



Preparing for a Second Trump Presidency: Concerns, Protective Actions, and Reasons for Hope Among Transgender Adults

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Abstract

Introduction The lead-up to the 2024 election was marked by Donald J. Trump’s pledge to advance legislative attacks on the rights of transgender (trans) people. Given the stressful implications of the 2024 election results for trans people, the current mixed-methods study sought to understand how trans adults in the U.S. were preparing for Trump’s presidency, with attention to (a) their concerns about victimization and well-being, (b) how they were seeking to prepare and protect themselves, and (c) what was giving them hope.

Methods 302 trans adults were surveyed via an online mixed-methods survey in December 2024, immediately after Trump’s re-election. Findings: 93% of participants were concerned about Trump’s presidency. Participants of color and low-income participants were more likely to be concerned about potential victimization, and nonbinary participants were more likely to be concerned about their mental health. Low-income participants and those in less trans-affirming states were less likely to pursue legal protections in advance of Trump’s presidency. Low-income participants were less likely to feel hopeful about the future, and nonbinary participants and trans men were less likely to feel hopeful than trans women. Analysis of the open-ended data revealed that participants were preparing for Trump’s presidency in various ways, including creating community, securing mental health resources, planning for potential relocation, and engaging in denial or radical acceptance. Participants often drew hope from their trans and LGBTQ+ community and from themselves, highlighting community connections and pride as key resilience factors.

Conclusions Findings have implications for understanding how trans people experience governmental harm and uncertainty and can inform future efforts to support trans people during future periods of intensifying attacks on their rights.

Keywords Election · Trump · Trans · Mental health · Legal protections · Support · Hope

With the election of President Donald J. Trump to a second term on November 5, 2024, many transgender (trans) Americans experienced significant fear, worry, and anger (Crary, 2024). Election season was marked by Trump’s pledge to end what he referred to as “transgender insanity,” including

by cutting Medicaid and Medicare funding to providers of gender-affirming health care (Sosin, 2024). Trump’s election campaign spent over \$200 million on anti-trans ads, which exacerbated the backlash against trans people (Alfonseca & Kim, 2024; Kemp, 2024).

In his inauguration speeches on January 20, Trump stated that “the official policy of the United States government is that there are only two genders—male and female” (Wendling & Epstein, 2025). In the following days, he issued executive orders (EOs) that sought to erase the identities of trans and intersex people for the purposes of federal law and policy, with sweeping implications for non-discrimination protections; accurate federal identification documents; housing for incarcerated trans people; access to health care, shelters, and other services; data collection and research; and students’ access to an equal education, including access to bathrooms and participation in sports

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(Leonard, 2025; Redfield & Chokshi, 2025). Other EOs rescinded Biden administration EOs and policy guidance that sought to protect and support trans people (Leonard, 2025). Still other EOs cut funding for organizations deemed to “promote gender ideology,” a move that directly and indirectly affected trans people (Wolf, 2025).

The negative impact of the Trump administration on trans people extends beyond explicitly anti-trans policies. Many trans people have other identities that create additional vulnerabilities under various Trump administration policies, such as having low income, being a person of color, and being disabled (James et al., 2024). Such vulnerabilities expose trans people to multiple intersecting stigmas, and may render multiply marginalized trans people at particularly high risk for depression, anxiety, and suicidality (Kattari et al., 2020; Turone et al., 2025). Yet despite facing greater challenges, trans people with multiple vulnerabilities often demonstrate pride, determination, and community connections and support, all of which can be viewed as important aspects of resilience (Puckett et al., 2019; Singh & McKleroy, 2011). Recognizing the challenging environment that trans people would face under the second Trump administration in the wake of the 2024 election results, community advocates offered guidance to trans people about how to protect their rights and safety (e.g., updating gender markers on identification, moving to a more trans-affirming state) and urged them to act swiftly, prior to Trump taking office (Diaz, 2024). Yet many trans people lack the resources to consult with legal professionals about document changes, much less relocate (James et al., 2024), underscoring how the burdens and impact of managing systemic discrimination may be unevenly distributed (Last et al., 2026; Turone et al., 2025; Virginia & Goldberg, 2024).

Given the profound implications of the 2024 election results for trans people, the current exploratory study sought to understand how 302 trans adults in the U.S. were preparing for Trump’s presidency, with attention to (a) their concerns about victimization and well-being, (b) how they were seeking to prepare and protect themselves, and (c) what was giving them hope. The study was initiated post-election and pre-inauguration day, when there was still uncertainty about the incoming administration’s specific anti-trans policies (Sosin, 2024).

Although the latest presidential transition period may seem like “old news” given the near-constant attacks against trans people by the current administration since assuming power (GLAAD, 2025), an examination of trans adults’ opinions and actions during this 76-day timeframe is valuable. Capturing trans people’s perceptions during periods of legislative and sociopolitical change and uncertainty can inform efforts to understand and support trans people during future periods of intensifying attacks on their rights.

Additionally, our findings ultimately reveal the extent to which trans people’s concerns, fears, and hopes prior to the second Trump presidency have been borne out by the administration’s actions. Finally, this work provides critical insights into how trans people think about threats to their well-being, which can help contextualize the current moment, as these dangers persist at the federal level and in many states.

Trans People’s Responses to Federal Hostility and Uncertainty

Prior work has examined trans people’s experiences preparing for and navigating hostile sociopolitical contexts and major political events such as the first Trump presidency. This work documented high levels of election-related stress, including concerns about safety as a result of stigmatizing policies and hostile social climate, as well as increased hypervigilance and decreased well-being (Pletta et al., 2022; Price et al., 2021; Veldhuis et al., 2018). Yet this work also documented a commitment to the trans community and intentions to advocate on behalf of oneself and others (Pletta et al., 2022; Veldhuis et al., 2018). Notably, when facing uncertainty regarding specific laws or policies and their personal impact, trans people may be especially vulnerable to heightened stress as they seek to make decisions to protect themselves from harm without clarity on what the future holds (Goldberg & Smith, 2025; Hughto et al., 2022), which may leave them trapped in a constant state of threat vigilance (Diamond & Alley, 2022).

Even amid uncertainty, trans people likely recognize that Trump’s proposed policy agenda has the potential to undermine their well-being, an awareness that may be especially high for those in less affirming regions and those with fewer resources (DuBois et al., 2023; Hughto et al., 2022). Anti-trans legislation (i.e., structural transphobia) has been linked to poorer mental health outcomes among trans adults (Last et al., 2025; Lee et al., 2024; Price et al., 2024). A study of 61 LGBTQ+ adults in states that recently proposed or passed anti-LGBTQ+ legislation found that individuals experienced chronic worry and hypervigilance due to fears of discrimination and loss of rights, social isolation, and feelings of hopelessness, with particularly intense concerns evident among the most frequent targets of these policies, such as trans and low-income participants (Last et al., 2026). This study compliments extensive research showing that trans people experience elevated fears of discrimination and violence, particularly in anti-trans policy environments (Hill et al., 2025; Restar et al., 2024; Veldhuis et al., 2018), which can contribute to poorer well-being (Aversa et al., 2022; Dhanani & Totton, 2023; Restar et al., 2024;

Stewart et al., 2018; Veldhuis et al., 2018). Such fears are grounded in reality: trans people are exposed to higher levels of harassment, discrimination, and violence than cis people, with especially high exposure among nonbinary people, trans women, and trans people of color (Devis-Devis et al., 2022; Evje et al., 2024; Harrison et al., 2012).

In the context of concerns about sociopolitical hostility, and targeted efforts to take away their rights, trans people may experience a heightened sense of vulnerability that leads them to engage in behaviors aimed at protecting their safety, existing rights, and well-being. For example, they may enact avoidance behaviors, minimizing their engagement with public spaces such as gyms, public restrooms, and public transportation, actions that may increase subjective safety but also reinforce a sense of threat and introduce added burdens and complexity into daily living (Aversa et al., 2022; Dhanani & Totton, 2023; Stewart et al., 2018; Veldhuis et al., 2018). Similarly, they may pursue available legal safeguards (e.g., powers of attorney; Goldberg & Smith, 2025; Goldberg et al., 2024) and evaluate the relative benefits, burdens, and feasibility of relocating to a more affirming state (Goldberg et al., 2023, 2024; Movement Advancement Project [MAP], 2025). Other documented ways of responding to and/or coping with anticipated or enacted anti-trans policies include mental disengagement (Goldberg et al., 2023; Hummel et al., 2025; Mizock & Mueser, 2014), seeking out supportive resources (e.g., LGBTQ+ community support; therapists; Bockting et al., 2020; Goldberg et al., 2023; Hummel et al., 2025; Mizock & Mueser, 2014), and activism and advocacy (Bockting et al., 2020; Mizock & Mueser, 2014; Veldhuis et al., 2018). Creating community and engaging in mutual aid are common survival strategies used by especially vulnerable trans people in particular (e.g., those who are disabled or of color; Arani, 2020; England, 2025; Singh & McKleroy, 2011). Such actions may enhance trans people's subjective sense of protective armor in the face of primal threat (i.e., the threat of anti-trans policies), but at the same time, these actions themselves constitute responses to stress processes (e.g., chronic threat vigilance) that are themselves harmful (Diamond & Alley, 2022).

Theoretical Framework

This study is informed in part by a structural stigma framework, which emphasizes how legislation, policies, and social norms inflict harm on and impact the well-being of marginalized people (Hatzenbuehler, 2016). In this study, structural stigma encompasses anticipated and threatened federal actions aimed at restricting trans rights, as well as the national sociopolitical discourse surrounding trans

rights (Hughto et al., 2022; Restar et al., 2024). Significantly, the experiences and effects of structural stigma may not be felt the same for all members of a minoritized group; for example, the perceived and actual impact of anti-trans policies may be heightened for certain trans people, such as those who are low income or of color (James et al., 2024; Rao et al., 2020; Turone et al., 2025).

