been challenging for transgender people, especially in the South. Since 2010, CSE has published the Trans in the South guide, which currently features nearly 400 providers from across the South – including primary care physicians, mental health providers, lawyers, endocrinologists, HIV care providers, reproductive health experts, and more – who report being trans-affirming. Learn more at www.transinthesouth.org.

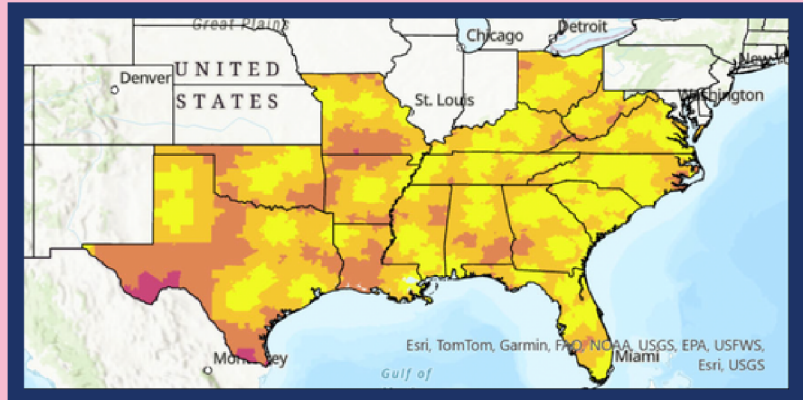


GEOSPATIAL ANALYSIS

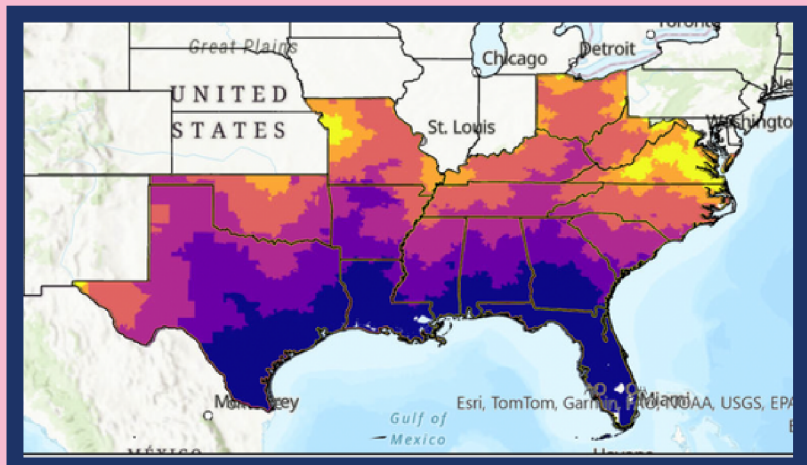
Prior to the passage of gender-affirming care bans, transgender youth living in most parts of the South and contiguous states were within 1 to 4 hours driving time from a gender-affirming care clinic. Since the passage of gender-affirming care bans, driving times have increased exponentially, with transgender youth living in the deep South and rural areas needing to drive upwards of eight hours to reach a gender-affirming care clinic. For families living the cities listed below, which previously had clinics that provided gender-affirming care to trans youth within their borders, travel time has expanded significantly:

- **Houston, TX:** It now takes 8.9 hours (601 miles) of one-way driving time (roundtrip: 17.8 hours, 1,202 miles) to get to a clinic that serves youth.
- **Nashville, TN:** It now takes 3.2 hours (208 miles) of one-way driving time (roundtrip: 6.4 hours, 416 miles) to get to a clinic that serves youth.
- **Jackson, MS:** It now takes 6.3 hours (422 miles) of one-way driving time (roundtrip: 12.6 hours, 844 miles) to get to a clinic that serves youth.
- **Atlanta, GA:** It now takes 6.8 hours (440 miles) of one-way driving time (roundtrip: 13.6 hours, 880 miles) to get to a clinic that serves youth.
- **Greensboro, NC:** It now takes 2.0 hours (100 miles) of one-way driving time (roundtrip: 4.0 hours, 200 miles) to get to a clinic that serves youth.

