



# WHITMAN-WALKER HEALTH

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## **TESTIMONY OF STACEY KARPEN DOHN, PHD, SENIOR MANAGER OF BEHAVIORAL HEALTH, IN SUPPORT FOR DC BILLS 23-0435, TONY HUNTER AND BELLA EVANGELISTA PANIC DEFENSE PROHIBITION ACT OF 2019, AND 23-0409, SEXUAL ORIENTATION AND GENDER IDENTITY PANIC DEFENSE PROHIBITION ACT OF 2019**

**NOVEMBER 6, 2019**

I am the Senior Manager of the Behavioral Health Department and a psychotherapist at Whitman-Walker Health, (Whitman-Walker or WWH) a Federally Qualified Health Center in Washington, DC offering affirming, community-based health and wellness services to all people, with a special expertise in lesbian, gay, bisexual, transgender and queer/questioning (LGBTQ) care and HIV care. I have been employed by Whitman-Walker for the past five years, and was a Masters and then Doctoral Intern at WWH for the two years before that. I earned my PhD in Counseling and MA in Clinical Mental Health Counseling from the George Washington University, prior to my graduate studies I earned a BA in Gender and Sexuality Studies from New York University. I am a Licensed Professional Counselor in the District of Columbia. My CV is attached.

At Whitman-Walker, I manage the daily operations of all services provided by the Behavioral Health Department across WWH's four sites in DC, by our staff of psychotherapists, psychiatrists, psychiatric nurse practitioners, and peer recovery specialists. I oversee the design, implementation, and delivery of behavioral health treatment for mental health care (including individual therapy, group therapy, and psychiatry), substance use disorder (including intensive outpatient/outpatient program for co-occurring addiction and mental health diagnoses, Medication Assisted Treatment (MAT) program for opioid addiction, and harm reduction), and peer-based services at all Whitman-Walker Health center sites. Based on my expertise serving trauma-impacted youth in the US, Morocco, Tanzania, Ghana and South Africa, I facilitated the expansion of Behavioral Health Department to include providing mental health care to LGBTQ youth, specifically victims of violence. I developed and implemented gender affirming protocols and internal workflow for transgender and gender expansive patients: including conducting mental health assessments for transgender/gender expansive patients seeking hormone therapy or gender affirming surgery.

My colleagues and I witness firsthand the fears that many LGBTQ individuals live with on a daily basis. For many of our LGBTQ and HIV-positive patients, fears of discrimination, stigmatization and victimization are ingrained in the day-to-day tasks of living; such as walking out of one's home, taking the Metro, going to work, etc. Each of these activities, which may seem mundane to most people, are for those who feel constantly targeted, a daily reminder that they are vulnerable, simply based on who they are, how they look, who they love, and how they may identify.

In my psychotherapy sessions with LGBTQ youth and adults, I sit with patients who have survived hate crimes, family expulsion, religious excommunication, job loss, and denial of medical care. Children as young as six years old have asked me if they are safe to be open about their identities in their schools and communities. They want to know if they will be hurt because of who they are. I struggle with my powerlessness because I know that I cannot promise them that their fears are unfounded.

It seems on a nearly daily basis that there is news of a murder or a beating of someone based on gender identity or sexual orientation. Though I try to assure my patients that they are safe within the four walls of my office, I know that once they leave I may never see them again. At Whitman-Walker, my colleagues and I are too familiar with learning about violence that our patients have endured both in the past and in the present. When a patient stops engaging in services and is no longer in contact with me, I often fear the worst. Sometimes we know the cause of their absence, other times we do not. Patients simply do not return, and we are only left to wonder. I dread the messages from area hospitals informing us of the death of a patient. When I see a headline in the news of a LGBTQ identified individual murdered or viciously assaulted, I brace myself as I hear or read the name of the victim.

“Trans panic” and “gay panic” defenses have instilled fear in the lives of LGBTQ people and their loved ones for far too long. These defenses allow anyone to use an immutable characteristic such as identity or disability to blame the victim for the violence perpetrated against them. To justify and excuse violence and murder as a result of sexuality, gender identity, or HIV status is to deem LGBTQ lives and people living with HIV as inherently less worthy and less human as compared to those who do not identify as LGBTQ or those who are HIV negative. This message has devastating effects on the wellbeing of LGBTQ communities. For example, LGB youth are almost five times as likely to have attempted suicide compared to heterosexual youth (CDC, 2016).