This study is also informed by a minority stress model, which emerged from efforts to explain health disparities in sexual minorities specifically, and centers the processes and mechanisms by which stigmatized people respond to structural stigma and other aspects of their environment, particularly those related to experiences and expectations of discrimination and marginalization (Brooks, 1981; Meyer, 2003). Structural stigma impacts trans people's exposure to distal stressors (e.g., discrimination, victimization), as well as the nature and intensity of proximal stressors (e.g., hypervigilance, worries about rejection and discrimination, concealment), which may emerge as responses to exposure to hostile contexts. Both types of stress processes impact mental health (Meyer, 2003): indeed, psychological distress may arise not only as a result of discrimination but from the chronic stress of anticipation, worry, and fears surrounding potential discrimination (Frost & Meyer, 2023).

Building on the stressors identified by minority stress theory, Diamond and Alley (2022) underscore the importance of considering *a lack of social safety*: that is, a lack of "social connection, social inclusion, social protection, social recognition, and social acceptance" (p. 5), which may help to explain negative mental and physical health outcomes among LGBTQ+ people. Noting the importance of group and social processes to well-being, Diamond and Alley (2022) and Frost and Meyer (2023) suggest the importance of moving beyond consideration of individual actions and social support as protective factors to integrating attention to group-oriented resilience processes such as those which involve community and collective action.

More specifically, this study is grounded in gender minority stress theory, which applies the minority stress model to the experiences of trans individuals. Building on the work of Meyer (2003), gender minority stress theory details the processes whereby experiences with structural stigma contribute to poorer mental health outcomes for trans people (Hendricks & Testa, 2012; Testa et al., 2015). Gender minority specific stressors include systemic invalidation of trans people's identities (e.g., in legal, health care, and educational contexts), misgendering, and exposure to highly politicized debates over trans people's legitimacy and worth, all of which may heighten minority stress processes of internalized transphobia, anticipatory vigilance, and identity concealment (Dhanani & Totton, 2023; Price et al., 2024; Rao et al., 2020; Rood et al., 2017). Importantly,

anticipatory or chronic hypervigilance and identity non-disclosure or concealment, while engaged in for self-protective purposes, operate as proximal stressors (Diamond & Alley, 2022; Frost & Meyer, 2023). For example, Diamond and Alley (2022) observe that remaining in a state of constant vigilance (e.g., checking for signs of threat; monitoring one's own and others' behavior) because of a lack of social safety requires significant attentional and energetic resources, restricting one's ability to engage in other social, restorative, and/or goal-directed activities. Non-disclosure or closeting—which or may not be possible for trans people, depending upon their gender identity, state or stage of transition, and/or ability to outwardly comport with dominant, binary conceptualizations of gender—may also demand significant attentional resources, and restricts individuals' ability to benefit from social support, affirmation, and community connectedness (Frost & Meyer, 2023; Testa et al., 2015).

While minority stress theory and gender minority stress theory recognize that hypervigilance and closeting can act as important stressors, they also recognize that such behaviors are aimed at self-protection, and acknowledge the value of other self-protective coping strategies such as pursuing legal safeguards and seeking social support as responses to systemic threat (Frost & Meyer, 2023; Rood et al., 2017). Likewise, gender minority stress theory recognizes the various stress-ameliorating actions that individuals take in response to gender minority stress in their efforts to enhance their sense of safety and overall well-being (Diamond & Alley, 2022; Testa et al., 2015). For example, participating in advocacy, building community, and acting as a positive role model constitute group resiliency processes that may mitigate the effects of stigma and improve trans people's mental health (Matsuno & Israel, 2018). Such collective processes help to foster a sense of agency, shared experience, and meaning-making, enhancing trans people's ability to cope amid sociopolitical stress and insufficient social safety (Diamond & Alley, 2022). And yet, while community support and collective action have the potential to benefit trans people's sense of efficacy and well-being, they are not by themselves fully protective: proximal stressors such as hypervigilance and internalized stigma have the potential to undermine any ameliorative effects in some contexts (Diamond & Alley, 2022; Rogers et al., 2021).

Research Questions and Hypotheses

The current exploratory mixed-methods study of 302 trans adults surveyed in December 2024, immediately after Trump's re-election, sought to answer the following research questions:

1. To what extent do trans people report concerns about discrimination and victimization when facing a second Trump presidency?
 - a. Are trans people with certain vulnerabilities more likely to be concerned?
2. What legal strategies and/or other actions aimed at self-protection are trans people taking to prepare themselves for a second Trump presidency?
 - a. Are trans people with particular vulnerabilities (e.g., lower income, in less protected states) more or less likely to engage in actions aimed to self-protect?
3. What is giving trans people hope? Where are they drawing strength?
 - a. Are trans people with certain vulnerabilities less likely to feel hopeful?

The first question was answered via quantitative analyses, and the second and third questions were answered via quantitative and qualitative analyses.

Prior work suggests that trans people who experience multiple forms of marginalization may face a greater risk of victimization. Based on the findings of prior studies that suggest that because they are more readily recognized as gender nonconforming, trans women and nonbinary people may encounter more harassment and discrimination than trans men (Devis-Devis et al., 2022; Evje et al., 2024; Harrison et al., 2012), we expected that trans women and nonbinary individuals would be more likely to report concerns about discrimination and victimization than trans men. We expected that trans people of color (Evje et al., 2024; James et al., 2024) and those with fewer resources (Last et al., 2026) would be more likely to report such concerns. Based on prior studies showing greater fear, hypervigilance, and mental health symptoms among trans people in legislatively hostile states (Last et al., 2025, 2026; Lee et al., 2024), we expected those in less trans-affirming states to report more concerns, as they could not depend on their state to serve as a buffer from anti-trans federal actions. We also wondered whether participants' (a) use of strategies aimed to self-protect and (b) hopefulness about the future might vary based on certain marginalized statuses. Moreover, given the many anti-trans actions promised by the incoming administration (GLAAD, 2025), we expected that most participants would be (a) concerned, (b) engaging in actions aimed to address their concerns, and (c) express low levels of hopefulness.

Methods

Sample Demographics

When invited to select all gender identity categories that they identified with, 30% of respondents said trans man, 13% said man, 18% said trans woman, 15% said woman, 57% said nonbinary (of which, 80% said their assigned sex at birth was female, 19% said male, and 1% said intersex), and 15% said another gender, most often genderqueer, genderfluid, or some combination of genderqueer, genderfluid, agender, and transmasculine. Most of those who indicated “man” also indicated “trans man” (33 of 39; 85%); three indicated nonbinary, two indicated another gender identity, and one did not indicate any other gender. Of those who indicated “woman,” over half (27 of 46; 59%) said “trans woman,” while 13 (28%) indicated nonbinary and two said another gender identity. Four did not indicate another gender identity. Participants were also invited to select the gender identity category that, if forced to choose, they would say best reflected their identity. One-quarter said trans man/man, 21% said trans woman/woman, 46% said nonbinary (of which, more than three-fourths said their assigned sex at birth was female), and 8% said another gender, typically genderqueer. See Table 1 for data on gender identity, age, race, education, income, political affiliation, and relationship status.

Participants were asked whether they had made any of a number of changes related to their gender. Almost all ($n=295$; 98%) had made at least one change. Most had started using different pronouns ($n=267$; 88%); over three-fourths had changed the type of clothing, jewelry, or hairstyles they wore to better fit with their gender identity ($n=235$; 78%); and over two-thirds had asked to go by names that were different from those they were previously called ($n=205$; 68%). Half had undertaken hormone therapy ($n=150$; 50%), with lower numbers changing their facial hair ($n=136$; 45%), starting/stopping wearing makeup ($n=131$; 43%), and changing their gender marker ($n=121$; 40%) and legal name ($n=112$; 37%).

Regarding sexual orientation, over one-fourth (27%; $n=81$) identified as queer, over one-fourth (27%; $n=81$) as bisexual, 11% ($n=33$) as asexual, 10% ($n=30$) as pansexual, 10% ($n=30$) as lesbian, 6% ($n=19$) as gay, 5% ($n=15$) as straight/heterosexual, 1% as two spirit ($n=2$), and 3% ($n=11$) as another identity (e.g., demisexual, greysexual). Regarding race, just under two-thirds ($n=196$; 65%) were white only, while over one-third ($n=106$; 35%) were of color. 43% had less than a bachelor’s degree ($n=131$) and \$50K/year or less in household income ($n=130$). Over half of the sample was 30 years old or younger.

40% of participants ($n=120$) reported living with partners, 29% ($n=87$) with family of origin, 17% ($n=50$) with housemates or roommates, and 12% ($n=35$) with children. Just 13% ($n=40$) said that they were parents. Almost half lived with pets ($n=134$; 44%). Over half (53%; $n=161$) lived in a state with a high or medium gender identity policy environment (more trans-affirming), and 47% ($n=141$) lived in a state with a fair, low, or negative gender identity policy environment (less trans-affirming; MAP, 2026). The most common more-affirming states represented were California ($n=26$; 9%), New York ($n=23$; 8%), Washington ($n=20$; 7%), Illinois ($n=18$; 6%), and Massachusetts ($n=16$; 5%); the most common less-affirming states were Florida ($n=20$; 7%), Pennsylvania ($n=17$; 6%), Texas ($n=15$; 5%), Ohio ($n=12$; 4%), and North Carolina ($n=10$; 3%).

Procedure

The 302 trans adults in the current study completed a mixed-methods anonymous survey focused on their perceptions and experiences as they prepared for a second Trump presidency.

