Finding the Right Fit: Disparities Between Cisgender and Transgender Women Arrested for Prostitution in Baltimore

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This article highlights gender in Baltimore's court-affiliated prostitution diversion program. Administrative data were gathered over a 19-month period from 616 defendants charged with prostitution in Baltimore City. Using logistic regression, gender was a statistically significant predictor for defendants' history of substance abuse history or mental illness. Transgender defendants were 81% less likely to report substance abuse ($p < .001$) and 75% less likely to report mental health problems ($p < .001$) compared to cisgender defendants. Qualitative findings indicate that transgender participants often engage in prostitution due to discrimination and that current programming provides them with some useful assistance. Recommendations include a need to more appropriately tailor services to the experiences and goals of transgender participants and to combat stigma within and outside the court. Programs must be cognizant of discrimination faced by transgender program participants that may impact the range of options available to them during and after participation.

The Baltimore City Specialized Pretrial Diversion (SPD) program[1] was implemented in August 2009 as a response to public concern with street level prostitution in certain neighborhoods of the city (Anderson, 2007; Peirce,

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[1]The program was originally called the Specialized Prostitution Diversion Program but program staff changed the name as some participants did not want be identified with a program specifically targeted and named for those engaging in prostitution due to stigma.

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2008; Shdaimah, Kaufman, Bright, & Flower, 2014). Led by the State's Attorney's Office, a stakeholder group was formed in 2007 to discuss a pilot court program that would decrease the presence of sex workers on city streets (Shdaimah, 2010). The result was a 90-day diversion program for defendants arrested for prostitution. Eligible defendants who accept the diversion program meet weekly with a social worker on self-identified goals in the hopes of addressing the circumstances that led to defendants' choice to engage in prostitution. Defendants are then referred to community services in which they are required to participate as a condition of the program. Initially, little demographic information was known about the population arrested for prostitution or what services they would request from the SPD. This mixed method study was designed to explore these questions using a combination of self-reported administrative data recorded by program staff, interviews, and observations. In this article, we report on the data regarding transgender program participants.

PROSTITUTION AND TRANSGENDER SEX WORKERS

All state governments in the United States, except for Nevada, prohibit prostitution (Eskow, 2010). The sale of sex for money is a misdemeanor in Maryland and holds a penalty of up to a year's incarceration and up to a $500 fine (*Maryland Criminal Law Code §11-306*, 2014). Those who purchase and organize the sale of sex are also punished. Although it is nested within the criminal justice system, the SPD sought to provide a more empathic and rehabilitative alternative to fines or jail time through recognition of some of the harsh circumstances that people engaged in survival prostitution have faced in their past, their home life, or on the job (Oselin, 2014). Like many of the problem solving justice efforts that are based in principles of therapeutic justice (Winick & Wexler, 2003; Wolf, 2007), the SPD creators believed that assistance and encouragement, combined by the threat of criminal sanction, would be more likely to result in long-term desistance from prostitution (Shdaimah, 2010).

Many cisgender[2] women arrested for prostitution in Baltimore City describe a combination of poverty, addiction, and mental health problems often associated with trauma (Authors, 2014; Wiechelt & Shdaimah, 2011). However, it is not clear that the same is true for transgender women arrested for prostitution, who may have different motivations for pursuing sex work. The overwhelming majority of research focuses on women engaged in street prostitution, and it often fails to appreciate the different motivations, work

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[2]The term "cisgender" refers to someone whose assigned gender matches her gender identity, whereas we use the term transgender to refer to women whose assigned gender does not match their gender identity and expression who comprise the overwhelming majority of our transgender study participants. However, we acknowledge that the term "transgender" is also used to apply to a much broader spectrum of identities (Beemyn & Rankin, 2011).

climate, and challenges faced by different types of workers in a variety of set-
tings (Sanders, O'Neill, & Pitcher, 2009; Weitzer, 2009). There is little study of
sex work by transgender persons although they have been identified as a
growing segment of the sex worker population (Smith & Laing, 2012;
Weitzer, 2007). The few existing studies point to important differences that
should be acknowledged in any policy approach toward prostitution, and
one of these is gender. The authors of a systematic review of the correlates
of violence against sex workers identified research on transgender and male
sex workers as a key gap in the literature (Deering et al., 2014).

