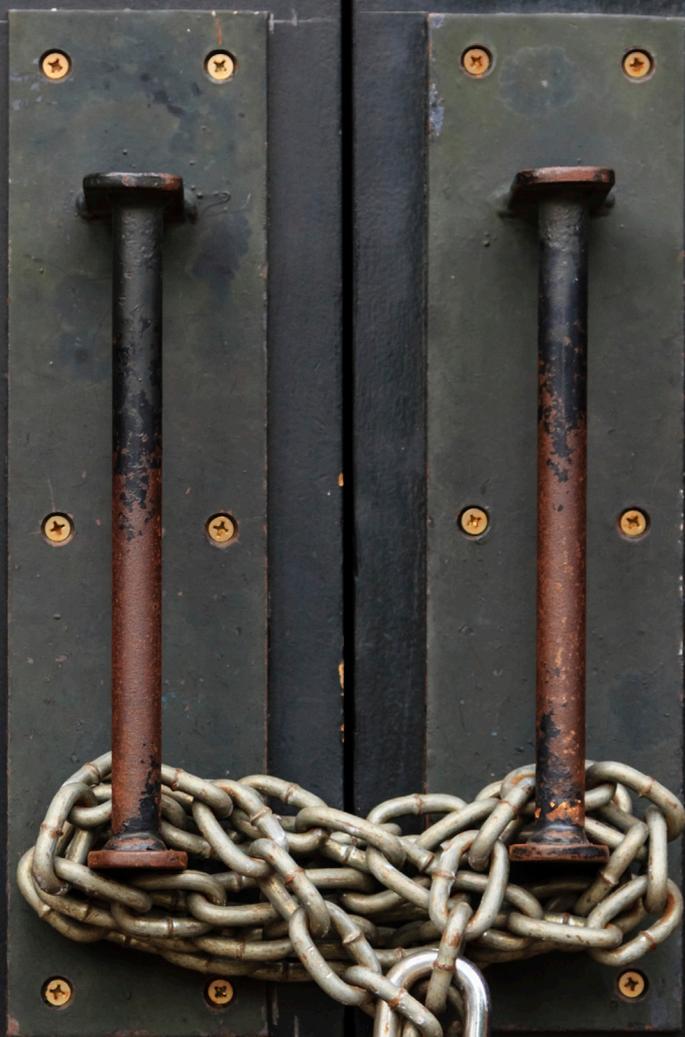


SHUT THE DOOR & LOCK IT TIGHT

THE CREATION OF MORRIS HOME



a true story

Sadé Ali



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THE CREATION OF MORRIS HOME

One of the many true stories of the creation of the **Morris Home** in Philadelphia, PA for transgender, gender-variant and gender non-conforming people.

Sadé Ali

DEDICATION

September, 2013

This work is dedicated to the memory of Nizah Morris, who was assaulted on the 22nd of December, 2002 and left to die on a street corner in Philadelphia. She succumbed to her injury on the 24th of December, 2002. Her murder has remained unsolved and no arrests have been made.

This is also dedicated to the memory of Diamond Williams, Kyra Cordova, Stacey Blahnik, Erika Keels, Sanesha Stewart, Bella Evangelista, Fred Martinez, Jr., Chanelle Pickett and countless other transgender, gender-variant and gender non-conforming people in Philadelphia and around the world who have lost their lives to misinformation, bias and bigotry. May you all rest in perfect peace.

AUTHOR'S NOTE

Most proper names, except for the names of the Department of Behavioral Health & Intellectual disAbility Services, RHD (Resources for Human Development), The Pearlbox Revue, Nizah Morris and the Morris Home, states, cities and towns, have been changed to protect privacy.

CHAPTER ONE

The Stage is Set Idiom

The first time I ever, to my knowledge, encountered an individual who may have been transgender or even identified with any of the communities under the Trans* umbrella, was in 1968. I was tending bar at the Seashore Inn in New London, Connecticut. This was deep in a turbulent time in the history of the United States, but the Seashore, located in the heart of a predominantly African-American community, seemed insulated from all that was going on around it. I worked there, lived directly across the street and rarely left that community.

Many of the acts that appeared at the Seashore were on their way through the East Coast to destinations all up and down the I-95 corridor. Although the city was relatively small, in the neighboring town of Groton were Electric Boat, and a major naval submarine base. Electric Boat was the largest manufacturer of nuclear-powered submarines in the country. Also in close proximity were the Coast Guard Academy and a large ship called a submarine tender that was often docked under the bridge that carried I-95 over the Thames River. All this made for lively groups of African-American sailors, submarine builders, engineers and electricians with government security clearances, Coast Guard men and women and students, seeking to hear some good music and to have some fun on shore leave. Many of them found their way to the Seashore.

As I look back, I realize that, for the size of the shows it attracted and the number of people who regularly crowded in to see the shows, the Seashore was quite small. The entire building consisted of the main floor, which held the bar and about ten tables; a second floor made up of eight hotel-style rooms; and the basement, which held a dance floor and space for twenty-or-so tables. There was no stage. There was only one way in, and that was also the exit.

Regulars included performers like jazz organist Johnny "Hammond" Smith and blue comedy performers Wildman Steve, a former DJ with WILD in Boston, and TV Mama and the Antennas. The owner, Tyrone, an affable man who loved the business, also gave the Seashore "stage" to artists seeking to make names for themselves. Thursday through Sunday nights found the club rocking with the sounds of the soul and funk of the

era. On at least two occasions that I recall, the Ink Spots came in to the Seashore. This group was extremely popular during the late sixties, and I remember them well, with hits like “If I didn’t Care” and “My Prayer.”

There was one waiter for the entire basement. He called himself Half-a-Pint. We called him Half-Pint. He was a short, gay man who sported a fairly large afro wig. That was popular at the time, at least for women, but Half-Pint wore his, and he wore it well. Once in a while he would come in to work sporting his natural hair, which was conked and pressed down with a doo rag at night. He actually looked good in that style as well, though folks at the Seashore would tell him he looked younger in the afro wig, so that was what he wore most often.

Recalling those days, I cannot think of one time I ever saw anyone give Half-Pint a hard time about who he was as a person. He did his job well, running between the tables and the small service bar, getting his drink orders filled, and he always left work with a pocket full of tips.

Half-Pint could dance! When I could get someone to tend the bar upstairs for me, I would go downstairs to see the show and dance with Half-Pint. It was never hard to persuade someone to cover for me, since there were rarely any customers upstairs. Everyone was in the basement enjoying the cover-free show.

CHAPTER TWO

....and the Lady can Dance!

Unknown

Staff usually knew who was coming in to perform about a week in advance. One Monday night, we were told we were going to be hosting the Pearl Box Revue, one of the two prominent groups of female impersonators of the time. The other was the Jewel Box Revue.