Estimated Driving Time to Gender-Affirming Care for Trans Youth, January 2023



Estimated Driving Time to Gender-Affirming Care for Trans Youth, July 2024



Driving time calculations were performed using the Origin Destination Cost Matrix network analysis tool in ArcGIS Pro 3.0.0. As a proxy for patient home locations, we utilized population-weighted centroids of U.S. census tracts based on the Esri USA 2020 Census Tract boundaries.⁴ Clinic locations providing youth gender affirming hormone therapy services were determined based our experiences working with patients and their families through the Southern Trans Youth Emergency Project.

ADDITIONAL CONSIDERATIONS

Regarding Travel for Gender-Affirming Care

There are multiple factors beyond driving time that complicate access to gender-affirming care since the passage of gender-affirming care bans. Here, we discuss how ongoing litigation of gender-affirming care bans and nuances in the laws have on access to care.

A Shifting Legal Landscape

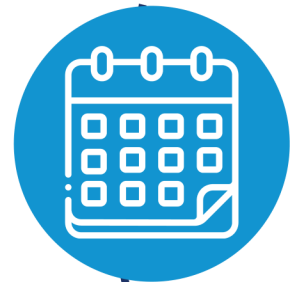
The map on page 3 illustrates bans that have passed and become law; it's important to note that some of the bans are not currently in effect. For example, Florida's ban took effect briefly but its implementation has since been blocked by a federal judge, so some Florida families have been able to continue to see their existing provider and are not currently traveling for care. Sometimes, however, even when a ban is not in effect, providers stop seeing patients – or, in the case of Arkansas, where the 2021 ban has never taken effect, providers have stopped initiating care for new patients, which forces travel for youth who age into care. To learn about bills that are in consideration, you may refer to the [ACLU's 2024 Legislative Tracker](#).⁵ And to see a map showing the current landscape of healthcare access for transgender youth, visit the [Southern Trans Youth Emergency Project](#) page.⁶

Nuances in the Language of the Laws

Some of the laws restricting healthcare access for transgender youth have more limited restrictions on gender-affirming care access and thus, some trans youth in the South are continuing to access care without having to travel. For example, in North Carolina and Georgia, any young person who initiated care prior to the law's enactment has been able to remain in care. In Georgia, the law prohibits hormone therapy, so young people accessing puberty blockers are not forced to travel at this time.

Personal Family Considerations

Families may also consider a range of factors other than driving distance when seeking a new provider, which could increase the distance that they actually travel. This could include how soon they are able to make an appointment, if they have family or loved ones in a specific location, etc. For example, a family in New Orleans may choose to fly to Philadelphia rather than drive 800 miles roundtrip to their closest geographic clinic in Illinois because of other considerations.



ADDITIONAL CONSIDERATIONS

About Travel for Gender-Affirming Care

Telemedicine

This map does not capture the experience of families who are accessing affirming healthcare via a telehealth provider. Anti-transgender healthcare bans require that patients be physically located in the state where their physician is licensed – so travel is still necessary. For these families, travel time may be varied, and change from appointment to appointment; often, families in states with bans drive to the border of a state where a ban is not in effect and have a virtual appointment with a provider, who sends the prescription to a nearby pharmacy in the access state. These drives, however, can still be hundreds of miles and several hours long, as [illustrated by this article](#) in *The Washington Post* featuring a Mississippi family.⁷

Research suggests that telemedicine is not the preferred mode of long-term healthcare among many trans youth and young adults,⁸ due partially but not limited to issues of privacy and confidentiality.⁹ However, in this challenging care landscape, telemedicine can be helpful in shortening travel times for some families, and has been shown to reduce no-show rates for gender-affirming care appointments among trans youth and adolescents.¹⁰

Many Families Are Choosing Air Travel

Of course, for many families, flying is often a more affordable and realistic option than driving. In these situations, the time, expense, and logistics of accessing care increase considerably. In CSE's conversations with families, we are anecdotally hearing that most families (approximately 90%) from states surrounded by other states with bans, such as Texas, Mississippi, Louisiana, and Alabama, are choosing to fly to access care rather than drive. In other states, such as Tennessee, North Carolina, and Georgia, families are mostly driving. CSE's Southern Trans Youth Emergency Project partners closely with [Elevated Access](#), a nonprofit organization that coordinates and pays for flights (with volunteer independent pilots and some commercial options) for people forced to travel for abortion care or gender-affirming care.