   The first national survey of transgender individuals, which included a
sample of over 6,450 respondents from across the United States, showed
shockingly high rates of harassment and discrimination in all facets of life,
including within their own family, school, employment, health care, housing,
public accommodations, and in encounters with police and the criminal jus-
tice system (Grant, Mottet, & Min, 2011). Racial and ethnic minorities fared
worse than White transgender individuals, with African Americans faring
the worst due to the compounded gender and racial discrimination that they
faced. In a nationally representative study, Beemyn & Rankin (2011) found
that transgender individuals are four times more likely to be living in extreme
poverty than the general public. Nineteen percent of their respondents had
been denied housing and 11% had been evicted on the basis of their gender,
with 19% experiencing homelessness in their lives. They also found high
rates of harassment in homeless shelters (55%); this included sexual assaults
by staff or other residents (22%) and being turned away from the shelter
(29%). Much of the limited data on transgender sex workers suggest that, like
the transgender population more generally, they are subject to heightened
harassment, violence, and discrimination from communities and from police
(Deering et al., 2014; Edelman, 2011; Nichols, 2010; Strangio, forthcoming)

   One Australian study (Harcourt, van Beek, Heslop, McMahon, &
Donovan, 2001) found a lack of appropriately tailored health services for
transgender sex workers. Differences have been found between genders
regarding sexual satisfaction for persons engaging in commercial sex work.
Transgender sex workers are more likely than cisgender women, but less
likely than cisgender men, to say they enjoy their sexual experiences with cus-
tomers (Weinberg, Shaver, & Williams, 1999). A Brazilian study also reported
that transgender workers had substantial satisfaction in their sexual relations
with clients; moreover, prostitution was the only sphere of life that fostered
positive self-images for study respondents. Prostitution gave them a "sense
of personal worth, self-confidence, and self-esteem" (Kulick, 1998), a senti-
ment that was echoed in a qualitative study conducted in San Diego (Dixon
& Dixon, 1998). Like others who choose sex work as their best (or only)
option to obtain money, one study of transgender sex workers in Israel used
sex work to help finance sexual transformation (Leichtentritt & Davidson-
Arad, 2004).

STUDY SITE: BALTIMORE'S SPECIALIZED PRETRIAL DIVERSION PROGRAM (SPD)

When the Baltimore SPD was developed, little was known about the demographics of potential participants, or what programs or services program participants would seek or be deemed appropriate by program staff (Shdaimah, 2010). General program rules are the same for all participants, but mandated services and activities are tailored to individual needs to the extent possible. At the time of the study, the SPD was offered to individuals arrested for prostitution who have not committed a violent crime and who are not on parole or probation. Those who opt into the SPD are removed from the court process prior to responding to their charges and are given a court date 90 days later. Successful graduates have their charges null processed and these can then be expunged from their record. Those who do not successfully complete the project return to court on the new plea date, and their case proceeds from that point without prejudice. SPD participants meet weekly with a social worker to develop and work on self-identified goals that are designed to alleviate the circumstances that led them to engage in prostitution. All SPD participants are required to submit to initial urinalysis for substance abuse and assessment by an addiction specialist. Participants are monitored by court personnel on a weekly basis for urinalysis, changes in contact information, and any new arrests.

Preliminary findings from a recent study examining the impact of completing the Baltimore SPD on recidivism found that the odds of total recidivist arrests were significantly lower among people who completed the SPD program compared to those who failed to complete the program (Reh, 2015). This finding held even after controlling for the higher number of prior arrests amongst the failed group.

METHODS

This study uses a mixed methods approach. Mixed methods is more than simply collecting qualitative data from interviews, or collecting multiple forms of qualitative evidence (e.g., observations and interviews) or multiple types of quantitative evidence (e.g., surveys and diagnostic tests). It involves the intentional collection of both quantitative and qualitative data and the combination of the strengths of each to answer research questions (Creswell, Klassen, Plano Clark, & Smith, 2011). This study involved concurrent collection and analysis of quantitative and qualitative data. Although the administrative data provided us with general description of study participants (i.e., gender, age, race/ethnicity, education levels) and their self-reported concerns (i.e., mental health, substance use), the qualitative data ($n = 21$) elicited participants' experiences in the program and what they hoped to gain from

participation. The authors have provided a general overview of the study findings elsewhere (Shdaimah & Bailey-Kloch, 2014).