Tyrone let us know that the Revue consisted of female impersonators and that they'd most recently headlined at the Apollo Theater in Harlem. I have since learned that there's a difference between a female impersonator and a Drag Queen. The Revue had started in the 1930s with mostly European-American performers and had split off, as revues tend to do, into groups that included other ethnicities. This one had all African-American performers. We were warned that we should expect larger-than-normal crowds because of the Revue's popularity. All the rooms on the second floor would be used for the Revue. I'd never heard of them.

On Thursday afternoon, the Pearl Box Revue and its entourage arrived at the Seashore. I didn't get a good look at the performers, because Tyrone quickly took them upstairs to get settled in and prepare for their show that evening.

At the Seashore, the standard bar food of pickled eggs, pigs' feet and beef jerky was available. Every once in a while, a cook would come in for breakfast or lunch and would serve bacon, sausage and eggs or hamburgers. The Seashore was a neighborhood gathering place, and local folks would stop in to see whether or not the cook was there, and, if she was, they would start their days with something good to eat. Some of the performers would be drawn downstairs by the smell of brewing coffee and breakfast, and they would join the locals for animated conversation about the civil rights movement, Jim Crow, show business or family.

It was on one such day, the Friday morning after the Pearl Box Revue's opening night, and over steak and eggs at the bar, that I met and became friends with Charmaine. I'd seen Charmaine perform the previous night. I had asked Randy to cover for me in the main bar and made my way downstairs, as I usually did when the music drew me. People who stayed

upstairs in the “hotel” portion of the Seashore could enter the basement without being seen in the main bar area, so I had not seen the performers when they had gone downstairs to do their show.

When I did get to see them, I wanted to run and look in a mirror, to check my own hair and makeup. Tyrone had told us that the Revue consisted of African-American men who had perfected female impersonation, and they were gorgeous! They had legs that went on forever; bodies that were cinched, tucked and sequined; and make-up that was flawless. And could they dance! They were “mistresses” of lip-sync as well. One of them sported a royal blue sequined dress with a slit that was one inch away from being indecent, but she made it look so elegant. The others had wigs coiffed in straight styles, but she wore a large, dark afro wig. Thinking about it now, I realize she looked a bit like Diana Ross in Mahogany. I remember how she moved and how she drew the men who sat in the surrounding area into her movements. It seemed to me that many of the men in the audience forgot that the beauties flirting with them were biological men impersonating women—all but Charmaine.

CHAPTER THREE

All Hail the Queens!

Dana Owens

On the morning I met Charmaine; several other members of the Revue were drawn downstairs by the enticing smell of breakfast. First to join us was André, an elegant man who came into the bar freshly showered and surrounded by a cloud of spicy cologne. Lionel came next and quickly asked for coffee to dull the headache from his caffeine withdrawal. Aaron entered a few minutes later, complaining that he was unable to sleep because of his rumbling stomach, exacerbated by the smells coming from the cook's kitchen right under his room. All of the performers were greeted warmly and offered seats at the tables. I immediately took their breakfast orders, put a steaming mug of black coffee before Lionel and turned the orders in to the cook.

Charmaine was the next one down the stairs from her room. She stood about 6'5" in flat shoes and was dressed in a pink track suit. Her naturally black hair was pulled back into a neat ponytail. Even at that early hour, she was made up beautifully, not with the heavy stage makeup they all wore the night before, but with a day-time makeup that made her look fresh and glowing. She was the only performer who was not male-identified. Lionel, André and Aaron (and later, the other four members of the Revue) told us that they had been doing female impersonation for a very long time but that they did not identify themselves as female. In fact, they were quite clear that they were male. Charmaine never made any of these assertions, and we never saw her in anything but female clothing, hairstyles and make up.

There was something about Charmaine that drew me to her. This must have been reciprocal, because we just organically started to hang out together. That afternoon, when I left the Seashore to relax before my split shift that evening, I invited Charmaine to my modest home across the street. We cooked fried chicken, collard greens and other soul food and talked for hours. Charmaine was a fabulous cook, and while the Revue was at the Seashore, we did a lot of that.

I was so happy when Tyrone told us he had offered the Pearl Box a second week at the Seashore. The place had been so crowded for their shows that he had added a second show each evening. However, he found that

he was forced to turn away angry people who came to see them, due to the sheer lack of space and the safety issues associated with having so many people in an area with only one entrance/exit.

Throughout the two weeks we spent together, I never saw Charmaine as anything but a woman, and it never crossed my mind that we were anything more or less than two female friends who shared many of the same values, thoughts, dreams and ideals. Although we never discussed it, I realize that my relationship with Charmaine was the first meaningful one I had ever had with a person who is trans-identified. She did eventually tell me that she had been married and had fathered two sons, but this was said only in passing and, since it didn't impact our friendship, that fact about her was never an issue. When Charmaine and the Revue left the Seashore to continue their tour, I cried. In fact, we both did.

CHAPTER FOUR

Are You for Real?

Unknown

Some years passed before my next major personal encounter with anyone who self-identified as transgender, but I would never forget Charmaine or the impact she made on me—not as a transgender woman, but as a person with a heart, a soul and a spirit. The fact that she was transgender was incidental to me. I'd like to say she influenced my perceptions of transgender, gender-variant and gender non-conforming people, but I never really had any pre-conceived notions about what those terms meant, and I never understood why it was such a big deal for some people around them. To me, Charmaine personified what it meant to be a good friend, and she also helped me view the beauty of diversity that becomes apparent when we are able to get out of our own way and open ourselves to others. If I was okay for her, she was definitely okay for me.

My relationship with her made me question myself every time I heard a disparaging remark related to someone who was of a different sexual orientation or gender identity, or who expressed their gender in unique ways. Each time, I would ask myself, "What about me makes you think that it's okay to say these types of things in front of me?" From the late sixties through the mid-eighties, I would challenge these things, sometimes with vehemence and anger. As I matured in my attempt to be a soldier for social justice, I began to see the benefits of doing the same type of challenging, except through education. In spite of all this growth, it still staggers me when uninformed people say hurtful things in front of me, and I wonder to myself, asking silently, and sometimes out loud, "Can you really hear yourself?"

In 1995, I was the director of a large outpatient program in New Haven, Connecticut. This program focused on alcohol and other drug addiction recovery for African-origin and Latino people. All the staff members were from one, the other or both groups and we drew members of both communities to our program because of the culturally relevant, outside-the-box nature of the services. Most of the Latinos on staff were from the Spanish-speaking islands of Puerto Rico or the Dominican Republic.

One day, a young Latina came to the front desk and asked for admission to our program. She was attractive and, frankly, better dressed than I

or most of my staff. The Intake Coordinator was out for lunch. The clinician assigned to complete the intake for this woman was an African-American male and a devout Muslim.

Because of the culturally relevant nature of the services we provided, we were also appropriate and responsive to the cultural needs of the staff. So the clinician, Malik, had private places in which to pray five times a day, and he also went to the masjid for juma prayer on Friday afternoons. No one saw this as anything different from the respect for nationality, ethnicity and faith or spiritual tradition that we would ensure for anyone in the agency's family, either staff or people receiving services.

