



*ASHPOfficial - Exploring a Transgender Man's Journey in Pharmacy Practice: An Interview with Alexander Gilmer*  
Transcript

Speaker 1:

Welcome to the *ASHPOfficial Podcast*, your guide to issues related to medication use, public health, and the profession of pharmacy.

Daniel Cobaugh:

Thanks for joining us for ASHP's Practice Journeys podcast. This podcast invites members to share their stories about their professional path, lessons learned, and how their experience has shaped who, and where they are today. My name is Daniel Cobaugh. I'm the editor in chief of HHP, and the vice president of publishing at ASHP, and I will be your host today for the ASHP Practice Journeys podcast. In recognition of Pride Month, ASHP will host four podcasts with LGBTQ leaders in pharmacy throughout June, with me today is Alexander Gilmer. Thanks for joining us today, Alexander. Let's get started talking about your journey as a pharmacist, who also happens to be a transgender man. So, Alexander, I realized that there's so much that I actually don't know about you. So, I thought maybe it would be great if we could start off talking about where you grew up, and how you chose pharmacy as a profession.

Alexander Gilmer:

Absolutely, I actually grew up in New Hampshire, and kind of took the long way to pharmacy as a profession. I decided to go into zoology, I thought I was going to be a zookeeper, and actually moved out to San Diego, and worked for the wild animal park in Escondido, and realized that that wasn't really a sustainable career. I had moved out to San Diego both to work for the zoo, but also because when I came out to my family, and friends in New Hampshire, it didn't really go that well. And so essentially I packed up everything that I owned into my car, and moved pretty much as far away from New Hampshire as you could get. And so, I kind of was exploring who I was at that point, and ended up working for Barnes & Noble, became a manager for them, and realized that just wasn't enough for me, and decided to go back to school.

Alexander Gilmer:

A friend of mine had become a pharmacist in the meantime, between when we graduated college, and she had also gone back to pharmacy school, and really loved it, and so I decided, alright, let me check this out. I love science, and I love people. So let's see how this works out. I got a tech job. I think it was for CVS, and loved my interactions with patients, loved my job, and decided that that was the way to go, and so decided to apply to pharmacy school.

Daniel Cobaugh:



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Where'd you end up going to school?

Alexander Gilmer:

I went to Roseman University in Henderson Nevada.

Daniel Cobaugh:

And so, then you made the move from San Diego to Nevada.

Alexander Gilmer:

Yes, yep.

Daniel Cobaugh:

I probably just pronounced that wrong. I guess, it really should be pronounced Nevada, shouldn't it?

Alexander Gilmer:

Yes, it took me a while to get there, but Nevada is a very, almost Northeast way to say it, but...

Daniel Cobaugh:

Tell us about your selection of a residency program, and residency.

Alexander Gilmer:

So, when I was younger, I went down to the Blue Ridge Parkway, which is part of North Carolina, as well as a number of other States, and fell in love with North Carolina, and decided that at some point I would live in North Carolina. And so when it was time to come to residency, there aren't enough residencies for the amount of people that are applying for them, and so I couldn't necessarily limit where I was going, and so I thought this was the perfect time to go back to North Carolina. And so I actually applied all over the country, but my first residency interview at New Hanover Regional Medical Center in Wilmington, North Carolina was my favorite. I just clicked with the people, and it was beautiful. There were birds on the runway, I know that doesn't sound big, but when you're on the West Coast, there's not as much nature, as evident as what you see over on the East Coast, and I missed the East Coast.

Alexander Gilmer:



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So, I just went from there. I was definitely nervous going to a Southern state, as a trans person, because I didn't know what that was going to be like. You hear all these stories about how not open they are down there, and all that kind of stuff, and certainly in the news, there's evidence of that. But what I found was that when you talk to individuals, it's really quite a different story.

Daniel Cobaugh:

It's really interesting, it really leads into sort of our discussion today about your journey as a transgender man. And I think that you actually like to refer to it a bit differently, but is it okay if we talk a bit about your journey as a transgender man?

Alexander Gilmer:

Yeah, definitely. So, I do identify a little bit differently than that. I identify as a man of trans experience, and sometimes trans as well. I will use the word transgender when it's necessary to progress the community forward, i.e. if there's questions on a survey, and I'm trying to give the transgender community a voice, then I may identify as a transgender man.