In 1973, the American Psychiatric Association removed the diagnosis of homosexuality and homosexual panic disorder from the Diagnostic and Statistical Manual of Mental Disorders. To claim that “homosexual panic” causes someone to act violently is psychologically unfounded. In “trans panic” cases, defendants argue that the discovery of the victim’s gender identity is incongruent with their sex assigned at birth is an adequate cause to beat or kill. To bolster an argument for self-defense, defendants claim that the victim’s sexual orientation or gender identity was such a threat that they had to “defend” themselves by violence.

Inherent in these arguments is the inference that an LGBTQ person is a threat and, therefore, others should lawfully be allowed to hurt people of varying sexual orientations and gender identities or people living with HIV. Violence directed towards them is argued as being justified simply because of who they are or their HIV status. Their identity, not their actions, is being deemed a viable reason for assault or murder. As such, my patients live with the knowledge that their identities make them vulnerable and that their lives may be cut short because of hatred and prejudice. LGBTQ people have for decades fought to disassociate themselves with homophobic and transphobic associations with predation, deviance, and perversion. To continue the use of gay panic and trans panic legal defenses legally sanctions these associations.

The supposition that LGBTQ people are a threat to non-LGBTQ people is easily debunked. Statistics show us that LGBTQ individuals are at a far greater risk of harm in their lifetimes as compared to non-LGBTQ identified individuals. For example, In the US Transgender Survey, nearly half (47%) of 28,000 respondents who identify as transgender or non-binary have been sexually assaulted at some point in their lifetime. Nearly one in ten (9%) respondents reported that they were physically attacked in the past year because of being transgender. Thirteen percent (13%) of respondents said that someone had physically attacked them in the past year, such as by grabbing them, throwing something at them, punching them, or using a weapon against them for any reason. Those who were currently working in the underground economy (41%) were more than three times as likely to report being physically attacked in the past year (US Transgender Survey, 2015).

Whitman-Walker Health is in full support of Bill 23-409 and Bill 23-435. To continue to allow for the use of the “gay panic” or “trans panic” or “HIV panic” defense is morally wrong and causes great harm to not only the victims of these crimes, but for all LGBTQ and HIV positive people who live in fear that their identity or HIV status will be the cause of being assaulted or murdered and that a jury of their peers will condone this violence. In a society in which “gay, trans, or HIV panic” defenses are allowed, LGBTQ youth and adults and people living with HIV are under a constant threat of discrimination and violence. To argue the reverse, that LGBTQ people are an inherent threat to others, a threat so severe that violence against them is protected by law, is an affront to our collective humanity.

Thank you for this opportunity to testify to support this very important legislation.



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Citations:

CDC. (2016). Sexual Identity, Sex of Sexual Contacts, and Health-Risk Behaviors Among Students in Grades 9-12: Youth Risk Behavior Surveillance. Atlanta, GA: U.S. Department of Health and Human Services.

James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). Executive Summary of the Report of the 2015 U.S. Transgender Survey. Washington, DC: National Center for Transgender Equality.

# Stacey L. Karpen Dohn, PhD, LPC

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## EDUCATION

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Doctor of Philosophy in Counseling from George Washington University, January 2016

Master of Arts in Clinical Mental Health Counseling from George Washington University, May 2011

Bachelor of Arts in Gender and Sexuality Studies from New York University, May 2005

Bachelor of Fine Arts in Drama from New York University, May 2005

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## PROFESSIONAL LICENSURE

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Licensed Professional Counselor (LPC) in Washington, DC (PRC14589)

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## CLINICAL EXPERIENCE

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### Whitman Walker Health

Washington, DC

#### *Senior Manager of Behavioral Health & Psychotherapist*

*May 1, 2016- present*

- Provide individual and group psychotherapy for a diverse patient population, specializing in LGBTQ communities and people with HIV.
- Manage the daily operations of all services provided by the Behavioral Health Department across four sites, staff of thirty includes psychotherapists, psychiatrists, psychiatric nurse practitioner, and psychiatric residents in a Federally Qualified Health Center (FQHC) that specializes in serving LGBTQ communities and people infected/affected by HIV/AIDS.
- Responsible for the design, implementation, and monitoring of behavioral health treatment for mental health care (including individual therapy, group therapy, and psychiatry), substance use disorder (including intensive outpatient/outpatient program for co-occurring addiction and mental health diagnoses, medication assisted treatment program for opioid addiction program, and harm reduction), and peer-based services at all Whitman-Walker health center sites that emphasizes timely delivery of services, efficiency, program relevancy, integration and coordination with other divisions within the health center.
- Facilitated expansion of Behavioral Health Department to include providing mental health care to LGBTQ youth, specifically victims of violence.
- Provide ongoing clinical supervision to staff psychotherapists.
- Developed and implemented gender affirming protocols and internal workflow for transgender and gender expansive clients: Write supportive letters for the medical necessity and clinical appropriateness for hormone therapy or gender affirming surgeries. Conducted (and continue to conduct) over 350+ mental health assessments for transgender/gender expansive clients seeking hormone therapy or gender affirming surgery. Created clinical assessment for Gender Dysphoria and Surgery Readiness. Conduct quarterly Trans 201 training to all health center staff.

