

Universal Design

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FORGE is often asked why agencies should spend time trying to revise policies and procedures to better meet the needs of transgender people, when such a small percentage (approximately 1%) of the population is transgender/gender non-conforming. There is, of course, a moral imperative behind this work:

Transgender people experience higher rates of abuse and assault than do many other subpopulations, and experience substantial barriers to accessing services.

Due to this combination of high victimization rates and equally high barriers, it is critical for service providers to take steps to create accessible services to this highly-impacted population. In addition to the importance of specifically striving to serve marginalized populations (e.g. transgender survivors), by implementing "universal design" principles, agencies will be more accessible to all clients and survivors.

The phrase "universal design" may sound familiar: it is a term borrowed from the disability movement. **The University of Minnesota Duluth defines universal design as "Designing for the largest audience possible regardless of disability or ability. This is a process rather than an end in itself."** This concept can be applied to building new or renovating existing buildings to make them accessible to people living with mobility disabilities, which, in turn creates facilities that serve many building users better. For example, the ramp outside a structure leading to its door may have been designed to make the building accessible to people using wheelchairs, but it also makes the building more accessible to the parent pushing a stroller and the delivery person with a loaded handcart. Similarly, the replacement of door knobs with lever door handles helps not just the person whose arthritis makes it too difficult to grip and turn a knob, but also makes opening doors easier for those holding packages or trying to reach a sink to wash dirtied hands.



CREATIVE COMMONS

FORGE believes that a similar principle operates when it comes to designing (or reworking) social services: Designing a service system to adequately meet the needs of the most marginalized or most unique clients will automatically improve accessibility for a wide range of clients. A practical example is bathrooms. FORGE frequently recommends that agencies re-label single-user restrooms (previously marked as "men" or "women") to "unisex" or "gender neutral." This low-cost modification allows transgender and gender non-conforming people to safely and comfortably use the restroom without concerns or confrontation. Other clients will benefit from this modification, too, including parents with "opposite sex" children, adults living with disabilities who are accompanied by caregivers, and those who have urgent needs but aren't sure what to do when "their" gender's bathroom is already occupied.

Consider another example. In a 2011 FORGE survey of transgender individuals which included questions about why they might not access services for crime survivors, “cost” was frequently listed as a barrier, even when this service was typically provided at no cost. In this example, transgender people were focused on their own limited income and were unaware of which services were free. Many service providers, on the other hand, sometimes believe that “everyone knows” their services are free, so don’t highlight cost in their outreach and advertising. If transgender people are unaware that specific services are free, it is highly likely that non-transgender people will not know, either. In this example, an agency may reach and serve many more clients—transgender and non-transgender—by overtly stating that services are free to all clients.

In just the first four fact sheets in this series that we have issued so far, we have given several examples of suggested policies or practices to better meet the needs of transgender people that will also well-serve your non-transgender clients:

The terms paradox teaches us that both transgender and non-transgender clients may define familiar terms in unfamiliar ways. As a result, using the terms clients use conveys that you have been listening and respect their choices, but may tell you almost none of what you need to know to provide appropriate services or have respectful, meaningful interactions.

Correcting, changing, or invalidating a client’s language—whether that client is transgender or not—can:

- Shut down communication
- Discourage a client from seeking additional services
- Cause emotional distress
- Re-victimize a client who has already experienced a profound lack of respect.

The concept of master status reminds us that knowing one or two facts about a person—transgender status, abuse history, or any other trait—is only a small piece of who they are. Asking questions, paying attention to a person’s explanation of what is important to them, and not presuming causality will better ensure that your clients receive the care they need.

Knowing how you will use the answer to a question and telling your client that before you ask the question (“Know and Tell Why”) helps build rapport with transgender clients whose previous experience may make them particularly wary of potentially inappropriate or invasive questions. However, using this know-and-tell-why practice universally gives (all) survivors a better sense of control over what is happening to them and conveys a healing sense that you respect them and their choices.

The University of Minnesota Duluth’s definition of universal design tells us that when buildings and services are designed for the largest audience possible, the result is quite simple: more people are served in accessible and respectful ways. The second part of their definition—“this is a process rather than an end in itself”—reminds us that becoming aware of clients’ needs is a continual process. We need to recognize that every newly-developed or—revised service should take everyone’s access into consideration. Ideally, we should all be looking for opportunities to improve existing services, policies, and practices of working with clients in ways that allow everyone equal access the care they need and deserve.