Alexander Gilmer:

But, for me using the term transgender man qualifies the type of man I am. And, that doesn't necessarily work for me, especially, because at this point in our world, in our history, that qualifier tends to be a negative one. And it's very othering for me personally. Now I'm not speaking for the whole of the transgender community, there are probably some people that feel as I do, and there are some people who absolutely feel they are a transgender man, or a transgender female, or woman, and definitely use that term as a part of their identity. For me, I am a man, but I think it's important to distinguish between the fact that I did not have a cis, or cisgender, which means same as, so someone who is cis-gender is someone who was identified as, say a male at birth, and then continues to identify as a man for the rest of their life, versus someone who's trans, like me, who was assigned one gender at birth, and really identifies as another gender, wherever they decide in their life, that they realize that.

Daniel Cobaugh:

When you have conversations with people throughout daily life, how far into the explanation do you have to go, and do you find yourself having to correct people a lot?

Alexander Gilmer:

What do you mean?



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Daniel Cobaugh:

Well, if people refer to you in a way that you don't identify, do you end up having to take a time out, and explain to them some of the differences, and even the differences in the way that you identify versus the way that maybe the larger trans community might identify?

Alexander Gilmer:

It depends, when I'm doing education, I do find that a lot, when I'm working also in some consulting work, and stuff, I do find that, day to day conversations, not as much, but some of the consulting work that I do is in establishing the EMR, or the electronic medical record, in a way that accommodates for people who have gender variant identities, people who are trans, or non-binary, as well as people who have, sexual orientations other than straight or heterosexual. So, a lot of what people like to do is they ask the gender question, and list male, female, transgender male, transgender female, and then maybe something else. And explaining to people that many people in the trans community do not identify their *gender*, as a transgender male, or transgender female, they identify their gender as male or female, they just happen to have a different history, or a different experience than that of a cis person.

Alexander Gilmer:

For some people that's very important, such as myself because I think that does kind of inform how my masculinity interacts with the rest of the world, as well as how I live in my masculinity. I have a different history than someone who was identified male at birth, and grew up, and was raised that way. And, just reminding people that when asking gender identity questions, "What is your gender identity," or "How do you identify," realizing that you can't just look at the person, and say, "Oh, okay, they just told me that their sex assigned at birth was female, but I'm seeing someone who looks very male in front of me, so I'm just going to put them down as a transgender male, and not even ask that question."

Alexander Gilmer:

Especially, because someone who's non-binary, who might have a gender identity that is outside of just male or female, which is your binary. They may identify as genderqueer, or agender, or any number of different genders that are out there, and you may not be able to tell that just by looking at them, and really it's just the same way that when you're identifying sexual orientation, some people identify their sexual orientation as gay, or some people identify their sexual orientation as bisexual, or pansexual, or queer, a number of different ways, and you can't



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tell just by looking at that person, or just by deciding that, "Oh, they just told me that their partner was the same gender as them, so they must be gay," or that kind of thing.

Alexander Gilmer:

It's very important to recognize that people have different identities, the same thing along the lines of race, right? So often, we look at the person in front of us, especially when we're maybe performing an intake, or something like that, and we decide what their race is without even asking them. There are a number of people who would like to identify as multiple races, or would like to identify as a race that you can't just look at them, and say, "Oh yeah, they're black," or "they're..." whatever it is. And so it's really important for us to remember, especially as medical professionals, that our identities are very important, and to kind of check in with people, as opposed to just assuming, or just picking an identity for them.

Daniel Cobaugh:

Alexander, it's interesting. One of the questions that throughout my life I've gotten, and I imagine you've gotten the same one is, "When did you first know?" I've heard that question so many times in my life, "When did you first know you were gay?" And I'm wondering in terms of your thought processes, and discovering your identity, and if you could just talk about that, I've been really trying to avoid actually asking the question of "When did you first know," but to still understand a bit, what your earliest experiences were like?

