

Hattiesburg clinic offers hormones for transgender community

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At a small clinic in Hattiesburg, a nurse practitioner is quietly changing lives.

Last November, Stacie Pace opened [Spectrum: The Other Clinic](#), exclusively providing care to Mississippi's transgender population.

After talking with community members, Pace said she felt the transgender community could use a hormone clinic in Hattiesburg. She originally planned to open a primary care clinic for those who are transgender, but found a greater need for hormone access to assist with transitioning.

Pace said Mississippians were driving to Jackson, Memphis and an "insane amount of distance" to access hormones.

"That's a terrible problem because hormones are almost the only way those who need to transition have to be able to feel right about themselves," she said. "Some people can socially transition and wear clothes of their gender that they align with and they're fine but there are others and (socially transitioning) is just not going to do it."

So, Pace not only opened a clinic in Hattiesburg, but made it telemedicine-based so people would no longer have to drive for their monthly hormones.

While the response has been positive from those who access care, not everyone is pleased with the services Pace provides.

In the time since the clinic has been opened, Pace said she's been the subject of near constant harassment on social media. One message, she said, told her she should be "shot to death" for running the clinic.

"I get any and all things from I'm going to hell because I'm going against the Bible to I'm disgusting...then I get people are just outright, 'I'm going to kill you.' They're crazy."

But for many, the clinic [could be a lifesaver](#). [According to the National LGBTQ Task Force](#), nearly one in five transgender and gender non-conforming people reported being refused care outright because they were transgender or gender non-conforming. And, suicide rates among transgender adults is over 50%, according to the [2015 U.S. Transgender Study](#).

"There are so few resources that are dedicated specifically to the LGBTQ population in Mississippi, period," said Kathy Garner, executive director of the AIDS Services Coalition of Hattiesburg.

"To be able to be in your home and see someone that is kind and considerate of your needs is huge. None of us want to go to a doctor that doesn't want to see us. The ability for transgender people to be able to receive health care in a safe place is phenomenal."

Transitioning is "a second puberty," Pace said, and can take "anywhere from two to five years for maximum effect." Those transitioning to male usually have a faster transition than those transitioning to female, she said.

Hormones are offered via injection, oral and patches. Hormone prices vary on whether the patient is

feminizing or masculinizing . Transitioning to female, with just hormones, can cost around \$60 to \$80 a month, without insurance, Pace said. Transitioning to male, with just hormones, can cost anywhere from \$80-\$120 for a vial of testosterone which is injected. A vial can last two to three months.

"(The cost) isn't horrible but finding someone to prescribe it for you is horrible," she said.

During the first visit, for \$110, Pace and the patient establish care, go over hormone options and order lab work. Follow-up visits are \$75. Approximately 23% to 30% have health insurance and, of those, "maybe half" have their hormones covered, Pace said.

"They're often very disappointed to learn insurance is not covering their labs or their medications," she said.

Pace said she likes for visits to last longer than typical doctor visits in an effort to connect with the patient.

"They need a lot of talk therapy," she said. "Once you start transitioning, your social network goes nuts, it's like you whacked a beehive. People who you thought were supportive may not be once you really start transitioning. People come out of the woodwork to hate on you...I try to allow for all of that."

Because she mainly uses telemedicine, Pace's patient load and the times she sees them varies widely. Due to Mississippi laws, patients have to be in the state during the visit but they range in location "from the coast to the top of the state." Pace recently had one patient drive from Florida to Mississippi to access care. Another called from Maryland because their provider would not provide hormones on a regular basis.

Pace said she cried once she hung up the phone.

"It's heartbreaking," she said.

The clinic is available to those 18 and older because of the restrictions on Pace' license to practice. The patients come from all walks of life, she said.