I saw Malik take the young woman into one of the private rooms to complete the screening and intake assessment. The bathroom where we conducted supervised urine toxicology screens was across the hall from my office and slightly to the left. About an hour after they went into the room, they emerged. I heard Malik tell the young woman that he would ask a female clinician to come in to supervise her screen. She related to him that this was not necessary. She told him, "I have the same equipment as you." I held my breath for Malik's response. He told her that someone would be getting back to her with a date for her to enter the program, and then he sent her on her way. Her toxicology screen was not completed that day.

CHAPTER FIVE

When Did it Become About You?

Unknown

Every afternoon, if we had new people coming in to the agency, we had a team meeting. If this happened in 2013, I would ensure that the individuals being discussed were at the table before discussing them, but in 1995 we made decisions about what was “best” for people in very paternalistic ways.

On the day the transgender woman, Mercedes, had her assessment done, we met as a team. Malik presented the results of her assessment. Every time he used a pronoun to speak about Mercedes, he called her he. I would correct him and call her she. He ignored me and continued to “mis-gender” her. It wasn’t long before one of the Latino clinicians joined him to commiserate. After many corrections, Malik finally declared to me and the rest of the team that, as long as he has a penis, he is a male.

Members of my staff had glaringly strong feelings about Mercedes, and I confronted them head on. Malik made a point to tell me what “the Koran says” and Jorge even cited different verses in the Bible that an MCCA minister colleague of mine calls “clobber passages.” I asked them what this had to do with Mercedes and why this was even relevant to the presentation of her assessment. I challenged them to tell me how their religious or spiritual beliefs had even the most remote impact on her or on her recovery. Of course, they were unable to answer this simple question that had such a complex and emotion-laden answer—if there was indeed any answer at all.

I put a stop to the conversation and realized I needed to approach this differently. I asked the other clinicians and the Intake Coordinator to present the rest of the people who had come for admission that day, and then I ended the meeting. When I returned to my office, I called the young woman myself and asked her to return the next day. An interesting note for me was that many of the Latinos receiving services at the agency knew Mercedes, and not one of them had an issue with her being trans-identified. It was only my staff, and that was unacceptable.

I was at a loss as to what to do with the ugly bias I saw surfacing in some of my clinicians. I was unsure whether the two who had been open about

it were the only ones feeling it, or whether they were just the only ones bold enough to give it voice. Were they speaking for others? How could we call ourselves a program that promotes the cultures of others and uses that promotion to facilitate healing, when there were aspects of culture that we stifle and malign? Was culture defined only by ethnicity and nationality? It was then that I began to arrive systematically at the real meaning of the term “culture”—what it truly meant to me.

I had heard of GLSTEN, the Gay, Lesbian, Straight Training and Education Network, an anti-bullying organization that did wonderful work with school children. In my professional career, I’ve usually gone on the premise that it’s a lot easier to ask for forgiveness than it is to ask for permission, so I called the local chapter and told them of my dilemma—with a sense of shame—and they told me they would come to address my staff. I then called the executive director of the foundation of which my program was a sister agency and told him about my plans and the events leading up to them. The other agencies in the foundation at the time were a Spanish-speaking residential program for Latinos and an outpatient program for women. When I told the executive director what I had already planned, his response was immediate. He said to me, “Oh no!” I thought I was headed for trouble, but he said, “That’s not for your staff only. I want everyone to be there!”—and everyone was there for the two sessions we had with GLSTEN.

We actually lost a staff member from the women’s program, who told us straight out, “I didn’t sign up for this.” I can only imagine the pain she may have caused the women who might otherwise have been able to be out within that program as lesbian, transgender or gender-variant. How sad for them. How shameful for us.

Even though I tried to keep things positive for the young Latina who was at the center of all this activity, it was not enough. She did not feel affirmed in her care by my staff, and she left before too long. I have no idea whether she entered recovery through another door or whether she is one of the statistics we count—the people who succumb to addiction before they are able to find a place where they can achieve wellness with love and support.

Both Malik and Jorge, the two staff members who had refused to acknowledge Mercedes as the woman she was, had notes written in their personnel files. If I hadn’t moved on to a position with the State of Connecticut, neither of them would have kept their jobs, because they

were both one note away from termination. I never forgot Mercedes or how different my relationship with her was from the one I'd had with Charmaine almost thirty years earlier.

It's supposed to make sense that, with each passing generation, the acquisition of knowledge should lead to a reduction in bias and hatred. However, when I reflect on the experiences I had with Charmaine and the community into which she and the others stepped in 1968, even after they were long gone from it, the talk around the Seashore Inn was about how much people had enjoyed the shows, how interesting the performers were as people and how the patrons looked forward to their return. There was not one disparaging comment. I was privy to all those conversations because—as is widely known—bartenders, like barbers and beauticians, hear everything.

CHAPTER SIX

*Beauty's Only Skin Deep,
Yeah, yeah, yeah.....*
Norman Whitfield

It seemed to me as if the teachers kept coming, as in the phrase, “when the student is ready, the teacher appears.” Even in my work with the State of Connecticut, my soon-to-be realized position as an out ally to the Trans* communities was being honed, strengthened and groomed.

This next teacher came in the form of a sixty-year-old transgender woman named Lucy. Lucy was receiving outpatient services for a challenge with major depression from one of the therapists at the State of Connecticut’s Region One Lead Mental Health Authority in Bridgeport. My office was located within that large building. I’d ceased providing clinical care some time ago, so I didn’t have anything directly to do with the therapeutic services being delivered there. The memory of how Lucy and I even connected is vague or nonexistent to me now.

However, one day Lucy and I did make a connection, and she came out to me about her gender identity. I suppose she was looking for some type of reaction, and when she saw none, we became fast friends. She would stop in to say hello or to chat for a while when she was in the building. Often she came bearing gifts in the form of books she lent me on the transgender experience, books she had read herself in an attempt to make sense of her reality.

We talked about her Mom, who was deceased, and how she felt she had lost her only ally when her Mother died. She told me she was taking care of her Dad, who was ill, and how he had no tolerance of her gender and the way she chose to express it. She told me she had to “dress like a man” around him, and described the discomfort she experienced, even though she’d do it for his sake. She knew his time on earth was limited, and she wanted it to be as peaceful as possible, even if it meant enduring her own discomfort.

She would come to her appointments with her clothing in a bag and change in one of the bathrooms. Other people coming for services often laughed at Lucy. They didn’t see what I saw in her.

One day, Lucy came in to my office, sat down and said to me with some conviction, but mostly with sadness, "Sade, I've come to the realization that I will never be a beautiful woman." I said to her, "Lucy, if you're talking about physical beauty, most of us never will." I pointed to my chest, telling her, "True beauty is in here, and you are a beautiful woman." I told her I knew a ton of physically beautiful people who had really challenging spirits that detracted from their beauty. Lucy smiled. She was my friend, and I was hers.