Alexander Gilmer:

I think it's a little bit different for the trans, and non-binary community, because even though the support is definitely gaining, there's still so little support, that so many people grow up with this idea that there's something else going on, but they maybe can't identify it, or maybe they can identify it, but everyone's telling them that they're incorrect, or everything they see tells them that they're incorrect. And there's a lot of people who grew up without the verbiage. I'm sure there's actually people who grew up without the verbiage about sexual orientation, and that kind of thing. And so, sometimes people don't identify it until a lot later in life, but that doesn't necessarily mean it's any less valid.

Alexander Gilmer:

For me personally, I knew very early on. My mom actually tells me that when I was about two, two and a half, maybe three, or four, I was telling her that I was a boy, every time she asked. I would argue with my little brother about it, but then at some point I stopped identifying that way.



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I learned quickly that that was not an appropriate way to identify, that nobody saw what I saw. And so even though I spent a lot of time daydreaming about the idea that my parents would figure it out finally, and they'd take me to the doctor, and get it fixed, because doctors could fix anything.

Alexander Gilmer:

Then, at some point I gave up on that, realizing that that just wasn't how it was. And so I stuffed it very far down, and for a long time, didn't think about it, but also didn't understand why I couldn't figure out how to be a girl. Like I would see everyone around me, and they would know what to do, and they would know how to walk, and how to stand, and how to do makeup, and be interested in those things. And I just couldn't figure out why I just kept getting it wrong, and why I didn't really identify with the women in my life, but didn't know how to formulate that into words.

Alexander Gilmer:

I think the biggest moment was when I went New York Pride, and was at the Dyke March, and looked around at all these different types of women, and from the most feminine to the most masculine, and realized that I did not fit. And, I had no idea what to do with that information, and so it wasn't until I came out to Santa Cruz, that someone suggested that "Maybe you were a boy," or "Did you ever think that you were," and it was the first time I realized that that could be something that I was. And so, even though I knew as a child, I spent a long time not knowing until I finally had the verbiage, and the vocabulary to actually have words for it.

Daniel Cobaugh:

How old were you, Alex, when you went out to Santa Cruz?

Alexander Gilmer:

I was about 20.

Daniel Cobaugh:

About 20 at that point. And, you've had a lot of journeys, especially throughout your professional career, your move to California, then pharmacy school to Nevada, and then back to North Carolina for residency, and now back to the Bay area, and your move to North Carolina for both residency, and several years of practice, and then back to the Bay area. Have you had to restart the journey every time, or what's it been like?



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Alexander Gilmer:

That is essentially what you do in some ways. And when I went to pharmacy school, I was not visibly trans, and I was not interested in having people know. At that time, for me personally, I was living with a lot of shame, and a lot of fear. Trans people and non-binary people, there are a lot of reasons behind why they might not want to be visibly trans, and so this is just my story, and for me, I was very ashamed of who I was, and very fearful about people knowing, and having it completely derail my career, or having it just not be safe for me physically, or my girlfriend at the time, who is now my wife. And so it was very hard in pharmacy school, because I essentially had to out myself every step of the journey.

Alexander Gilmer:

I didn't get a choice of doing that. I had to give in information about what my sex assigned at birth was, whether I ever had any former names, or other names. I had to get a physical every year, and every year I had a different doctor, because I didn't necessarily have a PCP there, a primary care practitioner I should say. And so it was a different doctor every time that I had to explain, and at one point I had an interaction with a doctor, who essentially kind of freaked out a little bit, and didn't know what to do with the information. And so decided that he still needed to check me for a hernia, even though he knew that my sex assigned at birth was female. And that body style doesn't develop hernias in the same way that someone who was assigned male at birth does.

Alexander Gilmer:

And so, he had me strip down, and get into a johnny [hospital gown], invited a female nurse into the room, because I had to have someone of the same *gender* in the room. And the female nurse, you could tell that she had no idea why she was in there, and then proceeded to put me through a hernia check, which was very hard for me to deal with. And, I couldn't say anything, because what if he failed my physical, what would happen, would I get kicked out of school? Because I didn't do the physical well, or whatever. I think that's something that we definitely have to think about.

Alexander Gilmer:

Just kind of a segue into the pharmacy career in general, is why are we doing these physicals at schools? I think it's one thing to make sure that people are healthy, but are we doing these physicals to give people a chance to have the physical when they could make that decision for them themselves, or is there another reason that we're doing these physicals?