This article examines findings that pertain specifically to transgender women. When findings from the quantitative analysis revealed statistically significant differences between transgender and cisgender participants, we conducted a secondary analysis on our interviews with the two transgender in our sample women as case studies to explore possible explanation for these differences (Flyvbjerg, 2011; Yin, 1994). These data were supplemented by an analysis of discussion of transgender program participants from interviews with six SPD program staff from a follow up study (described in more detail in Leon & Shdaimah, 2012).

Sample

The sample for the quantitative analysis consisted of 616 persons arrested for street level prostitution in Baltimore City during a 19-month period from August 2009 to March 2011. Almost half (42.7%, $n = 262$) of the arrestees were eligible for the SPD offer and of those who were eligible, 82.5% ($n = 217$) accepted the project and 17.5% did not accept the SPD offer. Approximately 90% of the arrestees were female ($n = 553$), 1% was male ($n = 8$), and 9% ($n = 55$) respondents identified themselves as transgender. The mean age of the arrestees was 34.5 ($SD = 1.32$). Over 60% ($n = 373$) of the arrestees did not finish high school, 28.3% ($n = 174$) graduated from high school and at least 11% ($n = 68$) had attended some amount of college. The mean number of minor children for each defendant was 1.3 ($SD = 1.58$) and 56% ($n = 345$) still had their minor children living with them, whereas 44% had their minor children living with someone else such as family, friends or in foster care. Only 13% ($n = 80$) of the respondents indicated that they were homeless. More than 66% ($n = 408$) of participants indicated they were covered by some form of health insurance, with the majority having Medical Assistance or Primary Adult Care (PAC) furnished by the state. Disability benefits in the form of Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) were being received by 16.2% ($n = 100$) of the respondents. Physical health problems were reported by 47.6% ($n = 293$); substance abuse history was reported by 63.6% ($n = 392$); and mental health history was reported by 58.6% ($n = 361$).

Participants for the qualitative study were recruited by the researchers who were on site during observations and through invitations that were provided by the SPD program staff to all SPD participants. No particular group of participants was specifically recruited or excluded. We recruited respondents until we reached saturation at 21 respondents (Padgett, 2008). Analysis of demographics for our quantitative sample (reported here and in Shdaimah & Bailey-Kloch, 2014) indicate that our qualitative sample was reflective of the larger prostitution docket in Baltimore in terms of gender, race, and

age of participants. Respondents included two transgender women, one cisgender man, and 18 cisgender women and, as noted, this articles draws only on the interviews with transgender women in order to explore possible reasons for the statistically significant differences that we found regarding gender as a predictor of substance abuse and mental health concerns. These interviews were supplemented with data from interviews conducted with six of the SPD criminal justice personnel. All program staff were invited to participate in the study. The respondents included attorneys for the defense and prosecution, social workers, pretrial agents, and a mental health/ addictions screener.

Procedures

SPD staff collected data for the quantitative portion of the study. Once the SPD began, all Baltimore prostitution cases were routed to the Monday morning docket at one courthouse. On the day of court for their respective prostitution charge, all defendants were assessed for eligibility for the SPD program. Eligibility factors included previous felony convictions and prior arrests for prostitution; defendants with violent offenses or who were on parole or probation were ineligible. Program social workers attempt to interview all defendants, regardless of eligibility for, or interest in, the program for administrative purposes. The standard administrative survey collects descriptive information, including gender (female, male, or transgender), age, level of education, number of minor children (living with them or not), homelessness, disability income, medical insurance, physical health problems, substance abuse history, and mental health history. All defendants fill out a questionnaire that elicit self-reported information on these variables. These administrative program data were provided to the research team for analysis in de-identified form.