A two-fold strategy was enlisted to recruit participants. First, we used Prolific, a web-based research platform that offers multiple safeguards for preserving data quality, minimizes bots and bad actors, and has been shown to be a reliable means of collecting data (Bradley, 2018; Palan & Schitter, 2018). Prolific’s participant pool has significant economic and racial diversity, ensuring that LGBTQ+ individuals who are less likely to be included in research (e.g., less educated, lower income, of color) are adequately represented (Goldberg & Frost, 2024). Second, we also recruited participants using convenience sampling, relying on listservs, professional and personal contacts, and private channels to spread the word—strategies that often result in participants who are educated, affluent, and connected to the LGBTQ+ community (Potter & Potter, 2020). The goal in deploying both recruitment strategies was to obtain a richer, more diverse sample. Ultimately, 215 (71%) participants were recruited via Prolific and 87 (29%) were recruited via convenience sampling.

The survey was available from December 9 to December 31, 2024. Participants were eligible to participate in the study if they identified as trans (based on the question, “Do you consider yourself to be transgender, trans, nonbinary, or another gender that is different from the sex assigned to you at birth?”), were over 18, and lived in the U.S. They were invited to participate in a 25–30 min anonymous survey approved by Clark University Human Subjects Board and hosted by the platform Qualtrics. Upon consenting, they proceeded to the survey.

Table 1 *Demographic Characteristics of the Sample (N=302)*

Characteristic	N	%
Gender Identity		
Trans Man	43	14.2
Man	33	10.9
Trans Woman	27	8.9
Woman	35	11.6
Nonbinary	140	46.4
Other (e.g., genderqueer, genderfluid, agender, genderless, two spirit)	24	7.9
Age		
18–25	90	29.8
26–35	130	43.0
36–50	64	21.2
51–60	7	2.3
61+	11	3.7
Race/Ethnicity ^a		
White	232	76.8
Asian	2	7.0
Black/African American	47	15.6
Latinx/Hispanic	29	9.6
American Indian/Alaska Native	14	4.6
Native Hawaiian/Pacific Islander	2	0.7
Other	5	1.7
Education		
Less than high school	2	0.7
High school diploma/GED	52	17.2
Some college/associate's degree	77	25.5
Bachelor's degree	97	32.1
Master's degree	54	17.9
PhD/JD/MD	20	6.6
Family Income		
No income	5	1.7
\$1,000–\$15,000	25	8.3
\$16,000–\$25,000	35	11.6
\$26,000–\$50,000	65	21.5
\$51,000–\$75,000	59	19.5
\$76,000–\$100,000	48	15.9
>\$100,000	65	21.5
Political Affiliation		
Republican	14	4.6
Democrat	173	57.3
Independent	68	22.5
Other	47	15.6
Relationship Status ^a		
Partnered	98	32.5
Married	48	15.9
Divorced/Separated	20	6.7
Widowed	1	0.3
Single	126	41.7
Casually dating	24	7.9
Polyamorous	34	11.3

^a Participants could select multiple response options; thus, percentages may not sum to 100

Measures

Concerns: Participants were asked, “What is your level of concern about each of the following?” and asked to respond on a 5-point scale (very, somewhat, neutral, not very, not at all) to a list of potential areas of concern: being the victim of a hate crime, being the victim of any crime, being physically attacked, being verbally attacked, being discriminated against, being misgendered, my mental health, my physical health. See Table 2 for breakdowns of responses by type of concern. Responses to each type of concern were dichotomized, such that 0 = not at all concerned, not very concerned, or neutral, and 1 = somewhat concerned or very concerned.

Any legal protective actions Participants were asked about legal protective actions they may have taken to prepare for a second Trump presidency or before (Table 4): changing or updating state IDs; pursuing relationship legal safeguards; pursuing parenting legal safeguards; meeting with legal professionals; changing health insurance; or other safeguards (e.g., marriage, visas, passports). We categorized this variable in two ways: pursued any legal safeguard now or in the past (1; 61%) versus not at all (0; 39%), and pursued any legal safeguard in preparation for a second Trump presidency specifically (1; 42%) versus not at all or in the past (0; 58%).

Any non-legal protective actions Participants were asked about non-legal protective actions they may have taken to prepare for a second Trump presidency (Table 5): pursuing self-defense classes, buying/learning how to use a gun, other safety measures such as buying pepper spray, meeting with health care professionals, stockpiling hormones, learning about one’s rights, and organizing with community groups. Responses were dichotomized, such that 1 = pursued any non-legal action (83%) and 0 = those who had not yet pursued any of the actions (17%).

Hope for the future Participants were asked how hopeful they felt about the future as a trans person: very, somewhat,

mixed, not very, or not at all. This variable was dichotomized such that 1 = somewhat or very hopeful (19%) and 0 = mixed, not very, or not at all (81%).

Gender identity Participants were asked whether, if they had to choose just one identifier, they identified as trans men, men, trans women, women, nonbinary, or another identity. We consolidated responses into three variables (coded 1, 0): trans men/men (25%), trans women/women (21%), and nonbinary or gender-expansive, which included all individuals who indicated the ‘another identity’ category (see Table 1), such as genderqueer and agender (54%).

Education Participants were asked to indicate their highest education level (less than high school through PhD/JD/MD). Responses were dichotomized into two categories: 43% had less than a bachelor’s degree (1) and 57% had at least a bachelor’s degree (0).

Family income Participants indicated family income on a 6-point scale: 1 = \$50K or less, 2 = \$51K–\$100K, 3 = \$101K–\$150K, 4 = \$151K–\$200K, 5 = \$201K–\$250K, and 6 = >\$250K. To examine the effect of having a low income, we dichotomized the data: 43% reported \$50K/year or less in household income (1); 57% had \$51K/year or more household income (0).

Race Participants were asked to indicate their racial/ethnic identities (Table 1). Responses were dichotomized into two categories. About one-third (35%) of participants were of color (1) and about two-thirds (65%) of participants were white, non-Hispanic only (0).

State policy environment Using the Movement Advancement Project (MAP)’s gender identity policy tally for each state, and their categorization of states as “high, medium, fair, low, or negative” in terms of gender identity protective policies, we categorized states as “high or medium” (relatively positive/affirming) or “fair, low, or negative” (relatively negative/non-affirming) (MAP, 2026). 47% lived in a

Table 2 Concerns About Victimization and Well-Being (*N*=302)

Type of Concern	Level of Concern					Change in Concern		
	Not at all (<i>n</i> , %)	Not very (<i>n</i> , %)	Neutral (<i>n</i> , %)	Somewhat (<i>n</i> , %)	Very (<i>n</i> , %)	Less (<i>n</i> , %)	No change (<i>n</i> , %)	More (<i>n</i> , %)
Being a victim of a hate crime	9 (3.0%)	40 (13.2%)	38 (12.6%)	139 (46.0%)	76 (25.2%)	5 (1.7%)	57 (18.9%)	240 (79.5%)
Being a victim of any crime	5 (1.7%)	42 (13.9%)	60 (19.9%)	128 (42.4%)	67 (22.2%)	3 (1.0%)	121 (40.1%)	178 (58.9%)
Being physically attacked	7 (2.3%)	53 (17.5%)	54 (17.9%)	117 (38.7%)	71 (23.5%)	1 (0.3%)	79 (26.2%)	222 (73.5%)
Being verbally attacked	11 (3.6%)	27 (8.9%)	43 (14.2%)	120 (39.7%)	101 (33.4%)	5 (1.7%)	60 (19.9%)	237 (78.5%)
Being discriminated against	7 (2.3%)	16 (5.3%)	37 (12.3%)	128 (42.4%)	114 (37.7%)	4 (1.3%)	47 (15.6%)	251 (83.1%)
Being misgendered	23 (7.6%)	48 (15.9%)	67 (22.2%)	70 (23.2%)	94 (31.1%)	8 (2.6%)	121 (40.1%)	172 (57.3%)
My mental health	6 (2.0%)	12 (4.0%)	20 (6.6%)	104 (34.4%)	160 (53.0%)	3 (1.0%)	49 (16.2%)	250 (82.8%)
My physical health	7 (2.3%)	30 (9.9%)	56 (18.5%)	109 (36.1%)	100 (33.1%)	1 (0.3%)	104 (34.4%)	197 (65.2%)

less trans-affirming state (1) and 53% lived in a more trans-affirming state (0).

Other closed-ended questions Participants were asked a variety of other closed-ended questions for descriptive purposes, including: “As a result of the results of the 2024 elections, are you concerned about what a Trump presidency might mean for you as a trans person?” (yes, no), and “When you think about your future as a trans person, how hopeful do you feel?” (very, somewhat, mixed, not very, not at all). They were asked if they had engaged in various legal and non-legal protective actions in preparation for the presidency. For each legal action, they were asked if they had encountered delays and whether taking this step was financially challenging.

Open-ended questions Participants provided narrative responses to two questions: “In at least 3 sentences, please describe how you are preparing for Trump’s presidency and trying to take care of yourself” and “What is giving you hope and a sense of purpose?”

Data Analysis

We conducted a number of exploratory chi square tests to examine whether concern and engaging in protective actions differed according to gender identity, education, income, race, and state policy context. We applied qualitative content analysis, a widely accepted approach for examining open-ended data, to the open-ended survey items (Krippendorff, 2019), enabling the generation of novel insights through the systematic identification and categorization of key patterns. By exploring and classifying the qualitative data, the textual information was condensed into a narrower set of content categories (Bogdan & Biklen, 2003). Quantitative and qualitative analyses were conducted in parallel, with qualitative findings providing contextual depth rather than formal explanation of quantitative associations.