CHAPTER SEVEN

Not Everyone Experiences Brotherly Love or Sisterly Affection here unknown

I'm once again working with my mentor, whom I've been following around for the past twenty-plus years. I say that I want to be like him when I grow up, even though I'm past grown and I'm more than ten years older than he. I understand his vision, the language around it and the heart and soul of it. So I support it and, in turn, I support him.

He has nurtured a vision around the creation of culturally relevant behavioral health services for transgender, gender-variant and gender non-conforming folks, not because he understands this entire story, but precisely because he doesn't know the story in its entirety. He doesn't nurture it because the State has said that access to care for LGBTQ individuals is one of its priorities, and he knows they won't be able to give us additional money to make this happen. He has supported this dream simply because it's the right thing to do, and that's just how he is—period—and I followed him to Philadelphia.

When I first came to Philly, I met a beautiful African-American woman, an acknowledged Elder in the transgender community, who unabashedly identifies herself as a part of it. Her beauty comes, not only by way of the physical, but also by way of strength and conviction. She began the yearly celebration of African Trans History Month, held in February at the same time as the larger celebrations, and I've had the pleasure of attending for a number of years. We were introduced through a colleague where I work. I was immediately impressed with Celeste as a person and as a social justice advocate who was unafraid to speak about the injustices that she and others of her community have endured at the hands of those of us who have been charged with helping.

We sat on panels together while I and others in the audience listened as she told us how, in below-zero weather, she and others in her community had been made to take off their wigs, dress in gender inappropriate clothing and remove their nail polish, just so they could get a roof over their heads in a shelter for men. She was refused entrance to the women's shelter because her "government name" was male-identified

and because PennDot had not yet loosened its regulations around the creation of identification cards that reflect who people say they are. She's even one of the stars of our Department's Transformation DVD, and she openly speaks about what it means to her to have people listen when she tells them what she needs, instead of making decisions for her. I was in Philadelphia only a few months when my relationship with Celeste began and it is stronger today than it's ever been.

It wasn't long after that I first heard the name Nizah Morris. Ironically, it was not from Celeste or from any of the other transgender or gender-variant individuals whom I have met and with whom I have grown close over the years.

There were a number of consultants who worked with the Department, providing specialized training and technical assistance to us, to the behavioral health providers and to the communities of Philadelphia. One such consultant was a member of the local American Buddhist community. He participated on a task force I created in 2008. Its focus is on culture, and it was designed to drive the agenda of culturally appropriate care for all into both the Department and the provider community. For the task force, culture meant not only nationality and ethnicity, but also faith and spirituality, sexual orientation, gender and gender identity or expression, physical and cognitive abilities and social role valorization; that is, approaches used to help devalued people achieve valued social roles.

After one of our meetings, the consultant walked out with me and began telling me of one of his spiritual community's members who was murdered in 2002. He told me that she was very well loved by others in his community and that her murder was unsolved. He told me she was a transgender woman. I knew that two others of my colleagues were also members of the same Buddhist community, so when I had the opportunity, I asked them about her. Both women spoke of her with love and admiration...and a sense of loss, to them as individuals and to the community.

There was something about Ms. Morris that drew me to her story and her spirit. It wasn't just that she had been murdered, dumped unceremoniously like a bag of garbage on a street corner in Center City and left to die. It wasn't just that she was so well loved by so many. It wasn't just that she was transgender. She just was...

I went to my first Transgender Day of Remembrance just after I arrived

in the City. I remember the faces of the people who had lost their lives to hate, misunderstanding and fear. Most of them had been murdered, and most of the crimes remained uninvestigated and unsolved. There, among the photos and the stories, was beautiful Nizah.

As I witnessed that memorial for these fallen members of the transgender and gender-variant communities of Philadelphia, I thought about what the loss of Nizah meant to the various communities in which she had membership. I also thought about my relationships with Charmaine, Mercedes and Lucy. I knew I wanted to do something, but at the time I didn't quite know what.

I was introduced to other elders in the transgender and gender-variant communities. Celeste told me that if I wanted to know more about Nizah, I should get in touch with one of the other elders in the community. "Auntie" (who has since become "Daughter") shared with me newspaper articles about Nizah and even a copy of a DVD of the memorial celebration she had put together for her shortly after her murder. I also did some research on my own. I was beginning to feel that, even though I had never met her, I knew Nizah. I believe that, on a spiritual level, I did. Since getting more information from my "Daughter" about this woman who was so well-loved, I have kept Nizah's picture in my office with a candle burning in front of it. Her spirit has profoundly impacted my work.

CHAPTER EIGHT

*If You Don't Stand for Something,
You'll Fall for Anything...*

Alexander Hamilton

In October of 2008, I was appointed to my present position by the Mayor of Philadelphia. This is not my first government job, but it's the highest I've been on the government ladder, and, because of the leadership at the top, it's one where I believe I have a great deal of support in making positive and significant changes in the Department.

I began crafting my vision of culturally relevant care for transgender, gender-variant and gender non-conforming people with a conversation with the former director of the Trans-Health Information Project (TIP). He is also a member of one of the transgender communities. At the time, TIP was administratively responsible to Prevention Point, a program funded primarily by the CDC (Center for Disease Control) and that is responsible for HIV counseling and testing and the syringe exchange program in Philadelphia. Their work is hard and they do it well. I placed a call to the Director, a man who has since become a friend as well as colleague. As fate would have it, the director of TIP was sitting in his office.

The director put me on speakerphone, and I asked the two men the question that would open the door to the creation of what is now known as the Morris Home. If we were to create a residential program for twenty transgender and/or gender-variant people, could you fill those beds? They asked me if I was serious. I assured them that I was and asked them to come in so we could talk. They wasted no time setting an appointment, and, in the interim, the TIP director promised to secure some of the numbers we would require in order to validate the need.

Within days, he was calling to let me know that an e-mail was coming from his case manager, a law student (now an attorney) who was not only a member of one of the communities we hoped to reach, but who had also worked closely with the few agencies that provided outpatient services to transgender and gender-variant communities. When I received the e-mail, I was somewhat taken aback by the sheer weight of the numbers I saw represented there. TIP had provided estimates based on the numbers of people they had seen within the year 2009 and those

whom the Mazzoni Center had seen for services. Mazzoni is an outpatient program serving the behavioral and physical health needs of some lesbian, gay, bisexual and transgender individuals in Philadelphia. The e-mail stated that between 3,000 and 10,000 Philadelphians identified themselves as either transgender, gender-variant or gender non-conforming.

Shortly thereafter, I met Jazlene. She came to my office with one of the providers of personal care home services in the city. He had heard that we had plans to provide behavioral health services for transgender, gender-variant and gender non-conforming people and wanted to get information as to how he could become part of this work. Jazlene is a woman who was identified in puberty as being intersex not through ambiguous sexual organs but through chromosomes. She was employed part-time by this provider and came along with him as support for his request. I was immediately drawn to Jazlene's personality and we chatted amicably for nearly an hour. Jazlene gave me her card and, in the intervening months, she and I became friends and later, sisters.