Participant interviews were conducted using a semistructured interview guide in a location of the respondents' choice, where privacy could be guaranteed. Individual interviews lasted between 30–60 min and were audio-recorded and transcribed. Client respondents were asked to reflect on their motivation for engaging in prostitution, their experiences in the SPD, and what improvements might be made to the program. Program staff interviews explored their assessment of the SPD, their work with clients, and what improvements might be made to the program. Both studies were approved by the University of Maryland, Baltimore Institutional Review Board. To protect confidentiality of our respondents, we use pseudonyms.

Data Analysis

Binary logistic regression was used as the primary quantitative data analysis technique. The analysis is appropriate for predicting categorical outcomes.

Two analyses were conducted; the independent variables in both analyses were gender (cisgender women/transgender women sex workers) and whether or not the participant accepted the SPD program (no/yes). Acceptance of the program was included as a control variable to assess whether or not there were differences in outcomes between those who did and did not participate in the SPD. The dependent variable in the first analysis was substance abuse history (no/yes), and mental health history (no/yes) in the second analysis.

After our analysis of the quantitative data showed statistically significant differences between transgender and cisgender SPD participants, we used the qualitative data to suggest explanations (to answer "black box" questions) raised by our statistical analysis. In our initial analysis, the first two authors independently coded two transcripts for sensitizing and emerging concepts (Padgett, 2008), and reviewed these to create a unified coding scheme through consensus. They then applied the unified coding scheme and reviewed for inter-rater reliability, and revised the coding scheme as necessary. The remaining interviews were coded using the revised coding scheme, and the first interview was also recoded using that scheme.

For this article, Corey Shdaimah reviewed and analyzed the transcripts of the two transgender participants as case studies (Flyvbjerg, 2011; Yin, 1994) to provide "thicker description" of the experiences of transgender program participants. To triangulate participants' perspectives and to get a broader overview of the differences between transgender and cisgender clients across the SPD program, we also analyzed data from interviews with program staff (Padgett, 2008). In this secondary analysis on the interview data from program staff, we searched for all instances where they discussed transgender program participants (Sands, 2004). In these interviews, we did not ask specifically about gender of participants and criminal justice personnel. Five of the six staff brought up transgender participants spontaneously, most often in response to questions asking what they learned from working in the SPD.

FINDINGS

Quantitative Analysis

Binomial logistic regression analyses were conducted to test the hypotheses that gender (transgender or cisgender) predicts self-report of substance abuse history and mental health history after controlling for participation in the SPD program. The logistic regression model for predicting substance abuse history is a better fit to the data than the null model, $\chi^2_{(2)} = 20.57$, $p < .001$. Pseudo-R^2 values indicate that the model has some utility in explaining group membership (Cox & Snell $=.08$; Nagelkerke $=.11$). The

Homer and Lemeshow goodness-of-fit test also indicates that there is a good fit between the observed data and the predictive model, $\chi^2_{(1)} = 0.13; p = .72$). Analysis of parameter estimates showed that gender is predictive of reported substance abuse history after controlling for participation in the SPD. Cisgender female arrestees were 11.11 times more likely to report substance abuse history then transgender women ($p < .001$, 95% confidence interval [CI]: .03, .33). Accepting the SPD program was not predictive of substance abuse history (odds ratio [OR] = 1.10, 95% CI: .03, .33, $p = .78$). The odds of transgender women having a substance history were 81% lower than cisgender women.

The regression model for predicting mental health history is a better fit to the data than the null model, $\chi^2_{(2)} = 10.47; p = .005$. Pseudo-$R^2$ values indicate that the model has some limited utility in explaining group membership (Cox & Snell =.03; Nagelkerke =.04). The Homer and Lemeshow goodness-of-fit test also indicates that there is a good fit between the observed data and the predictive model, $\chi^2_{(1)} = .009; p = .93$). Based on estimates of odds ratios, cisgender female arrestees were 4.01 times more likely to report mental health history then transgender women ($p = .006$, 95% CI: .09, .67). Accepting the SPD program was not predictive of mental health history (OR = 1.47, 95% CI: .76, 2.85, $p = .25$). The odds of transgender women having a substance history were 75% lower than cisgender women.