A key goal of our qualitative content analysis, then, was to add nuance to and extend the patterns found in the quantitative data (e.g., how participants were preparing for a second Trump presidency). Another goal of our content analysis was to generate novel insights (e.g., sources of hope). The content analysis was guided by the study’s overarching research questions and informed by sensitizing concepts identified in prior scholarship (Goldberg & Allen, 2015). The analytic process began with the first author conducting a thorough reading of all open-ended responses to build familiarity with the data and note initial impressions and potential patterns. Each response was then coded line by line, with attention to phrases and ideas related to preparation, protection, community, and well-being. These

initial codes were then grouped into broader thematic categories that reflected distinct but interrelated aspects of participants’ experiences, which were later refined and defined during theme development. For example, codes like “radical acceptance” and “denial and avoidance” were clustered under the broader theme of “cognitive strategies” in relation to preparing for a second Trump presidency.

To enhance the credibility of the analysis, four student research assistants coded the data, which served as a verification step for thematic identification and participant counts. Minor discrepancies were reconciled with the first author. The second and third authors offered feedback on the coding system and organization of the data, which resulted in minor changes for cohesion and flow. Throughout the analysis and writing stages, the authors engaged in reflexive consideration of how their positionalities and assumptions might be shaping their interpretations (Goldberg & Allen, 2015). As a group, we vary in gender identity and professional context, but share the experiences of living in a relatively trans-affirming state and having conducted prior research on trans people. Analytic memos and collaborative discussion of the data enabled an iterative and transparent process of analysis and interpretation. Our presentation of the findings represents our best efforts at a meaningful and cohesive description of the data.

Findings

Fears and Concerns About Victimization and Well-Being

Overall, 93% of respondents were concerned about what a second Trump presidency might mean for trans people. Participants were asked to indicate their level of concern about various forms of mistreatment, and about their own physical and mental health, as well as whether their level of concern had increased since the 2024 election. See Table 2.

Over half of the sample was at least somewhat concerned about each domain. About two-thirds to three-fourths of the sample were concerned about various forms of victimization, including being the victim of a hate crime (71%), being the victim of any crime (65%), being physically attacked (62%), and being verbally attacked (73%). More than three-fourths were concerned about discrimination (80%), and over half were concerned about being misgendered (54%). More than three-fourths were concerned about their mental health (87%) and more than two-thirds were concerned about their physical health (69%). Asked if their concern had changed due to the 2024 election outcome, over half said they were more concerned in each domain.

To analyze the relationships among concerns and dimensions of vulnerability, responses were dichotomized as not concerned (i.e., not at all concerned, not very concerned,

neutral) and concerned (i.e., somewhat concerned, very concerned), and chi-squares examined whether various concerns differed based on education (less than a college degree), income (\$50K or less), race (of color), and state policy climate (lacking trans-affirming policies). Also of interest was whether trans women and nonbinary participants were more likely to report concerns than trans men. See Table 3. Chi square analysis of associations among predictors revealed that (a) education and state policy context were related, $X^2(1, 302)=10.37, p < .001$, such that 66% of participants with a college degree lived in more trans-affirming states versus 35% of those without; and (b) income and education were related, $X^2(1, 302)=25.68, p < .001$, such that 69% of those with college degrees made over \$50K, versus 41% of those without.

Turning to our chi square analyses that assessed whether concerns varied based on vulnerabilities, we found that individuals with incomes of \$50K/year or less were more likely to be concerned about being the victim of (a) any crime, $X^2(1, 302)=7.21, p = .005$, and (b) a hate crime, $X^2(1, 302)=3.66, p = .037$. Participants of color were more likely to be concerned about being a victim of any crime, $X^2(1, 302)=4.29, p = .023$, as compared to white participants.

Gender identity was significantly associated with concern about being the victim of a verbal attack, $X^2(2, 302)=7.15, p = .027$. Follow-up chi squares showed that nonbinary people were more likely to report this concern than trans women, $X^2(1, 226)=7.04, p = .007$. Gender identity was also significantly associated with concern about mental health being affected, $X^2(2, 302)=7.23, p = .027$. Follow-up chi square tests indicated that nonbinary participants were significantly more likely to experience concern about their mental health than trans men, $X^2(1, 240)=4.53, p = .031$, and trans women, $X^2(1, 226)=5.97, p = .016$.

Given the somewhat unexpected finding that nonbinary individuals reported significantly greater concern than trans women in two domains (fear of verbal attack, concern about mental health), of interest was whether they were simply more likely to have experienced an increase in concern, whereas trans women might have already had a high level of concern. We examined whether reported change in concern (more versus none or less) regarding verbal attacks and mental health differed by gender identity; these follow-up chi square tests were not significant.

Table 3 Concern (Dichotomized) by Vulnerability Factors ($N=302$)

	Gender identity			Education		Family Income		Race		State policy context	
	Trans man ($n=76$)	Trans woman ($n=62$)	Non-binary ($n=164$)	< BA ($n=131$)	BA+ ($n=171$)	< 50 K ($n=130$)	50 K+ ($n=172$)	Of color ($n=105$)	White ($n=197$)	Less affirming ($n=141$)	More affirming ($n=161$)
Concerned about being a victim of a hate crime	56 (74%)	43 (69%)	116 (71%)	94 (71%)	122 (71%)	100 (77%)*	115 (66%)*	70 (67%)	145 (74%)	100 (71%)	115 (71%)
Concerned about being a victim of any crime	48 (63%)	36 (57%)	112 (68%)	93 (71%)	102 (60%)	95 (73%)*	100 (58%)*	76 (72%)*	119 (60%)*	99 (70%)*	96 (60%)*
Concerned about being physically attacked	49 (65%)	39 (63%)	100 (61%)	82 (63%)	106 (62%)	87 (67%)	101 (59%)	69 (66%)	119 (60%)	93 (66%)	95 (59%)
Concerned about being verbally attacked	54 (71%)	38 (61%) ^c	129 (79%) ^b	93 (71%)	128 (75%)	100 (77%)	121 (70%)	80 (76%)	141 (72%)	97 (69%)	124 (77%)
Concerned about discrimination	62 (82%)	47 (76%)	133 (81%)	105 (80%)	137 (80%)	109 (84%)	133 (77%)	80 (76%)	162 (82%)	115 (82%)	127 (79%)
Concerned about being misgendered	41 (54%)	37 (60%)	88 (52%)	68 (52%)	96 (56%)	72 (55%)	92 (54%)	62 (59%)	102 (52%)	71 (50%)	93 (58%)
Concerned about mental health	63 (83%) ^c	50 (81%) ^c	151 (92%) ^{a, b}	116 (88%)	148 (87%)	116 (89%)	148 (86%)	89 (85%)	175 (89%)	125 (89%)	139 (87%)
Concerned about physical health	49 (65%)	43 (69%)	117 (71%)	88 (67%)	121 (71%)	90 (69%)	119 (69%)	78 (74%)	131 (67%)	98 (70%)	111 (69%)
Pursued legal protective action, in preparation for presidency	35 (46%)	24 (39%)	68 (42%)	43 (33%) ^a	84 (49%) ^a	53 (41%)	74 (43%)	41 (39%)	86 (44%)	55 (39%)	72 (45%)
Pursued legal protection action, ever	51 (67%)	39 (63%)	95 (58%)	68 (52%) ^a	117 (68%) ^a	79 (61%)	106 (62%)	58 (55%)	127 (65%)	70 (50%) ^a	115 (71%) ^a
Hope for the future ($n=265$)	11 (16%) ^b	19 (34%) ^{a, b}	20 (14%) ^b	16 (14%)	34 (22%)	10 (9%) ^a	40 (26%) ^a	20 (21%)	30 (18%)	25 (21%)	25 (17%)

*Statistically significant differences between groups ($p < .05$)

^{a, b, c} Indicates significant differences between gender groups: a=trans men, b=trans women, and c=nonbinary ($p < .05$)

The final item (hope for the future) is based on $n=265$, as it contained missing data from the first 37 participants who completed the survey

Actions Taken in Anticipation of the Second Trump Presidency

Legal Protective Actions

As a result of the outcome of the 2024 election, participants expressed concerns about legal recognition and rights for themselves and their families. By December 2024, many were considering or had already taken steps in anticipation of the second Trump administration. See Table 4. Considering legal actions, 42% of participants had taken at least one action. Specifically, 26% had taken one, 8% two, and 8% three or more. Most of those who pursued such actions reported that doing so was financially challenging and time consuming, underscoring the practical and mental drain associated with such efforts.

More specifically, we found that among participants without updated state IDs before the election, 29% reported changing or updating them, and among those who did, 78% found this process financially challenging and 91% encountered delays in doing so. Among those who were married or partnered who had not pursued additional legal safeguards before the election, 29% reported pursuing these to protect their relationships. Of this group, 69% experienced financial challenges and 44% encountered delays. Among participants with children who had not pursued legal safeguards pre-election, 30% reported seeking these to protect their parent-child ties. Of this group, 83% experienced financial challenges and 75% encountered delays. Considering all participants, 10% reported making changes to their health

insurance, and of these, 36% reported financial challenges and 28% faced delays. A total of 12% took other actions, such as getting or updating their passport or visa, marrying a partner, or getting a divorce.

Using chi square analyses, we examined whether the likelihood of pursuing at least one legal action in preparation for Trump's second presidency varied by aspects of vulnerability. See Table 3. Individuals without a college degree were significantly less likely to have recently pursued any actions than those with a degree, $\chi^2(1, 302) = 8.09, p = .003$.

When comparing participants who had pursued these actions not just in preparation for a second Trump presidency but in the past as well to those who had not pursued any actions, we found that individuals without a college degree were significantly less likely to report taking legal actions than those with a college degree, $\chi^2(1, 302) = 8.52, p = .003$. Participants in less trans-affirming states were significantly less likely to pursue legal actions than those in more trans-affirming states, $\chi^2(1, 302) = 15.03, p < .001$.