Over the years, I have recognized the concept of family of choice or what a colleague of mine calls "logical" family (as opposed to biological) as a recurring theme with communities in which I have membership and with which I am involved. This is and was common in communities of color, especially in the early days of the civil rights movement, and in lesbian, gay, bisexual and transgender communities. I am called Mother, Auntie and, by Jazlene and others, Sister. I'm proud and honored to be thought of in this manner because I know what those designations mean to the people who have conferred them and also what responsibilities they carry. She was the second member of one of the communities we hoped to serve who joined the Advisory Group.

We had the numbers, so it was time to look at the research. Luckily, a (2008) study had recently been completed in Philadelphia. With funding from the Commonwealth Universal Research Enhancement (CURE) Program, Lee Carson, a research associate with Public Health Management Corporation (PHMC) in Philadelphia, had developed what has come to be recognized as seminal research on the state of physical and behavioral health needs of transgender and gender-variant people in Philadelphia: *Physical and Emotional Health Needs of Transgender Individuals in Philadelphia: Summary of Key Findings* (2008).

One of the researchers from the Department's Transformation Research Unit conducted an exhaustive literature search on residential behavioral

health programs for transgender and/or gender-variant people in the US and came up with nothing. There were a number of solid shelter/supported housing-type programs, some of which had vocational, educational and housing components connected with them. However, none of them was a primary behavioral health program. We had no model. As in many of the innovations in the behavioral health field, Philadelphia would again be the first.

Using Lee's study, the information from TIP and the literature search completed by the Transformation Research Unit, I authored the white paper, *Moving Toward a More Inclusive, Culturally-appropriate Service System for an Underserved People in Philadelphia—Addressing Behavioral Health Care for Transgender and Gender Variant People*, and began to market my vision to my colleagues on the Department's executive management team.

CHAPTER NINE

*You Must Be the Change
You Want to See in the World.*

Arun Gandhi

It was time to go to the State with requests for the new rates from Health Choices, the state entity through which federal dollars are funneled. We had not yet experienced the cuts to our budget with which we now struggle to reconcile. My commissioner asked me to give him my “wish list.” At the top was a residential program for transgender and gender-variant people that would be holistic in its approach, addressing both the behavioral and physical health needs of these communities, and that would be aligned with our Philadelphia Behavioral Health Services Transformation Practice Guidelines for Recovery and Resilience Oriented Treatment, a document that I had co-authored, and that was released to the community in April of 2011.

Not everyone was as enthusiastic about the idea as I, but the support from my commissioner was unwavering. When our state representatives from the Office of Mental Health and Substance Abuse Services (OMHSAS) joined us for a run-down of the programs and initiatives we wanted to see funded in the new cycle, Morris Home was on the list. Our reps surprised me when they declared that this was one of the State’s priorities. OMHSAS had formed an advisory group called Keystone Pride to investigate issues of access into behavioral health services for lesbian, gay, bisexual and transgender people in the state, and that group had made detailed recommendations to them. Morris Home fit right in with these recommendations.

The time came for some of the members of our executive team to go to Harrisburg to defend the plan we had presented and the rate we had proposed. Morris Home was put briefly on the table for discussion. The rest of us on the executive team watched the hearings on closed-circuit TV, and I held my breath. The state officials seemed very much in support of the concept. However, they made it clear that we wouldn’t receive any extra funding for it: Great idea—no more money.

Undaunted, I went ahead and acted as if opening the Morris Home was a foregone conclusion. I called together groups of transgender and

gender-variant people from Philadelphia, a few of us allies and a couple of members of our Department. The main players in what I called the Transgender Advisory Group were always the ones from the communities we hoped to serve, and, for me, it was their voices that were always the most important ones at the table. Of course, Celeste was center stage, along with Jazlene and a woman named Vivica and other people from the communities. I met them not long after coming to Philadelphia, and they've since become more sisters and brothers than friends. People came and brought others with them. Before long, we had an active, enthusiastic group, but I can tell you, they didn't believe me in the beginning. They had been lied to so much and so often that they wouldn't believe we'd create a program of this sort until they saw it. I didn't blame them.

I presented my white paper and the vision of a behavioral health program that was holistic in nature, treating the entire individual instead of just disparate pieces. I shared with them that I had three "must-haves" for any agency we might choose to open this most important service: 1) it must be holistic, providing concurrent care for alcohol or other drug use challenges and mental and physical health challenges while specializing in transgender health and the therapeutic use of hormones; 2) it must be staffed by members of the transgender, gender-variant and gender non-conforming communities; and 3) it must be named the Morris Home. Most of this was fairly unheard of in the Department's involvement with program start-up. But the Morris Home was not going to be your garden-variety program!

CHAPTER TEN

A Needle in a Haystack The Velvelettes

I had an Advisory Board, I had a white paper, and I even had some support from my colleagues in the Department. The next large hurdle was finding a program in Philadelphia (one with which we already contracted) that was willing to convert some of its residential beds to beds for transgender and gender-variant individuals—not as easy as it sounds.

There were programs that had provided services to individuals from LGBT communities, but in most cases the “T” was a lower-case letter and they admitted that their knowledge of these groups was limited-to-nonexistent. One program even shared that, in the past, it would “curtain-off” a portion of a wing so that transgender individuals could have some privacy. Their intentions may have been good. The image made me shudder.

The director of the Office of Addiction Services in our Department provided a list of three agencies that either had delivered services to LGBT communities in the past or were among those he determined would be able to achieve success with this venture. Again, we had no model, and we were creating as we went along.

I had originally wanted to have the program licensed as a mental health facility, but my colleagues advised me to license it as an addiction treatment facility because, at the time, it seemed like the path of least resistance. No one thought the people we were going to try to reach didn’t have concurrent challenges, so I went forward interviewing the agencies he had given me.

The third and final interview was with Resources for Human Development (RHD). I remember the quality of the meeting. Something about it just felt right. I actually knew within the first ten minutes that we’d be giving Morris Home to RHD for implementation. I met with the Associate Director and some members of her team. I was immediately impressed with her warmth, spirit and enthusiasm, and I recognized in her the social justice advocacy qualities that are so important to me. When she and her staff talked about RHD, a large system with programs in many states across the nation, I knew that this attitude was not unique

to the Philadelphia branch of their considerably vast family. It was a system-wide approach nurtured by the organization's executive director. It would never be okay for any RHD program or staff member to fail to affirm any person or group of people based on their culture. People, we have a winner!

I clearly remember the first time I brought the Advisory Group over to RHD to introduce them. RHD welcomed us with a meal and we were brought to one of their conference rooms to meet and to share their food with them. I was immediately impressed with the fact that no one in RHD has an office, not even the executive director. The corporate office staff works in an open space, where there is a free exchange of information and ideas across all departments. The main floor is ringed by conference rooms, some small and others spacious enough to accommodate large training events. All of them are named for civil rights leaders and heroes.