The logistic model for substance abuse history correctly predicted 67.4% of the sample; sensitivity of 98.1% and specificity of 17.2% indicating that the model was better at predicting who had a substance abuse history but still retained some utility in differentiating between those with and without substance abuse histories. For mental health history, the logistic regression model was similar and successful in predicting 65.1% of the sample, with 96.3% sensitivity and 14.1% specificity.

Qualitative Analysis

All of the professionals who talked about motivations of transgender defendants (four of our six respondents) indicated that they were much less likely than other defendants to use drugs. If they do use drugs it is most often marijuana rather than heroin or crack, the most popular drugs of choice among female defendants. According to Brigit, transgender defendants are primarily motivated by employment difficulties, "they can't get work. It's pure and simple economics." The two transgender participants that we interviewed, whom we call Robin and Kim, fit these descriptions and illustrate our quantitative findings. Both are younger than the mean age of the sample, at 24 and 25. Both also have higher levels of education than the sample mean, having high school diplomas and more advanced training. Robin has a cosmetology degree but lacks her certificate to

practice; Kim took a break from her cosmetology training when she ran out of money).

Although Robin grapples with a drug problem, her primary reason (like Kim, who does not use any drugs) for engaging in prostitution is financial concerns unrelated to her drug habit. Robin began engaging in prostitution as a 16-year old high school student.

> I paid for graduation; senior, junior graduation. Class dues. Field trips. . . . I made money and—quick money, and my mother was a prostitute, I was a little kid, but I watched her, and I knew what she was doing, I caught her red-handed so it just—it was just a thought in me.

Robin has since relied on prostitution as a source of income, when necessary, saying "it's hard for me to leave something alone when I have done it for so long."

Ms. Anita, who referred to her transgender clients by their biological rather than their chosen gender identity, said that she and some other staff counsel transgender clients on how to find and retain employment. Although she is empathetic with transgender clients' desire to obtain legal and satisfying employment, Ms. Anita places responsibility on them to conform to gender expectations to achieve this:

> I feel sorry for them because they want a job. They don't want to do something - one of them told me "I hate what I do! But I don't have any money. I feel dirty when I have to do it." "Okay, let's get you a job, let's get you a job." Then we send them out on placements. [For example] this guy got into it and he said he liked what he was doing. And there were some possibilities he might get a job. Some of them in the job market don't want [transgender] in there . . . But then you have some programs where they are preparing them for a job and mentoring to them, to the point we're like "okay this maybe your desire but you might have to carry yourself a little different if you want to get into the job world. Okay, you may want to dress like a woman in your house, but when you come out to the job, you need to dress like a man, just for the—"anything, to me there is a piece missing, in that these guys need to know.

Ms. Anita does not condone the discrimination that she sees. In her interview, she explained that she and others troubleshoot and have been trying to compile a list of employers who are not prejudiced or judgmental. Although she urges conformity for the sake of employment to her transgender clients, it seems to be more from an urgent need for employment and a lack of resources or knowledge to change the employment climate.

   Margo, an attorney, also described difficulties that transgender SPD participants face. In contrast to Ms. Anita, however, she did not look to program participants to change their gender expression or behavior but rather called for changes to the workplace and societal climate to combat misunderstanding and prejudice:

> And the transgender community, one of the reasons why they are definitely doing the prostitution we have, with our interviews with them, they can't get a job that allows them to be true to themselves and it's difficult for that community. We really need more programs and more acceptance for them, because a lot of time, say it involves something that would require wearing a uniform, maybe say like McDonald's and there's a changing room; well, do you put them in the male changing room or the female changing room? Well if they're presenting as female, but there's other females in there. And the employer doesn't know what to do, so they just don't hire them. Or once they do a background check and find out that, "Well wait a minute, your name is really this and [pause]" And there's no really discrimination [ban] that can stop an employer from discriminating against them at this stage, and where we are with laws. So they just find it very difficult to obtain/keep jobs. And everybody has to live; so a lot of them turn to prostitution.