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Alexander Gilmer:

Because it didn't really affect the way that I did my job, or how good of a student I was. And it can be somewhat ableist in a lot of ways, as well as anyone who's trans, or non-binary, or even anyone who has any trauma. It can be really hard to have to go through a physical every year. But that being said, I wasn't out there, and so I did end up coming out to a couple of people, because I had to. They were really supportive, but I still was just living in this fear place.

Alexander Gilmer:

Additionally, when I went out to North Carolina, I was still very afraid, but at some point I decided that if I'm going to truly live, I needed to live, and come from an authentic place. And for me, that meant that I needed to be out. That's not the case for all trans people. There are many trans people that absolutely live from an authentic place, and don't feel the need to be out. But for me personally, that was something that I needed. And, I ended up coming out to my entire pharmacy department, who all knew me for three years prior to that, and for the most part had no idea what my history was. And, I found that instead of becoming the talk of the town, which is what I was worried about, I developed deeper relationships with my colleagues, and more authentic relationships with my colleagues in which both of us were practicing vulnerability, and that kind of thing, and really opening up the type of conversations that we were having, and discussions that we were having, and so it just kind of changed everything for me.

Alexander Gilmer:

Now I'm in a totally new place, and it's the time of COVID, so I'm meeting all these people with masks on, if they're even coming in, many people are working from home. And, so I want to live an open life which eventually I will, but how do I come out, especially, because there's still that, kind of, fear there. Even though I'm in the Bay area, which is a lot of times considered basically the mecca of trans experience, there's still, just based on history, that little bit of fear that lays there. Obviously if I was worried about that at all, I wouldn't be on this podcast. And again I definitely plan on coming out to people, but it's something that you have to work in, and you can't just kind of show up, and be like, "Hey, so I'm trans, let's get that over with," and move on.

Daniel Cobaugh:

Well, it's really interesting, Alexander. I didn't expect to hear you say that. I guess I presumed incorrectly, or that going to the Bay area, it would be much more, I guess automatic is a term





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you could use, and so it was very interesting to hear you say that. I have to say that my own experiences, as a gay man, when I started that process of coming out to people, it was very similar in terms of the depth of the relationships, and how they change. I imagine that your experiences, as a man of trans experiences, that it's probably affected the way that you interact with your patients, is that true?

Alexander Gilmer:

I think absolutely. I come at it from a very different perspective, had I grown up a cis person. I'm in a marginalized community, and so even though I'm white, and I'm male, and I'm definitely seen as a white male in this world for almost all the time, and have those privileges, absolutely. I come from a different perspective.

Alexander Gilmer:

And for me personally, how in the world could I discriminate against other people when they've gone through stuff that's often worse than the stuff that I've gone through. And so, it just gives me a very different perspective on the people in front of me. I've also lived a lot of life experience, and been economically in a lot of different places, as well as mental health wise. And so I just have this breadth of experience that I don't think I would have, had I not grown up a trans person. So I'm able to connect with patients, in, I think, a much deeper, and richer way than I think everybody is. And, it's easy for me to let down some of that vulnerability, and be able to identify with them. I think so often in the medical profession, there's this barrier between the medical professional and the patient. And, some of that is just the way that medical professions are seen in this country, and our automatic deference to medical professionals.

Alexander Gilmer:

But, some of it is also this idea that you have to keep yourself separate from the patient, and you can't be vulnerable with them, and you can't show any kind of weakness, because then they won't listen to you, or whatever else we've taught our medical professionals. And, I find that that's simply not how I operate, and how I connect with people. And, I love interactions with patients, and I think that vulnerability that I have developed is a big part of that.

Daniel Cobaugh:

So, do you find the profession, do you find pharmacy open to LGBTQ people?

Alexander Gilmer:



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I think yes, and no. Pharmacy in general tends to be both medical, as well as a lot of academia. And those two facets of society tend to be more liberal, and more open. That being said there is still very little information about the LGBTQ community. Very frequently, we're not taught about the community in school. We're not taught about interactions with the community. So people all of a sudden, they have a gay patient, or they have a trans patient, and they have no idea what to do. And it's like everything that they know about working with patients flies out the window, and we start worrying about offending people. Whereas, had we given our pharmacists the baseline knowledge, and some experience prior to that time, then perhaps the interaction would be a lot different.