As we enjoyed our meal, they told the Advisory Group about RHD and what they would offer the Morris Home in the way of support. By this time, the associate director had assembled an entire team of people just for the Morris Home. There were location managers, clinical managers, consultants, finance specialists, and other high-level corporate staff and everyone there seemed genuinely excited about being part of the creation of this innovative program.

I noticed the face of my Sister, Jazlene. She was crying. I asked her what was wrong, and she said, "I never thought I'd see this in my lifetime." They were finally beginning to believe.

CHAPTER ELEVEN

Not In My Backyard!!!!

George Carlin

In my forty-three-plus years in the field, I've seen NIMBY (Not in MY Backyard!) many times. Sometimes it's covert, and sometimes it results in angry community meetings with hate signs carried or spray-painted on buildings, picketing, broken windows or attacks on individuals. But the NIMBY we experienced when we tried to site the Morris Home within a community, an area of need not far from where I live, surpassed anything I have ever seen.

RHD has a developer with whom it had worked in the past. The developer has experience in rehabilitating buildings for use by health programs, and a number of them were RHD's. He bought a very large former apartment building that sat on a major corner and that had stood vacant and neglected for a long, long time. It was a rodent-infested eyesore in the community. All of the copper plumbing had been stolen from it, and it had turned into a popular place to use drugs.

One of RHD's many programs serves medically frail elders with mental health challenges, and that program had outgrown its space and needed to relocate. The building under consideration had two separate sides, so it seemed to be the answer for both the elders' program and the Morris Home. I remember going to see the building one beautiful spring morning. I met the RHD staff there and, even though there was evidence of the neglect this building had seen for many years, RHD staff and I could see, through the torn walls and rat droppings, a vision of the haven that space could become.

There were three floors, space for group and community rooms, an elevator and even a floor that we could use for transitional housing once people left formal residential care. There were one-bedroom apartments with private bathrooms and space for people to maintain their dignity while traveling their roads to transition and recovery. I remember leaving that visit ecstatic.

In January of 2011, we began our quest for community collaboration with a two-hour meeting with the City Council Member in the 8th District, where the building is located. We knew she was retiring from

City service and would not seek reelection but would be in her seat until the next election in November. We told her of our plans, and she told us the neighbors in the area would probably be more content with our program than they would with a residence for students from the local university, since most of the complaints that came in to her office were about the students. We asked her to give us names of the local groups and community leaders, so we could begin to make contact, but she told us she knew of only one neighborhood group and, to the best of her knowledge, it had not met for years.

As the developer continued to rehab the large building, curious neighbors began to appear on site. They wanted to know who had bought the building and what their plans were. One of the foremen told them that mental health programs were going to be located there, though I doubt that he used those words. All of a sudden, almost overnight, groups that hadn't met for years came together in protest—and the five months of struggle began.

CHAPTER TWELVE

*Makes Me Wanna Holla;
Throw Up Both My Hands...*
Marvin Gaye & James Nyx, Jr.

I was in Tulsa presenting a workshop at the SAIGE (Society of American Indian Government Employees) Conference in June of 2011, when RHD had its first real encounter with the community in which the planned site was located. SAIGE is a professional organization of which I am a member, and my presentation had been planned far in advance. That was the first and only community meeting I missed. It was also the one that gave us hope that the push-back to our plans would not be significant. In fact, the associate director and her staff were quite hopeful.

We were invited back to meet with the neighborhood group—the one that had not met for years—within the next few weeks. What we met there at the meeting that night was hardly the response we had hoped to receive. People were angry. They told stories of things they “knew to be true” and accused transgender people of being predators, because they had “seen it themselves.” I really wanted to challenge this and to educate. I thought about Nizah and the others who had died, and how they were preyed upon—hardly the predators. I thought about the women I saw every night in front of my house, trying to keep food on the table. Some of them ended up in Hunting Park, a few blocks away, either severely beaten or—in some cases—dead. Predators?

The anger, bias, fear and sheer lack of information among the people who came to that second meeting were stunning. The RHD staff and I left the meeting feeling as if we’d been shot full of holes. All we could do was stand on the sidewalk outside the community center where the meeting had been held and look at one another, speechless. The community had accused the City of doing anything we wanted in their communities while folks who lived in Philly’s more affluent communities were left undisturbed. They had made disparaging remarks, not only about transgender people, but also about people who had mental health and alcohol or other drug use challenges. We were informed that there would be more meetings. We agreed to attend.

New leaders began to emerge from the community, and the ones who

had been inactive for some time became active once more. The third meeting we attended was in one of the community rooms of a hospital in an area not far from the site. That meeting was sponsored by the Ward leader, an elder who seemed to have some respect from those who attended. Also in that meeting were aides from the state and federal elected officials' offices and someone we were seeing for the first time. She sat stone-faced with a clipboard in her hand, furiously taking note of every word we said. We were unaware at the time that this woman would be spearheading yet another group to block our siting either Morris Home or the other RHD program in that building. The ironic thing was that she didn't even live in the community!

This meeting produced more of the same results, including questions to me about why the City was using capitol funds to rehabilitate this building. Most people who know anything at all about the Department of Behavioral Health and Intellectual disAbility Services are aware that only 1% of our entire budget—a budget that once exceeded one billion dollars—comes from the City's general fund. We weren't expending funds to rehab the building. The developer was doing it through his own firm and using his firm's money. They asked us questions about licenses and permits, all of which the developer had been required to secure before his contractors ever lifted a hammer. They hurled more hateful comments at us. All the while, the woman with the clipboard sat near the front of the room, writing as if her life depended upon it.

Again we left the meeting trying to find some good in the comments we had been subjected to, and the accusations that we lacked respect for the community. It was getting much harder.

RHD's associate director decided we should use a different approach and set another meeting, this time at the organization's Corporate Offices. The meeting would be held at the dinner hour, so RHD would be the host and would provide food for the attendees. I made plans to attend.

What we did not know was that the woman with the clipboard had organized another group, had given the group a name and had set a meeting time and date. RHD and I were sent an invitation. It was for the exact same date and time as the one set by RHD. The associate director invited the splinter group to come to the RHD meeting, but the group declined. I declined the other group's meeting in writing, a move for which they severely criticized me later.

Few people showed up at the RHD meeting. The ones who did were mostly elders in the community. The CEO of RHD attended this meeting and spoke about RHD's history in communities and how those communities were enriched by RHD's partnerships with neighborhood and local business organizations. One of the elders came in with a long letter she had written decrying transgender people and affirming why they should not be part of the community. It was bad!

I want to note at this time that I had made the decision, and the RHD staff had agreed, that we would keep the transgender and gender-variant people on the Advisory Board away from these meetings. Looking back on the advisability of this decision, I stand by it, although I understand when the people of the communities we hoped to serve tell me that I should have offered them the choice. If the transgender allies of RHD and I were deeply affected by and offended at the way the community responded to us, I know the people who had experienced that sort of response in their everyday lives as well as in our systems would have the same reactions. Why put them through this? We would later include Jazlene in the last meeting, but it didn't go well at all, and I often wonder if she was being honest about how she felt representing transgender communities in front of what amounted to an angry mob.