### Private Practice: Individual/Family Therapy with Gender Specialization

Washington, DC

#### *Psychotherapist/Gender Specialist*

*September 2015-present*

- Conduct individual therapy sessions with children (ages 4+) and adults who are at various points of transition and exploration of gender identity.
- Engage families of clients in therapeutic work to expand network of support for transitioning clients.
- Assist with medical referrals and supportive letters for hormone therapy or gender affirming surgeries.

**Whitman Walker Health***Behavioral Health Specialist**Masters/Doctoral Intern***Washington, DC***October 2014- May 2016**September 2011- October 2014*

- Served as a member of a multidisciplinary team, providing behavioral health screening and clinical assessment, to determine appropriate level of care for mental health/addictions/ and crisis intervention.
- Managed mental health crisis intervention for clients with acute mental health needs, including risk assessment for suicide, homicide, and psychosis. This work entails contacting emergency services, working to ensure the safety of other staff and clients, and following up with client post-crisis to engage them in care.
- Established a referral and resource base to assist in client placement and referrals.
- Provided long-term and short-term individual psychotherapy and group psychotherapy for a diversity of clients.

**Community Counseling Services Center at George Washington University***Doctoral Clinical Supervisor**Clinical Mental Health Counselor Intern***Washington, DC***September 2013-May 2014**September 2010-May 2011*

- Conducted on-call and on-site crisis management and risk consultation for clients with acute needs.
- Conducted triage and initial client screenings to determine appropriate disposition decisions and referrals to community agencies as needed.
- Provided supervision for graduate trainees in Clinical Mental Health Counseling at the Master's level.
- Primarily responsible for video session review, supervisory evaluation of competency, reviewing and co-signing weekly progress notes and treatment plans.
- Conducted individual counseling with diverse client population using short-term, solution-focused model.

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## INTERNATIONAL EXPERIENCE

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**Bokamoso Youth Center***Psychotherapist***Winterveldt, South Africa***July-August 2014*

- Conducted individual and group psychotherapy and expressive art therapy groups for at-risk young adults specifically focused on HIV/AIDS, trauma related to violent crime and sexual assault, substance abuse, and grief and loss.
- Led cross cultural counseling training for team of masters level therapists, and presented HIV/AIDS awareness and prevention training programs for young adult clients and staff.

**Margaret Marquart Hospital, HIV/AIDS Clinic***Clinical Mental Health/HIV Counselor***Kpando, Ghana***April-August 2012*

- Led women's support group and conducted individual counseling for pre/post HIV testing
- Presented educational workshops on Tuberculosis, HIV/STIs, reproductive rights, Malaria, and domestic violence, and collaborated with USAID community health workers to create programs specifically focused on identifying barriers to care and coordination of an ARV adherence support program.

**Jipe Moyo HIV/AIDS Support Program for Women***Mental Health Counselor and Coordinator***Moshi, Tanzania***April-August 2010*

- Travelocity Change Ambassadors Travel Grant used for the development and implementation of mental health program for rural HIV/AIDS community organization.

**Lala Maryam Orphanage***Mental Health Provider***Rabat, Morocco***July-August 2011 & 2012*

- Worked as a group and individual counselor and caregiver for severely disabled children and young adults.
- Developed system of documenting the case histories of 100+ orphans, and created a manual for future caregivers

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## SELECTED PRESENTATIONS AND MEDIA