Non-Legal Actions

Participants were also asked whether they had pursued or were considering pursuing various non-legal actions or behaviors to prepare for a second Trump presidency. Notably, over one-third were considering buying or learning how to use a gun, with over 10% having already done so, and 43% were considering self-defense classes, with almost 9% having done so. Many participants were learning about their rights related to safety and discrimination (61%), meeting

Table 4 Legal Protective Actions ($N=302$)

Action	Yes (<i>n</i> , %)	No (<i>n</i> , %)	N/A, Already Did (<i>n</i> , %)	N/A, Other Reasons (<i>n</i> , %)	Experiences (Among Those Who Endorsed Actions)	
					Financially Challenging	Encoun- tered Delays
Changing or updating state IDs	54 (17.9%)	132 (43.7%)	94 (31.1%)	22 (7.3%)	42 (77.7%)	49 (90.7%)
Pursuing legal safeguards for my relationship with my partner (<i>146 were partnered or married</i>)	39 (12.9%)	95 (31.5%)	12 (4.0%)	156 (51.7%)	27 (69.2%)	17 (43.6%)
Pursuing legal safeguards for my relationship with my children (<i>40 were parents</i>)	12 (4.0%)	24 (7.9%)	4 (1.3%)	262 (86.8%)	10 (83.3%)	9 (75.0%)
Meeting with or consulting with legal professionals	37 (12.3%)	194 (74.2%)	5 (1.7%)	66 (21.9%)	34 (91.9%)	17 (45.9%)
Changing health insurance	29 (9.6%)	199 (65.9%)	15 (5.0%)	59 (19.5%)	29 (100%)	25 (86.2%)
Other protective/legal actions (open-ended question):	36 (11.9%)	155 (51.4%)	8 (2.6%)	103 (34.1%)	13 (36.1%)	10 (27.8%)
• Getting or updating passport						
• Getting or updating visa						
• Marrying partner						
• Getting a divorce						

with health care professionals and therapists (44%), joining mutual aid and community groups (42%), and stockpiling medications (22%). See Table 5. Examining whether the likelihood of pursuing any of these non-legal actions varied by aspects of vulnerability using chi-square analyses revealed that none of these associations were statistically significant.

Preparing for a Trump Presidency: Narrative Responses

Almost all ($n=294$; 97.4%) participants provided a response to how they were preparing for a second Trump presidency. Many participants explained that they were building support and community connections, with some engaging in trans advocacy to empower themselves and others. Others reported decreasing visibility by pulling back from public life and concealing their gender identity. Echoing the quantitative data, some participants were pursuing forms of self-protection, including securing documents and learning self-defense, while others were seeking fortification through improving their health, including reengaging in therapy and fast-tracking gender-affirming care. Still others were changing their relationship with news media, through enhanced or selective consumption or withdrawal. Others engaged in cognitive strategies, such as radical acceptance or denial. Still others were making plans for the future. Some were

simply living their lives as trans people. These themes (see Table 6) are discussed in the next section.

Empowerment Through Community and Connection

Building support and community networks Almost one-third of participants ($n=90$; 31%) described seeking to empower themselves and others through building and reinforcing their social support networks and communities. They often used the term “strengthen” to describe their approach to community ties. One participant’s focus was on “finding community where I can fall back on if I am in a situation where I am at risk of harm or homelessness, and re-connecting with family members,” as they recognized that, “for a transgender person, [essential preparation] is having an already-established core group of friends, allies, and support groups with which to weather changes in policies or rights.”

Community was seen as essential for emotional support during difficult times, as well as for practical support, such as physical safety and resources. Many participants noted the importance of sharing support and resources, not just receiving them. One individual shared, “I have begun reaching out to other members of the community in my area.

Table 5 Self-Protective Actions/Behaviors ($N=302$)

Action	Yes (<i>n</i> , %)	Considering It (<i>n</i> , %)	No (<i>n</i> , %)
Physical Safety Actions			
Pursuing self-defense classes, martial arts	26 (8.6%)	130 (43.0%)	146 (48.4%)
Buying a gun/learning how to use a gun	38 (12.6%)	104 (34.4%)	160 (52.9%)
Other safety measures such as buying pepper spray or a personal alarm	93 (30.8%)	111 (36.8%)	98 (32.4%)
Health Protection Actions			
Meeting/consulting with therapists or other health care professionals	133 (44.0%)	86 (28.5%)	83 (27.5%)
Stockpiling hormones (e.g., estrogen, testosterone) or other medications related to gender-affirming care	67 (22.2%)	146 (48.3%)	89 (29.5%)
Other Actions			
Learning about my rights related to safety and discrimination	183 (60.6%)	72 (23.8%)	47 (15.6%)
Organizing with community and mutual aid groups	127 (42.0%)	102 (33.8%)	73 (24.2%)
Other actions (open-ended question):	34 (11.3%)	24 (7.9%)	244 (80.8%)
• Trying to move			
• Making an emergency plan (e.g., if I need to leave quickly)			
• Joining a union at work			
• Preparing graduate school applications for blue states only			
• Donating to mutual aid funds			
• Enhancing fitness/strength			
• Strengthening social support network			
• Adopting a harm reduction mindset			

Table 6 Key Themes: Preparing for a Second Trump Presidency (*N*=294)

Theme	Subtheme	<i>n</i> (%)	Example/Sample Quotes:
Support and Connection Strategies	Building support and community networks	90 (30.6%)	• “I am reaching out to those around me to try and strengthen my support and social network.” • “[I am] making sure I’m staying with supportive, protective family.” • “I am finding ways to build mutual aid and make sure that our community is as secure as it can be once Trump returns to office.”
Reduced Visibility	Advocacy and activism	19 (6.5%)	• “I am donating money to [organizations] that help trans people.”
	Reducing engagement in public life	30 (10.2%)	• “In the next 4 years I intend to keep my head down and try not to put myself out there too much or become seen in the public eye.”
	Concealing my trans identity	18 (6.1%)	• “I’m preparing by conforming to a more feminine look.”
Self-Protection Strategies	Obtaining, updating legal documentation	51 (17.3%)	• “I am finishing up making changes to any other documents that need to be changed.” • “I am preparing to get married before gay marriage is possibly abolished. I am looking into updating what documents I can.”
	Protecting financial health	37 (12.6%)	• “We are trying our best to build a savings for anything we may need in the future.”
	Firearms	22 (7.5%)	• “I am arming myself.”
	Self-defense	15 (5.1%)	• “I am thinking about what will be necessary for protection in public spaces.”
	Knowing my rights	10 (3.4%)	• “I am preparing for Trump’s presidency by learning my rights.”
Securing Health Resources and Reserves	Securing access to hormones and medications	40 (13.6%)	• “I’ve already been stockpiling estrogen. I wish I could do more to guarantee or at least extend my access to some of my meds.” • “I am hoarding necessary prescriptions, including hormone therapy.”
	Fast-tracking gender-affirming care	15 (5.1%)	• “I scheduled top surgery.”
	Preserving mental health through therapy	36 (12.2%)	• “I am talking with my therapist to help my mental health.”
	Exercise and meditation	25 (8.5%)	• “I started to exercise and lift weights more. I have a mantra of ‘If I can protect myself, I can protect who I am.’”
	Self-care through pleasure and leisure	10 (3.4%)	• “I am also doing everything I can to take care of myself now to prepare myself, such as self care and art therapy.”
Changing Relationship with News Media	Staying informed	25 (8.5%)	• “I keep myself updated and I stay on top of new news as much as i can”
	Staying informed, with limits	16 (5.4%)	• “I am trying to find a balance between knowing too much and getting overwhelmed and not knowing enough to be prepared.”
	Staying off news media	21 (7.1%)	• “I’m off of social media and I’m avoiding looking at the news.”
Cognitive Strategies	Radical acceptance	50 (17.0%)	• “I’ve basically just been accepting that things could end up way worse in this country, but whatever happens I’ll deal with it.”
	Denial and avoidance	15 (5.1%)	• “Just trying not to think about it”
Making Plans for the Future	Contemplating/planning move out of state	21 (7.1%)	• “I have been applying to jobs in other ...states.”
	Contemplating/planning move out of country	27 (9.2%)	• “I am going to look into immigrating to Canada or even Germany.” • “We are renewing our passports, and researching alternative countries to live.”
	Contemplating/planning change in educational and career goals	10 (3.4%)	• “The primary thing I did was cut my list of PhD programs I was applying to.” • “I am seeking to change jobs to no longer be a government employee.”
No Preparations		23 (7.8%)	• “I can’t afford to prepare.” • “I’m not doing anything to ‘prepare’ myself for the presidency. I’m not really sure what I could do.”
Just Living My Life (as a Trans Person)		12 (4.1%)	• “I maintain that this is my life and I can only live it once. I want to live my life beautifully and authentically, and make my younger self proud.” • “I’m living as normally as I possibly can with the understanding that things might be difficult.”

We've expressed a desire to support one another if things do grow truly bad." Another participant said:

I think the most important thing for me is to not become demoralized. Trans people have existed forever, I am not the first and I will not be the last, so I need to make sure that the people around me are safe and well, and I can trust those people to do the same for me.

Advocacy and activism Nineteen participants (6.5%) prepared through advocacy and activism on behalf of trans and queer communities. They described taking steps to support and amplify the needs of trans people, especially those who are "in more vulnerable positions than my own," such as by "donating to mutual aid groups and community organizations in states that have fewer protections for trans people." A few were volunteering for LGBTQ+-supportive organizations, while others were "signing petitions and emailing [their] representatives."

Reduced Visibility

Reducing engagement in public life While some participants were engaged in action-oriented strategies, others sought to prepare by reducing their visibility and engagement in public life to enhance their safety ($n=30$; 10%). They spoke of trying to "keep [their] head down" and being hypervigilant by "engaging caution in where I go and what I do." For some, this pulling back extended to not having an online presence or limiting who could view their social media posts. Some were staying home as much as possible to ensure their safety and planned to do so for the foreseeable future ("I've become a hermit"). Said one participant, "I am just going to ride this out. I am not going anywhere I don't. .feel safe. I'll stay home all 4 years if I have to."