ESTIMATING FINANCIAL BURDENS

Resulting from Bans on Gender-Affirming Care

To get a sense of the financial impact that bans on gender-affirming care have on families, we estimated typical expenses that arise on a family's journey:



Gas & Vehicle Costs

The 2024 standard mileage rate for transportation or travel expenses set by the Internal Revenue Service (IRS) is 67 cents per mile.¹¹ Using that standard mileage rate, we can estimate families' car travel expenses for a round-trip journey. For example:

- Memphis, TN to Carbondale, IL – \$285 round-trip (426 miles)
- Columbus, GA to Carbondale, IL – \$739 round-trip (1,104 miles)
- Durham, NC to Richmond, VA – \$201 round-trip (714 miles)



Overnight Expenses

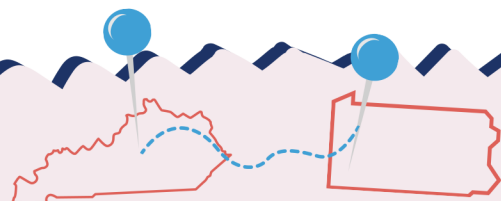
After a long drive or a flight, many families have to stay overnight to make their appointments possible. In 2023, the average of the cheapest available double room in 50 U.S. cities was \$167 per night.¹² Those costs, of course, can increase in more expensive cities – for example, here is the average cost of the same type of room in popular destinations for gender-affirming care:

- Boston, MA – \$303
- Albuquerque, NM – \$233
- Pittsburgh, PA – \$197



Meals

A family on the road has to eat – and even if folks eat economical fast food as their meals, the median cost of a burger and fries in the United States is around \$11.¹³ If a young person is traveling with their parent and eating twice a day on a two-day journey, even if they are exclusively eating fast food, the cost is still \$88.



Receipt for a Sample Itinerary

Driving from Louisville, KY
to Pittsburgh, PA

Gas and Mileage **\$519.92**

*Based on the IRS standard mileage
rate for a 776-mile trip*

Hotel Room in
Pittsburgh **\$215.00**

*Based on Kayak.com's average nightly price
of a 3-star hotel in Pittsburgh in May 2024*

Meals for 2 **\$88.00**
People for 2
Days

Total: \$822.92



Airfare

An economist from Hopper estimated that the national average cost of a round-trip domestic flight in the United States in February 2024 was \$276. Since youth must travel with their parent, this means that journeys to access gender-affirming care require at least two tickets, bumping the average roundtrip cost of airfare to \$552. CSE partners with Elevated Access, which is often able to pilot passengers at no cost to access the healthcare they need.



Ground Transportation at Destination

Families who fly to access gender-affirming care typically rent a car or use rideshare services like Uber or Lyft to navigate their destination city.



Childcare

Many parents of transgender children have other children – and often, a journey to access gender-affirming care may lead to a need for childcare. In the United States, the average cost of one day of daycare for one young child is \$58.60, and the average cost of an after-school sitter for one child is around the same – \$58.40. This does not take into account the labor of identifying a childcare provider or cobbling together care from loved ones and others in a family's network.



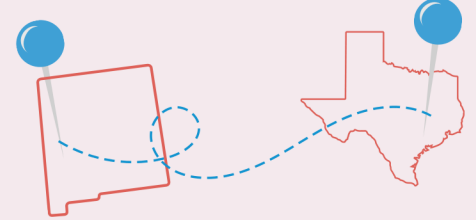
Initiation of New Medical Care

The bans on gender-affirming care for transgender young people often result in complications when it comes to insurance coverage for that care – if the insurance is state-specific, for example, or if the new provider is out-of-network or does not accept insurance at all. Initiation of new care can also be an additional cost.



Time Off Work and School

In addition to these costs are barriers that are harder to estimate – including missed school for the child and missed work or other obligations for the parents. When you consider that youth patients must see a provider three to four times per year, the costs balloon considerably.