   Margo found such judgmental and stigmatizing experiences deeply concerning "because it stops them. Not only does it stop them, but it puts them out there so much deeper. And that's not our purpose." She expressed frustration and wanted more "tools we need to help them" at the SPD's disposal.
   One of the assessors found his transgender clients the most difficult to place for programs and services. He too, called for more appropriate resources not only in the workplace but also at the programs to which he refers SPD participants.

> I don't think it's a real good program for transgender, transsexual because of the placement. And a lot of transsexual, transgender are not really comfortable with going into treatment facilities, and a lot of treatment facilities, their clientele really don't want to accept them. So it's real hard on that population.

   The need for sensitivity and appropriate responses are notable not only outside of the SPD, but professional staff and SPD participants indicated the need for training for judges and for staff members associated with the SPD. For example, we learned from our observations and our interviews that some judges will continues to call out male-identified names in court, ignoring a woman who stands in response to the call, which causes discomfort for the defendant.

Kim and Robin were extremely pleased with their relationships with program staff, especially their respective social workers, whom they found caring and responsive: "Miss Brigit was helpful in every way that she could be. She's very hands-on, she's very sweet. That's what I liked about her. She didn't look at me or judge me for what I've done. She was trying to help me."

However, Kim and Robin also confirmed the need for program improvements that would better serve transgender and other clients. Although Kim does not have a drug problem and has consistently provided "clean" urines during her tenure in the program, she must submit to regular urine analysis. She finds the lack of privacy discomfiting: "I don't like having someone standing there while I go to the bathroom"; given the lack of apparent need for this kind of surveillance, it is not clear why a program that is client- tailored in other ways cannot be altered to fit the specific needs and concerns regarding (lack of) indicated drug use.

Both Kim and Robin also reported that the program was unable to help them work toward crucial goals. Kim, who was undergoing hormone treatments, was proud of her accomplishments, which included a name change with the assistance of the SPD: "I'm proud—most proud of my transition from male to female. And I'm most proud of I got my name changed, and I'm just proud of the person I've tried to become." However, employment and housing continue to be her biggest problems. Program staff considers these the primary areas of need exhibited by all clients, regardless of gender, where they have little to offer. Kim, who is living with a friend, was "really concerned about housing. I need a stable place to live." She thinks the SPD should have "someone to really help people set up, resumes and employment opportunity and housing opportunity, stuff like that." When we asked about what could be improved, Robin (who is living in a shelter) underscored the need for housing and jobs as a prerequisite toward achieving the stated goal of the program, which is desistance from prostitution "'cause if you're going to get a prostitute off of the streets and to help her, you got help her find a job, too, or have connections to places that's having job openings."

DISCUSSION

Our findings indicate that while there may be some similarities in the experiences of cisgender and transgender women arrested for prostitution in Baltimore, MD, there are also important differences between these groups. Being a cisgender sex worker or a transgender sex worker in Baltimore, MD is predictive of whether or not a defendant reports a substance abuse or mental health history. Previous mental health histories were less likely for transgender participants than for female sex workers. Self-reports of substance use were less likely for transgender participants than for cisgender participants.

Requiring all participants to be sent for assessment and treatment at entry seems unwarranted and may be off-putting and thus counterproductive for program engagement for participants who do not use substances. More research should be done with transgender diversion program participants to determine what resources and services would be most appropriate. Such research should include a review of which assessments and services should be automatically mandated, and which are more appropriately tailored to individual program participants or particular subgroups. This way, scarce resources can be better directed and program participants may derive greater benefit from their participation.

One limitation of this study is its focus on transgender sex workers who are involved in the criminal justice system and/or for whom information is provided in the presence of or through criminal justice personnel. Within criminal justice programs, it is unlikely that participants will express motivations informed by a more unfettered choice to engage in sex work. In addition, the fact that data were based on self-report may raise concerns regarding candor of other stigmatized behaviors such as mental health concerns or substance abuse. However, administrative program data are often collected in this manner, and assessments that did not rely on self-report were unavailable. We believe that these concerns are at least partially mitigated by the high rate of reporting of stigmatized conditions or behavior as well as triangulation of sources and types of data through the mixed method approach. Another limitation of the study is that data were obtained only from sex workers who were arrested for prostitution, who are not be representative of all sex workers.