Concealing my trans identity Eighteen participants (6%) were seeking to conceal or be less open about their trans identities. For some, this meant "appearing as passable as possible" and "going stealth," whereas for others, it meant presenting in ways that comported with their sex assigned at birth. As one participant shared, "I only disclose my nonbinary identity and pronouns to those that I know will respect it; I essentially live in stealth mode."

Self-Protection Strategies

Some participants described strategies aimed at self-protection, such as obtaining or updating legal documents; protecting their financial health; buying/learning how to use a

gun; learning self-defense; and knowing their rights. Many of these actions matched the quantitative data.

Obtaining, gathering, and updating legal documents Fifty-one participants (17%) described gathering, securing, or updating documents (e.g., passports, birth certificates, and other documents, including health insurance documentation, powers of attorney, visas, and second-parent adoptions). Some were fast-tracking aspects of their legal transition (e.g., name changes, gender marker changes) to ensure that all documents were consistent and up to date. Some were doing so out of fear that such rights might disappear once Trump returned to office.

Protecting financial health Thirty-seven participants (13%) were preparing by securing their finances—namely, by saving money, "being more frugal," and making financial decisions (e.g., "watching the markets more closely")—to move to a new state or country, or simply to have more resources if they were fired from jobs, lost health care, or became alienated from family members. Cost-saving measures varied, but involved not eating out, choosing cheaper versions of common purchases, and using food banks to stockpile dry foods. A few participants were applying for new jobs.

Firearms Twenty-two participants (7.5%) brought up gun ownership as a protective means to defend themselves in a Trump presidency. Some mentioned their intentions to learn how to shoot a gun, while others described buying a gun, getting concealed carry permits, or "getting more range time/shooting practice in." Some already owned guns. One participant said.

I already own a firearm, but I am not well trained in how to use it. I realize that I need to take this much more seriously, not just in order to be a responsible gun owner, but because bigoted people have been emboldened and I am now visibly trans as of less than a year ago. So my chances of having to use it have increased.

Self-defense Fifteen participants (5%) indicated that they were considering or pursuing self-defense training in order to be able to "better defend myself in public" and "feel safe." A few participants were also researching or buying other means of self-defense, such as mace.

Knowing my rights For 10 participants (3%), knowledge of their rights served as a means of protection, in that "knowledge is power." Some discussed their efforts to find out more about their rights as a citizen of the US, and others

were learning more about state laws to “see what protections I am still afforded.”

Securing Mental Health and Health Resources

Some participants were taking steps to fortify their emotional and physical well-being. These participants voiced a sense of agency and determination in their efforts to support their health.

Securing access to hormones and other medications Forty participants (14%) were seeking to secure their future access to hormones in the event that such access was threatened. Some did this in consultation with their health care providers, while others did so on their own. Besides stockpiling hormones, some were ensuring that they had a large supply of birth control, contraceptive devices, and “other needed medications [in case] I lose access to health care.” Some of those who worried about access to hormones were pursuing sterilization or birth control to reduce their reliance on medication that might soon be less available.

Fast-tracking gender-affirming care Fifteen participants (5%) described efforts to fast-track aspects of their transition in advance of Trump returning to office. Hysterectomies and top surgeries were the most frequent surgical procedures mentioned by participants seeking medical interventions that might be less accessible in the future. Some indicated that this process was particularly hard to fast-track, given that they lived in a state with limited gender-affirming care.

Preserving mental health through therapy Thirty-six participants (12%) shared that they were investing in their mental health by continuing to see therapists, psychiatrists, and other mental health care providers. They felt it was more important than ever to “go to therapy and learn how to cope with my mental health if things go downhill from here.” A few were establishing relationships with new health care providers.

Exercise and meditation: Twenty-five participants (8.5%) described exercise, meditation, and mindfulness practices to enhance their well-being. In some cases, these practices (e.g., “working out regularly”) were aimed at supporting their overall health to ensure that they were as “fit as possible” so that they could physically take care of themselves (e.g., engage in self-defense). Others framed these practices as strategies to reduce their risk of illness and reliance on health care systems: “We are working on improving our overall health to do what we can to avoid needing medical care within the next few years.” For others, these actions

were aimed at fortifying their “mental stability, regardless of political shifts.”

Pleasure and leisure Ten participants (3%) noted the importance of hobbies and leisure in promoting their well-being, and therefore their survival. They recognized the importance of caring for themselves through “comfy cozy time at home,” leisure activities alone or with friends, and “grounding activities” that helped them to feel “prepared and resilient.” Participants frequently noted that music, art, and getting outside were important to their well-being.

Shifting Relationships with News Media

Staying informed, engaged, and aware Twenty-five participants (9%) were preparing by staying informed, engaged, and up to date on what was happening (e.g., relevant legislation) via trusted news sources. They were “trying to keep up with the news,” “staying updated on what is going on with the administration,” and being “wary of propaganda.” Said one participant, “I am focusing on staying informed about potential changes to policies that may affect my health.”

Staying informed, with limits Some ($n=16$; 5%) noted that they were trying to “stay informed” while also putting strict limits on the type and amount of information they were consuming as a way of protecting their psychological well-being. One participant stated, “I am trying to strike a balance between mentally preparing myself and not overwhelming myself with anxiety. . .I’m listening to podcasts that will help keep me informed but also interspersing them with more lighthearted ones to avoid ‘doomerism.’”

Avoiding news media Twenty-one participants (7%) said that, rather than looking to stay informed, they sought to decrease their consumption of news media. They recognized this as a self-protective strategy, as avoiding the news protected their mental health by reducing their feelings of panic and vulnerability. Rather than feeling more informed by media consumption, they found that “reading the news is not helping me.” One participant said, “The most useful thing I’ve done is stop watching the news and ignoring any of the sources of information I previously visited online. . .My intake of anything online has become extremely selective.”

Cognitive Strategies

Some participants described enacting cognitive strategies to prepare for the Trump presidency.

Radical acceptance Fifty participants (17%) were employing radical acceptance by learning to live with, rather than resisting, their reality. Recognizing that they could not change the outcome of the election, they focused on what they did have control over, or where they could have agency. There was grief attached to this acceptance, but also a recognition that they could and would survive. As one participant shared.

I have mentally accepted that in 4 years I will not be as free as I am today to be who I am, and I also know there will be changes that will affect my life and laws that will restrict me...I will just have to sit and find a way to live in this chaotic space I find myself now.

Denial and avoidance Some ($n=15$; 5%) were practicing denial and avoidance. They were “trying not to think of it” and “burying [their] head in the sand,” feeling that thinking about the second Trump presidency would “do nothing but make my life worse.” A few said that they were hanging on by a thread emotionally, and that practicing denial was key to their survival.

I’m trying to think about it as little as possible. I fully understand that that is selfish... but frankly, my mental health is already so bad that if I also have to spend time thinking about just how horrific his policies might be, I’m going to have to be institutionalized. I already feel like I’m a few bad days away from a breakdown, so I have to just be in a bubble basically to protect myself.

Planning for the Future

Some participants were considering or planning to move to a different state or country, or shift their career or educational goals, to enhance their sense of safety and well-being.

Moving out of state: Twenty-one participants (7%) were preparing by contemplating or actively planning a move to states with more trans/LGBTQ+-friendly policies and laws, a more favorable sociopolitical climate, and a larger trans community. One shared, “I am considering to move to a trans sanctuary state since Ohio has already shown their colors and will continue to act on the same ridiculous laws that Florida and Texas are.” Some had started applying for jobs and evaluating housing options: “I have been researching blue states [where I could] be homeless temporarily if I need to leave the literal property I own in a red state.” Another participant said:

I was laid off earlier this year so as I looked for jobs I concentrated on applying to jobs in New York, Minnesota, and Illinois because they are all safer for trans people than Tennessee. It took a while, but I finally got a job offer in New York so I took out a loan and moved. I got a New York enhanced id as soon as I could so that I can get to Canada if I need to and I have plans to get my passport when I have the finances.

Moving out of the country Twenty-seven participants (9%) were contemplating or planning a move out of the country. One participant shared, “I [am] looking up different countries’ government systems to see if they support immigrants and LGBTQ+ folks and have the resources to do so.” Others mentioned taking concrete steps to facilitate emigration, such as updating legal documents, applying for visas, and looking for jobs in other countries. Said one participant, “I am going to get my passports renewed and am saving money. .to hopefully leave the country within the next two years. I hope to either start my PhD or find a job abroad.”

Some were developing an “emergency plan” if it became necessary to move out of the U.S. immediately, which sometimes involved talking with loved ones in other countries or updating passports. One participant said, “I am making sure all my document are up to date with my correct gender marker. I have gotten my first passport ever just in case I have to leave the country. I also made a bug-out bag and have cash on hand in case I need to leave quickly.”

Shifting educational and career goals Ten participants (4%) were planning changes to their educational pursuits or jobs to enhance safety. This included contemplating different career paths if their current jobs (e.g., teacher, government employee) became untenable—for example, if it was too hostile for them to endure as a trans person or they were fired. Referring to themselves and their partner, one participant said, “As teachers, we are both very concerned about the Trump administration’s policies regarding education, and are making plans just in case, about how we would exit education if it became hostile or if one of us were fired.”

No Preparations

Twenty-three participants (8%) were not doing anything to prepare. Some said they were unsure of what they could do (e.g., they were financially limited; they were “not an organizer”). Others felt that they were in a relatively safe position, as they “passed...I’m rarely bothered in public” or they had “a great support system.” One participant said, “There aren’t many preparations I need to

make for myself. I live in Washington, which is a rather safe state, and I've long had my paperwork in order. I have been on HRT for over 6 years."