The CEO followed the presentation of that offensive letter by passing out the city ordinance that prohibits discrimination by any publicly funded organization based on sexual orientation, gender or gender identity or expression. This put a stop to the negative remarks about transgender people with which we were assaulted at every community meeting. However, now the tactic was to focus on not wanting "crazy people" or "drug addicts and alcoholics" in the neighborhood. I wonder if they are seeing them in their community now—existing without care or attention—because they are indeed there! They have always been there...

The meeting actually ended on a somewhat positive note. Two women in the provider community who had been at the "splinter" meeting came to ours after sitting in on the other for a while. They reported that the crowd that had gathered at the other meeting was loud and angry. They also reported that the information they heard in the other meeting didn't seem to jibe with what was being discussed in ours. RHD and I felt a modicum of hope.

CHAPTER THIRTEEN

With the Best of Intentions

James Madison

It was not long after we held that meeting that we found out about the attorney who had been hired by the community to defend it against us. She began to request documents from the Department under the Freedom of Information Act. She also made numerous calls to the City's Licensing and Inspection Department, to State, Federal and local elected officials and to one of the City's Deputy Mayors, who heads the city's Department of Health and Opportunities. Those calls trickled down to me, and I received inquiries from different City departments almost daily. I was regularly briefing my commissioner, so that he could respond to the State, Federal and local officials.

In November of 2011—and in spite of all of this—never one to give up, the associate director at RHD decided we would attempt “one last time” to reach the community and create collaboration. The meeting would be held at RHD. They would serve dinner, and the meeting would be informational in nature. We would direct the flow of the conversation, using the time for “teachable moments” for the community. We wouldn't allow yelling, screaming, name-calling or negative remarks. We would have good food and break the large group into two smaller groups, and then would come together at the end. We would ask Jazlene, who had just been given a significant world-wide ministerial position within her faith community, to speak as a clergy member as well as a representative of the original Advisory Board and member of one of the transgender communities we hoped to reach.

On that evening in November, community members were shuttled to RHD. Many of them arrived with an air of hesitancy and apprehension. Many of them seemed as if their opinions had been formed already. They ate the meal that had been catered for the event, and the associate director decided it was time to start the meeting.

As we waited for people to file into the two rooms where we would be meeting with the groups, the attorney approached us and told us how she wanted the meeting to go forward. I was so proud of the associate director who informed her, with a great deal of class and style, that in fact the meeting was ours and would be held in the manner we had planned.

The attorney was told that she was welcome to stay, but that RHD was the host and she was in their house.

I was in the half of the group with Jazlene as she began by telling them she was a minister and servant of God. There were people in the room who seemed impressed by that. She told them she represented the work that would eventually be Morris Home, and then she told them she was transgender. It was there that she lost them. I saw people shaking their heads, looking away from her and even rolling their eyes. One large man wearing the collar of a cleric was busy with his Ipad, and we found out later that he was both video- and audio-taping everything we said. I would later find an opportunity to address that.

Try as we might, the spirit of what we wanted to do was lost to people who had come for a fight. They hurled accusations that we lacked permits; we were misusing city funds; and we were attempting to put the community at risk for increased crime, violence and harm to the children living there.

I noticed that there were video cameras in use, and I informed those present that they hadn't asked for permission to tape the meeting. They countered by telling me that in fact I worked for them, and they had a right to tape anything they wished. A look of sadness and then disgust passed over the face of my transgender sister. However, it was there for only an instant. I thought about her sitting right next to me and how she might not wish to be taped. It seemed as if none of us was going to have our wishes honored on that night. The associate director called the meeting closed.

The associate director and I had always known we would open the Morris Home, and that night, in spite of the continued hatred and vitriolic behavior directed at us in the RHD Corporate Office, our resolve was strengthened. We had cried our tears and several of us had become physically ill with fatigue and the constant assaults from the community and its "representatives." In spite of all of this, we were not going to stop pushing forward.

I wonder if the community that fought us so hard has figured out that they may have won the battle, but they have resoundingly lost the war.

CHAPTER FOURTEEN

No Weapon Formed Against Us Shall Prosper.....

Isaiah 54:17

We endured only a few more days of this behavior, and only a few more requests for every record the Department had around the creation of the Morris Home, before the associate director and her team came to the decision that the people who would take advantage of the services of the two programs would be in danger if we continued to fight for our right to be in that community. We would move the Morris Home into one of their existing properties.

The building they were proposing was vacant and has eight single rooms and five full bathrooms on three floors. This was ten fewer bedrooms than the other site offered, and I was saddened by the need to reduce our numbers by more than half. However, the associate director assured me that they would make the building beautiful for the people who came there for services, and they set to work doing just that. There was space for group rooms and offices, and a beautifully appointed kitchen with new appliances and large, restaurant-quality stoves for cooking and baking.

One of the strongest supporters of the work of the Department is the City Councilwoman in the new location where the Morris Home was to stand. She is also a good friend of the associate director, who had shared an extremely collegial relationship with her during the many years in which RHD had run programs in the location. Things were definitely looking up.

I was invited to come for a tour when the newly hired staff was in place. I stood in the doorway of the much smaller site, and my eyes filled with tears. Even though it was not my dream of the eighteen spacious one-bedroom apartments we would have had in the other site, it was the Morris Home. On that day in early winter when we began to overcome different, much less traumatic challenges, I knew Nizah was with us.

We would be required to go through all the numerous licensing requirements, but RHD was expert in this process and sailed through it, as I knew they would. It was not combative, and not terrifying. It was just a process—and a long one at that. A member of the staff at our managed care organization, someone whose work I admire a great deal, would

be credentialing the Morris Home in order to bring it onto the panel of providers with whom we contract for care. Our Director of the Office of Mental Health would provide assistance all along the way and help us by ensuring that the specialty services would be reimbursable through Health Choices dollars. I don't have that type of fiscal knowledge, so I appreciated her a great deal. Rates would be established.

I was set to have bilateral knee surgery four months later, in early April of 2012, and I went into this with the knowledge that RHD "had their act firmly together" and had passed all of their inspections with flying colors. I had done a great deal of preparation with our teams within the Department and with our managed care organization, which would be credentialing the Morris Home and approving services for the people coming for care. Fortunately, the managed care organization is part of the Department and, for the most part, they were an easy sell. Most had experienced difficulty in the past with placing transgender, gender variant or gender non-conforming people into our existing programs and, even with only eight beds, Morris Home held hope of culturally relevant care for these groups of people, making their jobs at least a bit easier.

CHAPTER FIFTEEN

Joy in the Morning

Psalm 30

Morris Home staff began to create memoranda of understanding with hospitals and other health care organizations and partnerships with other behavioral health services, in order to provide a continuum of care for the people coming to Morris Home. Street outreach created a solid list of people who wanted/needed the services. One of these people, doubtful that such a place existed, would pass by the location on a daily basis, just to ensure that the Morris Home was real and was still there—that this had not been a dream.