Receipt for a Sample Itinerary

Flying from Austin, TX to Albuquerque, NM

Roundtrip Airfare \$560.00

Based on a March 2023 search for a 5/5 departure date and 5/6 return using Kayak.com's "Best" flight function (which takes into consideration duration, price, and the number of stops), two tickets

Hotel Room \$167.00

Based on Kayak.com's average nightly price of a 3-star hotel in Albuquerque, in May

**Meals for 2 People \$88.00
for 2 Days**

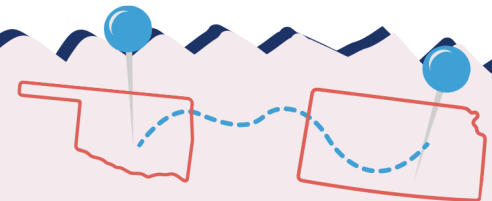
Rental Car \$52.00

Based on Kayak.com search for a 24-hour rental

**Parking at Austin \$24.00
Airport**

Total:

\$891.00



Receipt for a Sample Itinerary

Driving from Oklahoma City, OK to Wichita, KS

Gas and Mileage \$215.37

Based on the IRS standard mileage rate for a 322-mile trip

Childcare \$58.40

After-school sitter for other child at home

**Meals for 2
People for 1 Day \$44.00**

Total:

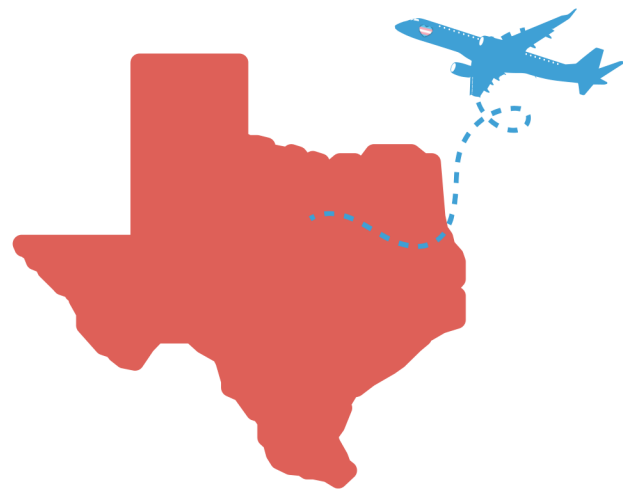
\$318.14

ILLUSTRATING THE IMPACT

Of Bans on Gender-Affirming Care

Stories from Texas

In Texas, the law banning gender-affirming care for transgender youth went into effect on September 1st, 2023,¹⁴ with many clinics stopping care for transgender youth as soon as the bill was passed in June.¹⁵ For the estimated 29,800 transgender youth living in Texas,¹⁶ access to life-saving medical care now required leaving the state, which is a challenging task in a large and sprawling state like Texas. To make matters worse, Texas' major population centers in the eastern part of the state are bordered almost entirely by other states with gender affirming care bans.



But losing access to this lifesaving healthcare was simply not an option for many families of trans youth. Some families are choosing to travel out of state for appointments on a regular basis, which is difficult and expensive. A family living in Houston, Texas would have to travel 885 miles to the nearest clinic in Albuquerque, New Mexico; that's a 13-hour drive or 2-hour flight. These trips have to be taken every three to four months to check-in with the provider and renew prescriptions. Prescriptions also have to be filled out-of-state, because Texas, and most states that have banned gender-affirming care, also prohibit pharmacies from filling prescriptions for puberty-delaying medications and hormones for youth. The cost of care can be incredibly expensive, as many forms of insurance do not cover gender-affirming care, or they do not cover out-of-state healthcare.

Some Texas families, especially those whose transgender children are younger, felt they had no other choice but to relocate to a state where gender-affirming care remains legal. And while it may be the most practical option for some, it comes with incredible sacrifice. Families who move uproot their entire lives, saying goodbye to family members and friends, pulling their children out of school, and leaving good jobs.