Just Living My Life (as a Trans Person)

Twelve participants (4%) said that they were not doing anything to prepare, but rather than grounding this in either a sense of futility or lack of necessity, they indicated that their refusal to "prepare" came from a place of resistance—a refusal to shrink, apologize, or conform. As one participant stated: "I maintain that this is my life and I can only live it once. I want to live my life beautifully and authentically, and make my younger self proud." Another shared:

I believe it's important for me to exist as myself. . .so it's just slightly harder for those who have interacted with me to dehumanize trans people. Plus, I want to be a source of inspiration and resilience for those who do feel they need to go back to being closeted.

Hope for the Future

When asked how hopeful they felt about the future as a trans person ($n=265$, due to missing data), 15% ($n=41$) were not at all hopeful, 26% ($n=69$) were not very hopeful, 40% ($n=105$) felt mixed, 14% ($n=37$) felt somewhat hopeful, and 5% ($n=13$) felt very hopeful. Chi-square tests were used to examine whether aspects of vulnerability were associated with feeling hopeful ($n=50$; 19%) versus not ($n=215$; 81%). See Table 3. Individuals with household incomes of \$50K or less were less likely to feel hopeful than those with higher incomes, $X^2(1, 265)=11.37, p<.001$. Gender identity was also significant, $X^2(2, 265)=11.28, p=.004$. Follow-up chi-squares revealed that both nonbinary participants, $X^2(1, 197)=10.45, p=.002$, and trans men, $X^2(1, 123)=5.56, p=.016$, were less likely to feel hopeful than trans women.

Although relatively few participants felt hopeful about the future, most ($n=280$; 93%) provided a narrative response to the question of what was giving them hope (Table 7). Many participants expressed hope in themselves, their families and friends, and the LGBTQ+ and trans communities, regarding these as key sources of resilience. These themes echo many of the themes that participants highlighted as sources of coping. For example, they both relied on and were hopeful because of their connections with LGBTQ+/trans communities and friends and family, and they also found joy in and drew strength from themselves, their work and hobbies, and advocacy.

Discussion

The current study revealed high levels of stress and worry among trans adults on the precipice of a second Trump presidency. At the time of the survey, the reality of Trump's policies, many of which were outlined in the ultra-conservative Heritage Foundation's (2023) Project 2025, were not widely known, or yet realized. Still, even without certainty of what was to come, many trans people felt that their rights were in imminent danger and were taking actions aimed at protecting themselves, their families, and their communities.

Nearly all participants expressed fears about what a second Trump presidency might mean for trans people. Over 60% were concerned about various forms of victimization, and over three-fourths were concerned about their mental health. Our exploratory analyses of vulnerability factors showed that participants of color were more likely to fear being the victim of any crime; less affluent participants were more likely to fear being the victim of any crime and hate crimes; and nonbinary participants were more likely to fear being the victim of a verbal attack than trans women, and more likely to fear effects on their mental health than both trans women and trans men. These findings underscore that certain groups of trans individuals may be feel especially vulnerable in the context of the current administration's stated and threatened policies (James et al., 2024).

Trans people of color may possess a high awareness of their general risk of exposure to criminal victimization because of their vulnerability to racism and transphobia (Kattari et al., 2020) and may hesitate to engage with law enforcement due to justified fears of discrimination by police, thus amplifying their concerns (Hereth, 2025; James et al., 2024). Low-income individuals may be sensitive to the possibility of general crime victimization because of the ways that poverty intersects with greater housing instability and exposure to transphobia (James et al., 2024). Our finding that low-income participants were also more likely to fear hate crime victimization underscores the ways in which trans people with few resources may feel especially vulnerable amid a lack of economic or social safeguards in the current political climate (Flores et al., 2021). Indeed, low-income trans people may be particularly likely to feel (a) unsafe, and (b) unable to protect themselves, amid threats to safety (Diamond & Alley, 2022; James et al., 2024).

Our finding that nonbinary participants voiced heightened fear compared to trans women in the domains of verbal attack and emotional well-being was unexpected. This warranted our exploration of whether nonbinary people were simply more likely to experience increases in concern (whereas trans women may have already been very concerned), but we determined that change in concern was unrelated to gender identity. Trans women and nonbinary people

Table 7 Key Themes: Hope for the Future ($n=280$)

Theme	Subtheme	n (%)	Exemplar quote/s
Community: Support, advocacy, history, resilience	The LGBTQ+ community and trans community specifically	42 (15.0%)	• “Connecting with queer and trans youth to create a better tomorrow for them. I find inspiration in ... the stories shared and told by queer and trans folks whether that be through books, podcasts, in person sharing, or online chats.” • “My LGBTQ friends, colleagues, and clients. We’ve always been good at supporting each other, but especially considering the recent election, the outpouring of love and support I’ve received from my fellow trans and nonbinary people has been beautiful and offered some solace ... I want to use every ounce of my energy and work ethic to support trans folks that are less fortunate than me.”
	The resiliency of trans people/our shared history (we’ve been here before)	21 (7.5%)	• “Resilient role models like Sylvia Rivera and Marsha P. Johnson motivate me... These sources of inspiration and hope serve as a reminder that I’m a part of a strong community and that we can conquer obstacles as a team.” • “The legacy of the trans people before endlessly inspires me. Our history is long and beautiful, and we have survived worse than what the coming years are bringing us. Whenever I feel hopeless I look back and I become resolute again in my knowledge that we will survive, we will survive... and create a world worth living in.”
	Activism/trans activism	17 (6.1%)	• “Seeing activism like the capitol bathroom sit in.” • “The knowledge that despite how many rotten people are in positions of power, there are just as many people fighting them. That we’re still getting up and living every day around the world because we all believe that a better world is possible.”
	My community, broadly	40 (14.3%)	• “Being involved in my local community... Connecting with like-minded individuals who share my values and goals fosters a sense of belonging and collective strength [and] remind me that positive change is possible when we come together.” • “I find a lot of hope with in-person and online communities where I can find people who have empathy and passion.”
	Trans youth	15 (5.4%)	• “Helping other trans people, especially those younger than me or without supportive family.” • “The younger generation of trans kids who are teenagers right now and for the next 4 years who need to see that it does get better.”
Kin: Connection, support, love	My family	36 (12.9%)	• “I am struggling to feel hopeful right now. My partners, cats, and siblings are what is keeping me alive and fighting.” • “My family, children, and pets.”
	My friends and chosen family	41 (14.6%)	• “I get hope and purpose from my chosen family.” • “I have wonderful friends and found family and we rely on each other when things are tough.”
	My partner/s	22 (7.9%)	• “I am focusing on my partner and building our future and family together. Since we are both trans, I feel that us being happy is an act of resistance in itself.” • “The only thing holding me together is the love I have for my friends and my partner and hope that it will get better.” • “I am not allowing myself to fall into despair, I am finding inspiration from my partner, my close friends, and the sporadic good news that I can find.”
	Animals/pets	15 (5.4%)	• “My pets give me a reason to push forward and never give up.” • “I have a pet bird I adore and am adopting a second. Even if a lot of things are out of my control right now, caring for them and making sure they’re healthy and happy is in my control.”
Myself; aspects my of life that give meaning	Myself/my own strength and resiliency	31 (5.4%)	• “I have found inspiration in my own persistence.” • “I am thankful to be alive... My life has not always been ideal.” • “I find hope from the fact that I am stronger than I think I am and I am capable of surviving great pain.”
	My work	24 (8.6%)	• “My work gives me a sense of purpose. I am trying to help clients reach their goals.” • “My work with youth is meaningful and inspiring.” • “The work I do with my music therapy clients helps keep me going. I am inspired by the connections I make with my clients through music and helping them express themselves.”
	Hobbies	25 (8.9%)	• “In my hobbies of playing instruments and gaming. However I think it’s more accurate to describe it as solace.” • “My hobbies include embroidery, video games, reading, gardening, and cosplay. I find inspiration to do these things in the idea that no matter how you spend your time, the time still passes and you cannot get it back.”
Perspective and beliefs	Knowledge that the presidency is temporary	15 (5.4%)	• “I know that this is only a brief moment in history and it will pass.” • “My life will last much longer than four years, so it is definitely possible to outlive this problem.”
	Commitment to fighting for a better future	20 (7.1%)	• “I want to help build a future where trans people will be free to live as themselves and get the care they need.” • “I find inspiration in change, and I strive to watch and fight for positive change in the world.”

Table 7 (continued)

Theme	Subtheme	<i>n</i> (%)	Exemplar quote/s
Other	Religion/faith	11 (3.9%)	• “I draw hope and inspiration from my faith. I believe God is in control and he will see me through to the other side.” • “My spirituality also is a very strong motivating factor.”
	Nature	8 (2.9%)	• “The ocean and the trees” • “I am finding inspiration in nature”
	Nothing at all	55 (19.6%)	• “I don’t have much hope. I’m just trying to exist and not die.” • “I lack purpose and inspiration so I am working and going with the flow right now.”
	Others	23 (8.2%)	• Online communities (<i>n</i> = 10); avoidance/escapism (<i>n</i> = 7); therapy (<i>n</i> = 6)

may face different levels of risk in different types of settings; for example, trans women are more likely to be verbally harassed in the workplace, by family, and in public spaces, whereas nonbinary people are more likely to be harassed in education, health care, and sports settings, according to some research (Devis-Devis et al., 2024). It could also be that these groups had different frames of references in mind when contemplating risk of verbal harassment. Additionally, some work suggests that nonbinary people face especially high rates of verbal victimization (e.g., bullying, microaggressions; Daigle et al., 2025). In terms of mental health, some research suggests that nonbinary people face greater mental health challenges than other groups of trans people, in part due to high levels of minority stress—which may encompass both actual and expected encounters with discrimination, misgendering, and invalidation (Matsuno et al., 2024). Nonbinary people’s greater mental health burdens may also help to explain why they reported less hope for the future than trans women (although trans men also reported less hope). As research has, until recently, largely failed to separate nonbinary individuals from trans women and trans men, it is often difficult to compare experiences by subgroup (e.g., Flores et al., 2021). Ultimately, our findings point to the need for a greater focus on how different segments of trans adults experience fear, safety, and well-being.