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- Presenter, United States Department of State** **November, 2017**
- Transgender 101, recorded and simulcast for staff located internationally
- Presenter, United States Agency for International Development** **August, 2017**
- Transgender Barriers to Care, recorded and simulcast for staff located internationally
- Quoted Expert, The New York Times** **February, 2019**
- [“Mom, I’m Gay, Can my Friends Sleep Over?”](#)
- Quoted Expert, Psychiatric Advisor** **August, 2018**
- [“Is It Just a Phase?” What to Do When Transgender Youths Ask to Transition”](#)
- Panelist, National Center for Medical-Legal Partnership Summit** **September 2019**
- Accessing Gender Affirming Care Requires Legal Care: A Discussion on Team-Based Approaches and Best Practices
- Presenter, Association for Ambulatory Behavioral Healthcare** **August, 2019**
- The Evolving Role of The Mental Health Clinician in Trans Care
- Presenter, Washington AIDS Partnership** **August, 2017**
- Transgender 201
- Panelist, Capital Trans Pride** **May, 2017**
- Safer Sex for Trans Bodies & Gender Affirming Surgery Navigation
- Panelist, Facebook Live (Whitman Walker Health/Human Rights Campaign)** **August 2016**
- *24.8k views*. Panelist in Discussion on the Transgender Sexual Health Guide
- Poster, Critical Race Studies in Education Conference Vanderbilt University Law School** **May 2015**
- “Being from the block”: Re-narrating what it means to be an urban youth
- Presenter, American Counseling Association Conference & Expo** **March 2014**
- From Pronouns to Practice: An Exploration of Trans\*-affirming Language, 60-minute Clinical Session
- Presenter, American Counseling Association Conference & Expo** **March 2014**
- Engaging Society, Growing the Self: The Impact of Participating in a Mentoring-Based Youth Conference
- Panelist, Model World Conference on the Rights of Women and Girls** **April 2014**
- Local Voices, Global Vision: Activists Working on the Rights of Women and Girls
- Paper, International Association of Rehabilitation Professionals Forensic Conference** **November 2013**
- Ethical dilemmas experienced by forensic, private and public sector rehabilitation counselors.
- Presenter, A Global Summit on Issues Affecting Women and Girls Worldwide** **February 2012**
- Directed expo and presentation including 20 organizations working with women and girls locally, nationally, and internationally. Presented with United Nations Special Representative of the Secretary Gender on Sexual Violence in Conflict Zainab Hawa Bangura of Sierra Leone.

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## SELECTED PUBLICATIONS

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- Karpen, S. (2016). Living in the Cracks of Apartheid: A Critical Narrative Analysis of Resilience, Hope, and Cultural Trauma in The Born Free Generation of South Africa. Doctoral Dissertation, George Washington University.
- [Safe Sex for Trans Bodies](#) is a resource created in collaboration with the Human Rights Campaign (HRC) which includes life-saving and affirming practices, from respectful terminology and definitions to helpful practices for sexual health following transition-related care.
- [The Resource Guide for Transgender, Gender Queer, and Gender Expansive Clients](#) is a comprehensive resource detailing the variety of services for transgender/gender expansive clients at Whitman Walker Health, including timeline of gender affirming hormone therapy changes, and surgery readiness information.
- Karpen, S. (2014). Group under fire. Association for the Specialists in Group Work. *The Group Worker*.
- Karpen, S. (2013). Bully busters. Association for the Specialists in Group Work. *The Group Worker*.

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## GRANTS, HONORS, AND AWARDS

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- [2017 Engendered Spirit Award](#): Awarded by Capital Pride Alliance for support and contributions to the betterment of the transgender community.
- **Clemment E. Vontress Cross-Cultural** Award in recognition of dedication to the promotion of cross-cultural understanding, social justice, and racial harmony, awarded by George Washington University.
- George Washington University, **Innovation in Diversity and Inclusion (IDI) Grant**, 2014.
- **Travelocity Change Ambassadors Grant**.
- George Washington University Nomination for **Graduate Award for Individual Excellence**.
- George Washington University **Futrell Endowment Fund Tuition Award**.
- **The Point Foundation**, Scholarship Semi-finalist. Point is the nation's largest scholarship-granting organization for lesbian, gay, bisexual, transgender and queer (LGBTQ) students of merit.
- **The Martin Luther King Jr. Community Youth Leadership Award** by New Jersey Senator John Corzine.
- **The Joseph E. Poli Memorial Award** for Leadership in Youth Advocacy.

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## SPECIALIZED TRAINING

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### **Multicultural Trauma Treatment Training**

University of Rwanda School of Public Health, Kigali, Rwanda, 2016

### **Philadelphia Trans Health Conference**

Behavioral Health Provider Training Track, 2014-2017

### **Art Therapy: International Social & Cultural Diversity**

George Washington University Study Abroad, 2014

### **Grief, Loss, & Life Transitions, Summer Institute**

George Washington University, 2010, Instructor: Paul Tschudi

### **Narrative Therapy: Institute for the Healing of Memories, Healing Wounds of Apartheid**

Cape Town, South Africa, 2008

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## PROFESSIONAL MEMBERSHIPS

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American Counseling Association (ACA)

Association for Specialists in Group Work (ASGW)

Chi Sigma Iota (CSI), International Counseling Honor Society

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## REFERENCES

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Dr. Lance Morgan  
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Department of Veterans Affairs  
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Dr. Randy Pumphrey  
Senior Director of Behavioral Health  
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