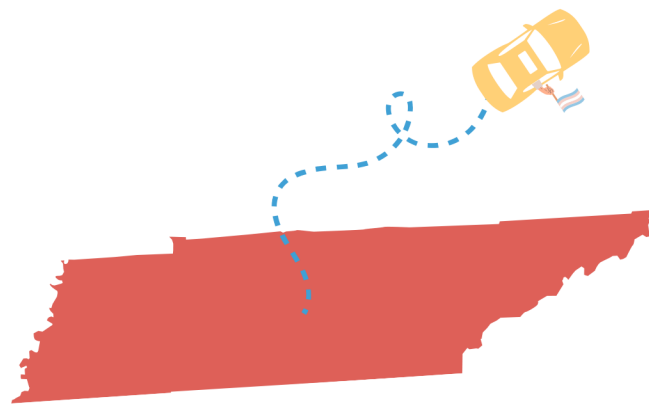
For some families, one parent cannot afford to give up their job, and must stay behind in Texas to continue supporting the family financially until they can find a job in the new home state. Family separation adds an additional layer of emotional stress, and also means that the family must pay rent or a mortgage for two homes instead of one. Further, the cost of moving across state lines can be enormous. Flights, a moving van, gas, fees for breaking a lease, rental deposits, and new clothes for a different climate are just some of the expenses associated with a big move.

ILLUSTRATING THE IMPACT

Of Bans on Gender-Affirming Care

Stories from Tennessee

Tennessee was one of the first states to pass a gender-affirming care ban in February of 2023, and it took effect in July of 2023. The ban included a provision allowing youth already receiving care to remain in care until March 31, 2024. However, the majority of major clinics stopped providing care to youth immediately after the bill's passage. This left parents of transgender youth scrambling to find healthcare for their children.



One provider in Memphis continued to see patients up until the March 31 deadline, and so many patients from West and Middle Tennessee flocked to this provider as a short-term solution – although the clinic only served people 16 years and older, leading to further travel distances for many families.

Some East Tennessee families established care with providers just over the mountains in Asheville, North Carolina, where it was believed that gender-affirming care for youth would remain legal. Tragically, however, North Carolina was not immune from the wave of anti-transgender attacks and passed a law banning the initiation of gender-affirming care in August of 2023. This meant that patients who already established care with a North Carolina provider could remain in care, but no new patients could start care after the ban passed. Similarly, many Tennessee families established care at clinics in Ohio after the Tennessee ban went into effect – but in January of 2024, Ohio passed a law prohibiting access for youth; the law allows Ohio residents who had already initiated care prior to late April 2024 to remain in care, but it explicitly denies this exemption for out-of-state youth, forcing many families from Tennessee, Kentucky, Indiana, and more to travel even further for care.

Some Tennessee families today have made the choice to move to a state where their child will have access to gender-affirming care for the foreseeable future, like Illinois or Minnesota. Others travel regularly to an out-of-state clinic or cross into a state where gender-affirming care is legal to have a telehealth appointment. A family from Nashville may make the three hour drive to Carbondale, Illinois, if their child is over the age of 16, one of the requirements of that clinic. A family from Knoxville may drive two hours to Bristol, a city that sits on the Tennessee/Virginia border, to take a telehealth appointment with a gender-affirming care provider in Virginia where it is legal to do so.

All of the options are onerous – but most families will do anything to support their child and get them the care that they need.

STORIES FROM FAMILIES

in states that ban healthcare for transgender youth

"My daughter is deeply affected every time her care is impacted. She said on the drive that having to go to another state – one that is even more conservative than our own – was humiliating and scary. It was incredibly stressful to have to stop at gas stations and rest stops not knowing if anyone would comment on what bathrooms we were using. The whole trip was fairly miserable, even though we were relieved to know we could continue her care, because of how all these things built up."