Almost half of participants had taken at least one legal action (e.g., updating identity documents) in preparation for Trump’s second presidency. Such actions were often experienced as burdensome in terms of both time (e.g., they experienced delays) and money, underscoring how actions aimed to alleviate threat and enhance safety also contribute to various forms of stress (Diamond & Alley, 2022). Participants without a college degree were less likely to have pursued legal actions in preparation for Trump’s return to office and were also less likely to have ever pursued such actions, as were those in less trans-affirming states—likely because such actions were less available in their states. Thus, various aspects of privilege appeared to be related to participants’ efforts to protect themselves, revealing how economic and geographic vulnerabilities may be exacerbated in the context of the current presidential administration. This is

especially concerning when considering that such multiply-marginalized participants may also be hard-hit by Trump’s other policies, such as those that have resulted in shrinking job growth and rising costs for working-class Americans (Glass, 2025). In addition, research found that after Trump’s 2016 presidential election, trans people in more sociopolitically hostile climates reported less energy and motivation (DuBois et al., 2023), suggesting that lower efforts to procure legal protections may also stem in part from defeatism, a lack of agency, and generally diminished mental and emotional resources (Diamond & Alley, 2022). In other words, marginalized groups may be less likely to pursue protective action for reasons beyond structural barriers.

Regarding non-legal actions in preparation for a second Trump presidency, over one-third of participants were considering buying or learning how to use a gun, considering self-defense classes, meeting with health care professionals, and joining mutual aid groups, highlighting the wide range of ways that trans adults were seeking to protect or fortify their well-being. The findings related to gun ownership echo recent news articles suggesting that LGBTQ+ (and particularly trans) adults are increasingly considering arming themselves in a sociopolitical climate marked by fear and uncertainty, but not without some reluctance, given that such deliberations are due to a sense of vulnerability and lack of safety (Byron, 2025; Russell, 2025).

When asked to share how they were preparing for Trump’s second presidency, almost one-third of participants described their efforts to build and sustain community networks, particularly trans community networks, underscoring the role of group resiliency processes in offsetting gender minority stress (Bockting et al., 2020; Frost & Meyer, 2023; Matsuno & Israel, 2018). Research consistently shows the importance of social support to trans adults’ well-being, with support from other trans adults being especially important to their mental health (Dowers et al., 2020). The finding that other trans people are often the most reliable and important sources of support highlights the importance of group or community resources, wherein mutual aid may be truly essential during periods of escalating vulnerability (England, 2025). Prior research has also found that trans people

often lean into their commitment to the trans community during times of political volatility (e.g., during the first Trump presidency) for resilience and strength (Bockting et al., 2020; Matsuno & Israel, 2018; Veldhuis et al., 2018). It is essential that research continues to examine how trans people create, draw upon, and contribute to community in ways that enhance their capacity to cope with uncertain or hostile contexts.

Echoing the quantitative data, the qualitative responses also indicated that participants were engaging in self-protective strategies, including updating legal documents, protecting their financial well-being, and pursuing self-defense. Others were trying to become less visible, either through reducing their engagement in public life and isolating at home or concealing their gender identity, which aligns with prior work that documents how trans people may withdraw from public life or conceal their identities when faced with increasingly anti-trans sociopolitical climates (Dhanani & Totton, 2023; Stewart et al., 2018; Veldhuis et al., 2018). Prior research suggests that concealment of gender identity may reduce the risk of victimization but can also enhance distress (Flynn & Smith, 2021). While becoming less visible as a trans person may decrease fears by reducing the chances of experiencing violence and discrimination, other forms of gender minority stress may be enhanced; for example, trans people who are not out may have less access to mutual aid and support from the trans community, which can exacerbate negative mental health outcomes (Flynn & Smith, 2021; Frost & Meyer, 2023; Rood et al., 2017).

Some participants were pursuing or reengaging in health care efforts to sustain themselves during the second Trump presidency, including securing access to hormones. Given the established effectiveness of gender-affirming care, including therapeutic interventions, on mental health (Austin et al., 2017; Bettergarcia et al., 2024), as well as the decreasing availability of such care in many states (Hummel et al., 2025), these findings reinforce the need for clinicians who are trained and competent in providing affirming care to trans people. Participants also described a shifting relationship with news media, which is notable given recent work showing an association between increased news consumption about anti-trans legislation and increased ruminations and negative physical health symptoms among trans young adults (Dhanani & Totton, 2023). Finally, our finding that one in six adults was contemplating a move, with more than half mentioning a potential move out of the country, underscores the extent to which many trans people are feeling unsafe. This finding complements other research showing that LGBTQ+ adults are increasingly responding to harmful legislation by considering relocation (Goldberg et al., 2023, 2024), which, even if not acted upon, constitutes an index of

perceived threat and fear, and a source of major stress and upheaval among those who perceive no choice but to flee.

A startling finding of this study was that fewer than one in five participants felt even somewhat hopeful about the future as a trans American in the current sociopolitical context—and only 5% felt very hopeful. Participants with less income were especially unlikely to feel hopeful, pointing to how a lack of resources constrains already-vulnerable trans people's ability to imagine and enact lives that are safe, protected, and free from fear of harm. Additionally, both non-binary individuals and trans men were less likely to report hope than trans women—an unexpected finding that warrants more focused attention in future research. Recognizing that many trans people are unable to feel optimistic under the current administration, trans advocates and organizations have sought to validate their fears and worries while also offering messages of solidarity and community resilience, and, when possible, news of legal victories (Burke, 2025; Rice, 2025). At the same time, participants described many sources of hope and inspiration, including friends, family, LGBTQ+/trans communities, and other supports—a finding that again underscores the important roles that trans people assume for each other.

Limitations and Implications

The study was conducted after the election but before Trump actually took office, so it is limited in reflecting only the thoughts and behaviors of trans people during this specific snapshot in time. Given the many anti-trans actions undertaken by the administration since assuming power (GLAAD, 2025), it is very likely that the rates of concern would be higher, particularly for more vulnerable groups, if we surveyed these participants today. The study is also limited by the fact that we were unable to ask follow-up questions, as we would in interviews or focus groups. Ideally, we would be able to probe participants' feelings and experiences in order to gain a more nuanced understanding of how, for example, they were able to hold onto hope for the future. Older trans people were also underrepresented in our dataset, limiting our ability to examine how trans people of diverse age groups and cohorts are feeling about and experiencing the current sociopolitical moment.

Additionally, our use of dichotomous outcomes and predictors limited our ability to assess subtle differences or detect small effects. Use of continuous measures to assess level and nature of concerns, as well vulnerability factors, will increase the power of future research to detect significant effects. Overall, our study was primarily descriptive. Future work should test specific hypotheses grounded in structural stigma and minority stress theories, exploring, for example, the interactive effects of specific vulnerability

factors on trans people's concerns and worries, with particular attention to community, state, and other system-level factors that amplify or mitigate individual-level vulnerabilities.

Our findings have implications for research, practice, and policy. Given the harmful effects that the current presidency has already had on trans people (MAP, 2025), it is imperative that we not only document such harms but also seek ways to interrupt, mitigate, and offset them, and study the effectiveness of such efforts. For example, many of our participants mentioned mutual aid. How might community-based efforts mitigate the harms of Trump policies targeted at trans people? How might other supports mentioned, such as therapy, meeting with legal professionals, and taking self-defense classes, help trans people? What strategies are most effective, and for whom, in creating a sense of empowerment? Are certain strategies and actions more effective in some environments and contexts (e.g., in states with more protective policies) than others?

Regarding practice, it is essential that practitioners recognize trans people's concerns and fears as valid and seek to empower them to take self-protective actions as needed in their specific circumstances. Therapists should not treat trans people's concerns as exaggerated or "paranoid"; rather, they should validate them and offer deep care and affirmation, alongside efforts to help them find or bolster community and support connections and develop or (re) engage various coping skills, including mindfulness-based practices (Giammattei, 2025).

Regarding policy, it is critical that states take concrete steps to protect and support their trans residents, such as by enacting and enforcing nondiscrimination protections in employment, housing, health care, education, and public accommodations; providing access to gender-affirming care; and ensuring that steps to obtain desired legal protections are financially accessible and easy to navigate. States should also prioritize funding for community-based supports and services, such as trans-affirming mental health care. Additionally, it is essential that states offer safe havens for trans people who are relocating, which may include facilitating their access to public benefits, education, and health care coverage. Such actions can help to shift communities from sites of potential threat to contexts of safety and affirmation, which may have transformative effects on how trans people feel, live in, and experience their communities.

Conclusions

Our data were gathered before the official start of the Trump presidency, capturing the uncertainty and fear that trans people felt about the possible legislative, policy, and climate related implications of a second Trump administration. Our

findings are a sobering confirmation that, far from imagining a "worst case scenario," participants were anticipating a reality that has, in many ways, come to pass—even exceeding what some participants considered to be possible or probable. A recent survey found that over half of trans people report being discriminated against or mistreated since the election (MAP, 2025). Such experiences underscore the vulnerability that many trans people are feeling at the current moment. Researchers, practitioners, policy advocates, educators, and other professionals have an obligation to continue to advocate for the equal rights and humanity of trans people.

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Data Availability No datasets were generated or analysed during the current study.

Declarations

Competing interests The authors declare no competing interests.

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