Transgender sex workers in the SPD are often motivated to prostitute as a result of the discrimination that they face, which in our sample were most often mentioned in the areas of housing and employment. This is clearly a common phenomenon throughout both in the Mid-Atlantic region (National Center for Transgender Equality and National Gay and Lesbian Task Force, n.d.) and throughout the country (Grant et al., 2011). Maryland's Ant-Discrimination Act (2001) to include transgender as a protected category in the 2014 legislative session was the product of many years of advocacy. It is a welcome step to acknowledge and begin to address workplace discrimination faced by transgender individuals. It will be important to follow the implementation process and larger social change that it is hoped to both demonstrate and bring about. Further policy measures to end discrimination in other areas, such as housing, education, and public services, are also needed. Similar legislation at the federal level, such as the Employment Non-Discrimination Act (ENDA; Civic Impulse, 2015b) and the Safe Schools Improvement Act (SSIA; Civic Impulse, 2015a), would also go far toward ending discrimination in order to provide a wider range of option to transgender individuals. There is debate over the need to protect transgender persons against discrimination in employment. In order to secure the passage of ENDA of 2007, language including gender identity was stripped from the bill.

ENDA makes it illegal to discriminate against gays and lesbians in employ-
ment, but many politicians and gay rights activist groups insisted that trans-
gender inclusion in the bill would prohibit its passage into law (Vitulli, 2010).
Once passed, amendments have been introduced each year to include the
protection of transgender persons against employment discrimination with-
out success.

      Based on self-report and SPD staff assessment, most of the transgender
participants of Baltimore's SPD seek services that will help them cope with
experiences of discrimination, particularly in the areas of housing and
employment. Given limited options, sex work may be a logical choice. Sex
work on transgender strolls may also provide a social community where
transwomen's identity and expression is acknowledged, respected, and
understood (Hail-Jares, Paquette, & Le Neveu, in press). So long as transgen-
der individuals continue to engage in sex work, we must develop programs
and policies that help make this choice safer and that provide services that
match the needs, goals, and motivations of transgender sex workers.
Although the SPD stands out as a program that is open to participants regard-
less of gender, both participants and program staff have pointed to the mis-
match between existing services and their ability to meet self-identified
program goals. Further, whereas no incidences of intentional harassment
or discrimination in the program have been reported, some professionals
involved in the program are not knowledgeable about transgender parti-
cipants and may behave inappropriately or offensively, further stigmatizing
transgender program participants and contributing to an unsafe program
environment (Beemyn & Rankin, 2011).

      Our findings lead to several suggestions. The first is that equal oppor-
tunities be provided to all, regardless of gender. As noted, Baltimore's SPD
does not deprive transgender people who are arrested for prostitution
access to diversionary criminal justice options that may result in less harm,
fewer negative collateral consequences, and important material and legal
benefits than mainstream responses to prostitution. So long as prostitution
remains a criminal offense in most U.S. jurisdictions, it is important that
such options be equitably provided. An important caveat, however, is that
programs serving transgender individuals must be respectful of and knowl-
edgeable about transgender people. This includes both accepting and regis-
tering the gender expression and identity chosen by program participants,
regardless of legally assigned gender. The participant's chosen identity
should be used in all program interactions and in setting up services. As
most services take place through referral outside of the court system, this
also means that programs to which transgender participants are referred
must be vetted and their personnel trained to similarly respectfully and
appropriate interact with transgender participants. In addition, the program
should be better tailored to meet the self-expressed service needs not only
of transgender individuals, but participants of any gender that do not fit a

particular profile. This means not requiring individuals who do not abuse substances to perform urinalysis, and the creation of a job or housing referral service for program participants. Although some of the services needed (like housing) are in short supply, the program might need to rethink its expectations for success for program participants for whom the program cannot address the underlying needs that may motivate participants to engage in prostitution. Making such concerns more public and bringing them to the policy arena may better inform discussions around anti-discrimination policy (such as state and federal level ENDA bills), housing, and the legal status of prostitution.

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