– Parent of a Trans Youth in Oklahoma

"When our state legislature passed HB1125 and we learned of the extreme cost of care in a neighboring state, we were devastated and weren't sure where to turn. We knew that NOT getting care for our daughter wasn't an option, and neither was bankrupting our family. Thankfully, I participated on a community call with several helpful folks in our state, including representatives for Campaign for Southern Equality. After the bill was passed, CSE reached out with resources and information. They not only helped us find safe, reputable care but helped our family receive a grant that will help cover some of our daughter's medical costs. It's not easy living where we do, and we have considered leaving, but my daughter wants to stay in her school, and near her family and friends. Organizations like CSE make that possible for families like ours. We are grateful to know that there is a community that is here for us."

– Parent of a Trans Youth in Mississippi

"When the Texas healthcare ban passed we were thrown into logistical chaos – our appointment in Texas canceled, and then our appointment for a provider in Louisiana canceled when their ban passed. Our family needed help navigating which states were still allowing gender-affirming care and how to find a physician who would treat my daughter. The Southern Trans Youth Emergency Project helped us identify a provider in Albuquerque and their grant covered our flight from Austin to Albuquerque. We had additional expenses on top of that – including a hotel for the night and car rental, and the out-of-pocket costs of her medicine, which is not covered by our insurance. I was grateful for the help but furious that all of these expensive hurdles are required just to get the care that my child needs."

– Parent of a Trans Youth in Texas

"I reached out to the Campaign for Southern Equality and applied for the assistance, and not only got approved, but was connected to the closest out-of-state providers, and other resources that can help with out-of-state travel. Another main reason I had to reach out, is because we are very limited on funds, and have to make difficult decisions deciding between housing, bills, foods, or weather-safe clothing, and I was unable to financially compensate for the out-of-state care, travel, or stay, that would be needed to facilitate a legitimate statement from a care provider, to get my son's legal name and gender marker changed. Having the help we received meant the world to me and my son, and the rest of my chosen family who are loving and supportive of my trans son."

– Parent of a Trans Youth in Texas

HOW TO HELP + GET HELP

Resources and Action Steps to Support Trans Youth

For Transgender Youth and Their Families Who Need Support

The Southern Trans Youth Emergency Project (STYEP) provides rapid response support directly to the families of youth who are impacted by anti-transgender healthcare bans in the South. Through STYEP, and in close partnership with state and local organizations, we are providing grants, patient navigation support, and accurate, localized resources to impacted families to ensure that youth can access the care they need and deserve, even in the face of oppressive laws.

Emergency Grants

Families of trans youth can receive grants of \$500 to support immediate needs, including travel expenses, medication costs, and mental health or wellness needs. Families of transgender youth can request a grant by going to www.southernequality.org/styep, [finding their state](#), and filling out [the form](#) at the bottom of the page.

Patient Navigation

We help families understand their options for continuing care in other Southern states or states contiguous to the South, including referrals to medical providers in the regional network CSE has worked to cultivate. Families of transgender youth can connect with a patient navigator by going to <https://southernequality.org/styep>, [finding their state](#), and filling out the form at the bottom of the page.

Resource Guides

For each state in which STYEP operates, we have drafted a local resource guide in collaboration with state partners. Families of transgender youth can find their state's resource guide by going to www.southernequality.org/styep, [finding their state](#), and clicking "Read the Guide."

For Allies Who Want to Support Transgender Youth

There are plenty of ways allies of transgender youth can provide support, including getting involved with or donating to local advocacy groups, donating to the Southern Trans Youth Emergency Project (STYEP), or hosting a fundraiser.

Get Involved with Local Organizations

In every state where gender-affirming care bans are being proposed and passed, there are local organizations working to fight these laws and provide support to transgender youth. The STYEP website provides a list of every local organization partnering with CSE on the program, but this is just the start. We encourage you to research and get involved with local organizations in your state.

Donate to the Southern Trans Youth Emergency Project

This work to support transgender youth would not be possible without our amazing donors. To donate to STYEP go to www.southernequality.org/supporttransyouth.