I was in a skilled nursing facility, receiving rehabilitation for my new knees, when two of my Morris Home sisters came to see me and told me we had hit a snag. I called my commissioner on the Sunday evening I received the information, and, two days later, on the 17th of April, 2012, we were cleared to admit the first of eight people who would come to Morris Home to begin to save their lives. We formally admitted the first person on the 18th of April, 2012, and by the following week we were full.

Because I was unable to go out for so long, and even though the doors had been officially open for a month, RHD held off on a formal ribbon-cutting ceremony until the end of May, 2012. Even then, it was difficult for me to walk, but there was nothing that would have kept me from that ceremony. Jazlene and her husband came to my home to drive me to the ceremony. I sat in the front row of the packed room where there was standing room only. Present were my commissioner, members of the original advisory board, RHD executive staff, people from DBHIDS, community supporters and the most important people there: the ones who were receiving services. An overflow of people stood on the porch looking into the room, where individuals who lived in Morris Home spoke about how grateful they were for its presence in their lives.

I knew Nizah was standing with us when my commissioner, the associate director and executive director of RHD and I cut the blue ribbon that was draped across the porch of the Morris Home that day in May of 2012, making the vision of culturally appropriate care for transgender, gender variant and gender non-conforming people a solid reality.

EPILOGUE

Ninety percent of Morris Home's staff have membership in transgender, gender-variant or gender non-conforming communities. The Morris Home has a waiting list. Is everything perfect? No! We have no model, no workbook—nothing! We're creating practice-based evidence as we go. Residential services are among the hardest to provide. Add the other layers of gender identity and expression to these, and you have real challenges. We are also charging RHD and the Morris Home with ensuring that their services align with the Philadelphia Practice Guidelines. RHD is stepping up to the plate beautifully and has responded to challenges as they arise....and they do arise! We're not looking for perfection. We are striving for excellence—and RHD is excellent.

On the 18th of August, 2012, I accepted an award from TransFaith in Color and the Freedom Center for Social Justice at their conference in Charlotte, NC. It is their first Trailblazer Award, and the plaque reads "Trailblazer Award—Ms. Sadé Ali and Morris Home in recognition of the groundbreaking work you have done to improve the quality of care and support of those you serve."

I accepted this award on behalf of the women of Morris Home (at present, September of 2012, all of the people receiving services identify as such) and in memory of Nizah Morris and all other transgender, gender-variant and gender non-conforming people who have lost their lives as a result of hatred, bigotry and lack of understanding. Miss Major Griffin-Gracy, an African-American transgender woman and living legend in the fight for basic civil rights for transgender, gender-variant and gender non-conforming people, was in the audience. It was a profoundly humbling experience to look into her eyes and to see her nod her head in acknowledgement.

Shortly after I finished what I thought was my portion of this narrative, we lost yet another twinkling star from the galaxy of transgender communities. Kyra Cordova (Kruz) was shot and killed on the 3rd of September, 2012. She wasn't found until days later and she remained unidentified. The press, even the paper that identifies itself as the mouthpiece of LGBT and Q communities in Philadelphia, reported our dear Kyra as being "a man in women's clothing." By the time her next of kin were notified, it was days later. Members of her family of choice and the rest of us who knew and loved her, learned of her death on the Sunday after Labor Day and we were devastated.

Many of us, both in the transgender, gender variant and gender non-conforming communities and those of us allies who stand behind and support, will be

watching both the media and law enforcement. We will be watching to ensure that the tragic crime of the murder of yet another transgender person does not go unsolved and, that when it is reported in the media, it is done so with the dignity and respect deserved by any human being. Kyra was 27 years old.

On the heels of our loss of Kyra, another young woman was lost to us in a murder so horrific and animalistic that police describe it as the most brutal they have ever seen. Diamond Williams was found in a field in the Strawberry Mansion section of Philadelphia, her body cut up into pieces, making identification difficult. A week later, also in Philadelphia, a young woman was shot in the head and, although she survived, she has a bullet lodged in her brain and her survival is in the balance.

Words cannot express my profound thanks to the multitude of people within the Department of Behavioral Health and Intellectual disAbility Services; the staff of RHD, whom I count among my Sisters, my Brothers, my friends; the original Trans Advisory Board and those who joined us as we went along; the many transgender, gender-variant and gender non-conforming community members who have become my “logical” family; and the other allies and supporters who helped make Morris Home real. I will mention only a couple names either to honor the privacy of the rest or for fear of leaving out someone who has made a significant contribution but it is only fitting that I firmly and without hesitation, acknowledge Sheila Colson, Jaci Adams, Rick Feeley, and Adrian Lowe, Esq. For all the rest of the multitude of hearts and spirits who were involved with this work, I will just say, “My heartfelt thanks to all of you!” Many of the major players will most assuredly recognize themselves within the body of this work.

My dream is that one day we will no longer need programs such as the Morris Home; that all providers who receive government funding will view people from any culture, any ethnicity, any faith, any sexual orientation, any gender or gender identity simply as people who have come to save their lives; and that they will promote this concept fully and unconditionally. Until that day comes, we will continue on, as a fellow-clergy friend of mine who happens to be transgender says, “with Trans-Courage.”

Ase-O!

ABOUT THE AUTHOR

Sadé Ali, MA, CADC, CCS, is the Deputy Commissioner of Philadelphia's Department of Behavioral Health and Intellectual disAbility Services. She holds faculty positions at Brown University, Temple University's College of Health Professions and Drexel University's School of Public Health. She is a member of the SAMHSA/CSAT National Advisory Council under Dr. H. Wesley Clark, MD. Ms. Ali has traveled the US and Canada extensively providing culturally-appropriate recovery management and resilience-promoting training. She has published her thesis, other scholarly articles, and a textbook on culturally appropriate recovery/resilience services and their efficacy in the field.

Ms. Ali has been in the field of behavioral health services for over 43 years. Five years ago, Ms. Ali formed an Advisory Group comprised of members of the Philadelphia transgender and gender variant communities and their allies in an effort to inform the creation of the first holistic, long-term residential treatment program for transgender, gender variant and gender nonconforming people experiencing behavioral health challenges.

One of the proudest moments in her career was the opening of the Morris Home on the 18th of April, 2012. Morris Home is named in memory of Nizah Morris, a transgender woman who was murdered in Philadelphia in 2002. Her murder remains unsolved. Ms. Ali holds a Bachelor of Arts in Counseling Psychology and a Master of Arts in Clinical Psychology with a concentration on the African schools of thought.

Ms. Ali is an ordained Orisha Priest and holds a certificate of Clinical Pastoral Counseling.

“In all my ways of seeing - may I use new glasses,
a telescope and a microscope.
And may I always allow myself to see a circumstance
through the tender hearts of my friends.”

- MARY ANNE RADMACHER

