FENWAY III HEALTH

March 16, 2021

Chair Dick Durbin
United State Senate Committee on the Judiciary
224 Dirksen Senate Office Building
Washington, D.C. 20510

Dear Chair Durbin,

On behalf of Fenway Health and The Fenway Institute, which serves the LGBTQIA+ community and all people in our neighborhoods through access to the highest quality health care, education, research and advocacy, we submit these comments for the record in support of the Equality Act, S. 393 / H.R. 5 (117).

Discrimination on the basis of sexual orientation and gender identity is a major public health concern. It occurs across the life spectrum and intersects with discrimination on the basis of sex, race/ethnicity, religion, and other demographic factors. In fact, many surveys indicate that anti-LGBTQ discrimination disproportionately affects LGBT people of color. A survey of 294 LGBTQ youth of color in Boston in 2015 found that 45% reported experiencing racial/ethnic discrimination, 41% reported experiencing sexual orientation discrimination, and 35% reported experiencing gender expression discrimination. A third (33%) reported experiencing five or more types of discrimination over the past year, while only 12% reported experiencing no discrimination in the past year.

Experiencing discrimination in employment, housing, and public accommodations correlates with negative physical and mental health symptoms, including headache, upset stomach, pounding heart, feeling sad, feeling upset, and feeling frustrated.² Anti-LGBTQ discrimination in health care is widespread,³ correlates with poorer health and well-being for LGBTQ people, and can cause LGBTQ people to not access health care. This exacerbates health disparities that LGBTQ people experience.⁴

Discrimination—and even the potential for discrimination—can deter LGBTQ people from seeking care. A survey by the Center for American Progress found that 14 percent of LGBTQ people who had experienced discrimination on the basis of their sexual orientation or gender identity in the past year reported avoiding or postponing care that they needed.⁵

 $\frac{https://www.iom.edu/\sim/media/Files/Report\%20Files/2011/The-Health-of-Lesbian-Gay-Bisexual-and-TransgenderPeople/LGBT\%20Health\%202011\%20Report\%20Brief.pdf}{}$

¹ Conron K, Wilson J, Cahill S, Flaherty J, Tamanaha M, Bradford J (2015, November 30). *Our health matters: Mental health, risk, and resilience among LGBTQ youth of color who live, work, or play in Boston*. Fenway Institute. https://fenwayhealth.org/wp-content/uploads/our-health-matters.pdf

² Reisner SL, White Hughto JM, Dunham E, Heflin K, Begenyi JB, Coffey-Esquivel J, Cahill S (2015). Legal protections in public accommodations settings: A critical public health issue for transgender and gender nonconforming people. *Milbank Quarterly*. 1-32.

³ Lambda Legal. 2010. *When Health Care Isn't Caring: Lambda Legal's Survey of Discrimination against LGBT People and People with HIV*. New York: Lambda Legal.

⁴ Institute of Medicine Committee on Lesbian, Gay, Bisexual, and Transgender Health Issues and Research Gaps and Opportunities (2011). *The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding*. Washington, DC: National Academies Press, 2011.

⁵ Ahmed Mirza, Shabab and Rooney, Caitlin (2018). *Discrimination Prevents LGBTQ People from Accessing Health Care*. Washington, DC: Center for American Progress.

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A study that the Fenway Institute conducted with 452 transgender residents of Massachusetts found that one in four (24%) reported experiencing discrimination in a health care setting in the past year. Of those reporting discrimination in health care, 19% did not seek care when they were sick or injured subsequent to that experience of discrimination, and 24% did not seek subsequent preventive or routine care.⁶

Organizations like the Joint Commission⁷ and the Institute of Medicine⁸ have noted the striking health disparities affecting LGBT people and prioritized reducing or eliminating them. The ability of LGBTQ people to access nondiscriminatory health care is essential to reducing LGBTQ health disparities and improving health equity and quality of care. This is why major health professional associations, such as American Medical Association, American Psychological Association, and National Association of Social Workers, support the Equality Act.⁹

The Equality Act is needed even more following four years of an administration that promoted anti-LGBTQ discrimination in a wide range of policy areas, ¹⁰ including by implementing religion and "conscience"-based policies that could increase anti-LGBTQ discrimination in health care and other areas of society. ¹¹

We urge you to pass the Equality Act, 47 years after it was first introduced by visionary Congresswoman Bella Abzug. Thank you for standing up for fairness and equal protection under law.

Sincerely,

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⁶ Reisner, White Hughto, Dunham E et al., 2015.

⁷ The Joint Commission: Advancing Effective Communication, Cultural Competence, and Patient- and Family- Centered Care for the Lesbian, Gay, Bisexual, and Transgender (LGBT) Community: A Field Guide. Oak Brook, IL, Oct. 2011. http://www.jointcommission.org/assets/1/18/LGBTFieldGuide.pdf

⁸ Institute of Medicine. 2011. *The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding*. https://www.ncbi.nlm.nih.gov/books/NBK64806/

⁹ GLMA endorses Equality Act (2019). http://www.glma.org/index.cfm?fuseaction=Feature.showFeature&FeatureID=846&nodeID=1

¹⁰ Cahill S, Wang T, Jenkins B (2019, January). *Trump Administration continued to advance discriminatory policies and practices against LGBT people and people living with HIV in 2018*. Boston: The Fenway Institute. https://fenwayhealth.org/wp-content/uploads/Trump-Administration-Impact-on-LGBTs-Year-Two-Brief Web.pdf

¹¹ Cha, A., Eilperin, J. (2018, January 17). New HHS civil rights division to shield health workers with moral or religious objections. *Washington Post*. https://www.washingtonpost.com/national/health-science/trump-administration-creating-civil-rights-division-to-shield-health-workers-with-moral-or-religious-objections/2018/01/17/5663d1c0-fbe2-11e7-8f66-2df0b94bb98a story.html