ENDNOTES

1. Healthcare Laws and Policies: Bans on Best Practice Medical Care for Transgender Youth. Movement Advancement Project. (2023). Retrieved March 12, 2024 from https://www.lgbtmap.org/equality-maps/healthcare/youth_medical_care_bans
2. .More than 90 percent of transgender youth live in states that have proposed or passed laws restricting their rights. UCLA School of Law Williams Institute. (2024). Retrieved June 14, 2024 from williamsinstitute.law.ucla.edu/press/anti-trans-leg-youth-press-release/
3. Landscape: Access to Best-Practice Medical Care for Transgender Youth. Campaign for Southern Equality. (2023). Retrieved January 14, 2024 from <https://southernequality.org/styep/>.
4. USA_Census_Tracts (FeatureServer). (2020). Arcgis.com. https://services.arcgis.com/P3ePLMYs2RVChkJx/arcgis/rest/services/USA_Census_Tracts/FeatureServer
5. American Civil Liberties Union. *Mapping Attacks on LGBTQ Rights*. Available from: <https://www.aclu.org/legislative-attacks-on-lgbtq-rights-2024>. Accessed Mar 12, 2024.
6. Campaign for Southern Equality. *Southern Trans Youth Emergency Project*. Available from: www.southernequality.org/styep. Accessed Mar 12, 2024.
7. Parks, C. (2023, July 28). A Mississippi mother drove 8 hours for her trans son's hormone shots. Washington Post; The Washington Post. <https://www.washingtonpost.com/dc-md-vb/interactive/2023/mississippi-youth-transgender-care-ban-aftermath/>
8. Roden, R. C., Billman, M. G., Mullin, R., Francesco, A., & Essayli, J. H. (2023). Rural Location of Residence is Not Associated With Use of Telemedicine for Initial Medical Contact for Gender-Related Healthcare. *The Journal of adolescent health : official publication of the Society for Adolescent Medicine*, 73(5), 940–945. <https://doi.org/10.1016/j.jadohealth.2023.06.027>
9. Inwards-Breland, D. J., Yeh, D., Marinkovic, M., Richardson, T. R., Marino-Kibbee, B., Bayley, A., & Rhee, K. E. (2024). Facilitators and barriers to using telemedicine for gender-affirming care in gender-diverse youth: A qualitative study. *Journal of telemedicine and telecare*, 1357633X241231015. Advance online publication. <https://doi.org/10.1177/1357633X241231015>
10. DeGuzman, P. B., Lyons, G. R., Azar, F. N., Kimble, A., Huang, G., Rheuban, K., & Gray, S. H. (2024). Impact of Telemedicine on Access to Care for Rural Transgender and Gender-Diverse Youth. *The Journal of pediatrics*, 267, 113911. Advance online publication. <https://doi.org/10.1016/j.jpeds.2024.113911>
11. IRS issues standard mileage rates for 2024; mileage rate increases to 67 cents a mile, up 1.5 cents from 2023 | Internal Revenue Service. (2024). [irs.gov](https://www.irs.gov/newsroom/irs-issues-standard-mileage-rates-for-2024-mileage-rate-increases-to-67-cents-a-mile-up-1-point-5-cents-from-2023). <https://www.irs.gov/newsroom/irs-issues-standard-mileage-rates-for-2024-mileage-rate-increases-to-67-cents-a-mile-up-1-point-5-cents-from-2023>
12. A comparison of Hotel Rates in 50 cities in the United States - 2023. (2023). Cheaphotels.org. <https://www.cheaphotels.org/press/cities23.html>
13. Pomranz, M. (2022, October 26). How Much Does Fast Food Cost Around the Country? Yahoo Sports; Yahoo Sports. <https://sports.yahoo.com/much-does-fast-food-cost-163854325.html>
14. Vertuno,, J. (2023, August 31). Texas high court allows law banning gender-affirming care for transgender minors to take effect. AP News; AP News. <https://apnews.com/article/transgender-care-texas-minors-302e7a15c0442ce3eee6aacdcdf02b80>
15. Melhado, W. (2023, July 17). Texas ban on trans care for kids spurs doctors' fears for patients. The Texas Tribune; The Texas Tribune. <https://www.texastribune.org/2023/07/17/texas-gender-affirming-care-doctors-hospitals/>
16. Herman, J.L., Flores, A.R., O'Neill, K.K. (2022). How Many Adults and Youth Identify as Transgender in the United States? The Williams Institute, UCLA School of Law