Alexander Gilmer:

And, so I think that pharmacists in general, especially individuals one-on-one, are quite open to the LGBTQ community. But, as a profession, I don't think that we have done a great job of educating about those communities. And so, if you're not educated about your community, if your community and your brethren is not educated about, then it still can feel very alienating. I remember being in school, and noticing that, "Oh, we're going to have transgender healthcare on our curriculum. That's awesome. I'm so excited to find out whether, all of the stuff that I've had to teach myself is completely correct, or if there's more information than I can get," and that kind of thing. And, I was really excited to learn about the trans community, and at that time, the education was essentially, "There are trans people, and they take hormones," and that was about it.

Alexander Gilmer:

I think it's further developed from there, because there are some pretty progressive people working with the trans community at Roseman. And there's now an LGBTQ student group, which is awesome. But at the time I was disappointed, and I think that's still the case across a lot of schools, and medical schools in general, not just pharmacy. Pharmacy is not unique in that way at all. So, it's yes and no, I think it's open to the LGBTQ community. My personal interactions with people have been amazing. As a whole though, I don't think we educate enough. I think it's improving but I still don't think it's enough.

Daniel Cobaugh:

When you think about the student, or the resident, that next generation that's entering the profession today, what advice do you have for them?



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Alexander Gilmer:

I think first, and foremost, you need to be true to yourself. And, if that means that you are comfortable being out, then so be it. If you're not comfortable being out, then don't judge yourself on that. Don't guilt yourself into living that truth. However, that being said, if you are able to be out, and that is something that's comfortable for you, and authentic for you, then the more out people we can have in the profession, the more we're going to push it forward, and the more we're going to learn about these patients, because it's not just about us, it's also about our patients.

Alexander Gilmer:

We're doing our patients disservice, by not teaching about the community. But how do you know to teach about the community, if you think that nobody's out there. And it's often the marginalized class that is the strongest at pushing things forward. And so I think if you can be out, be out, don't guilt yourself into being out. It's absolutely appropriate to not be out. It's absolutely valid, and everything to not be out. And you can still advocate for the community, and teach if you'd like, even if you're not out, as well as our allies. Our allies are really going to be the ones that move the needle.

Daniel Cobaugh:

How are you, and your wife going to celebrate Pride? And in so many ways, it's really different this year isn't it, but are you going to have a chance to celebrate?

Alexander Gilmer:

It is very different, and I'm a little bummed. This is the first time I'm in San Francisco since I was 21, and I was excited about celebrating Pride in San Francisco, but that is not the case. However, there is a Global Pride that's going to be happening, as well as an Online Global Pride, as well as the Online San Francisco Pride, and honestly Prides probably across the country, and across the world. So, that's kind of a cool thing, is that you don't necessarily have to travel to wherever, to participate. You can actually participate from your own home, so that really opens up the access to a lot more people. And, so I think that's probably something that we're going to do, is really do the online celebration. We haven't really talked about it, we just got here. So, it's all been about the move, and new job start, and all that kind of stuff, but one of my favorite months.

Daniel Cobaugh:



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Well, Alex it's been so great to talk with you today, and I just hope it's not the first, but I hope it's just one of many conversations that you, and I have the opportunity to have, and that we can invite you in many ways to share your experiences with the ASHP community, but that's all the time we have today. And, I want to thank Alexander Gilmer for joining us today to discuss his journey as a pharmacist, who also happens to be a man of trans experience, and join us here at ASHP Official, and the Practice Journey podcast, as we learn about how LGBTQ pharmacy leaders seek out, grow, and evolve during their careers. Thanks so much, Alexander Gilmer.

Alexander Gilmer:

Thank you, and I hope it would be okay to just let people know that if they do want to reach out, and they have any questions, or they want to discuss more about how we can take care of the trans, and non-binary community, they can reach out to me at [alexandergilmer.com](http://alexandergilmer.com), or at [alex@alexandergilmer.com](mailto:alex@alexandergilmer.com) as an email, just in case anybody is interested in continuing the conversation.

Daniel Cobaugh:

Thanks so much, Alexander that's incredibly helpful, and I think will certainly be helpful to many pharmacists, both ASHP members, and those who aren't, thanks so much.

Alexander Gilmer:

Thank you.

Speaker 1:

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