

# LGBTQI+ Health Equity

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# GLOSSARY OF TERMS

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## **Agender »**

A term for a person who does not identify with any particular gender or has no gender.

## **AFAB »**

An acronym that stands for “assigned female at birth.”

## **AMAB »**

An acronym that stands for “assigned male at birth.”

## **Asexual »**

Describes a person who experiences little or no sexual attraction to others.

## **Bisexual »**

Describes a person who is attracted to men and women. Some define bisexuality as attraction to all genders (see “pansexual”).

## **Cisgender (or cis) »**

An adjective for people who exclusively identify their gender in alignment with their sex assigned at birth. The term comes from the Latin prefix *cis*, meaning “on the same side of.”

## **Gay »**

A sexual orientation describing people who are primarily attracted to people of the same gender and/or sex as themselves. Commonly used to describe men who are attracted to men.

## **Gender »**

A social system of categorizing people into men, women, or other genders. Gender can align with sex (in which case the person is cisgender) or not (in which case the person is transgender and/or gender nonconforming). Rather than being solely reducible to physical traits, gender is more expansive and involves:

- » **Gender identity** (one’s individual internal identification of gender).
- » **Gendered embodiment** (one’s bodily experience of gender).
- » **Gender expression** (how one presents their gender through stylization, gestures, dress, mannerisms, etc.).
- » **Gender roles** (the culturally specific norms and behaviors assigned to men and women).

## **Genderqueer »**

Denotes a person who does not subscribe to conventional gender distinctions. Genderqueer people may identify with a combination of genders or with no gender.

## **Gender affirmation »**

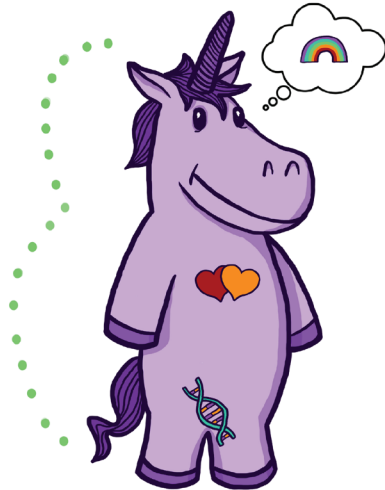
The process of making social, legal, and/or medical changes to recognize and express one’s gender identity. Social changes can include changing one’s pronouns, name, clothing, etc. Legal changes can include changing one’s name and gender markers

*“Being queer is not about a right to privacy; it is about the freedom to be public, to just be who we are. It means everyday fighting oppression; homophobia, racism, misogyny, the bigotry of religious hypocrites and our own self-hatred.”*

“Queers Read This: publishing anonymously by queers” leaflet (1990)

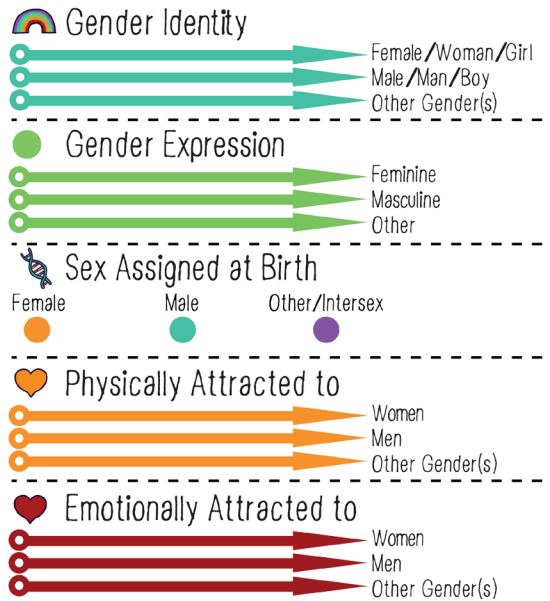
# The Gender Unicorn

Graphic by:  
**TSER**  
Trans Student Educational Resources



To learn more, go to:  
[www.transstudent.org/gender](http://www.transstudent.org/gender)

Design by Landyn Pan and Anna Moore



on legal documents. Medical changes can include receiving gender-affirming hormone therapy and/or surgeries. Sometimes this process is referred to as “transition.”

## Gender affirming care »

Health care that holistically attends to people’s physical, mental, and social health needs and well-being while recognizing and affirming their gender identity and expression. This is more than just transition-related care and refers to an affirming experience in all health care encounters.

## Gender dysphoria »

Psychological distress that results from an incongruence between one’s sex assigned at birth and one’s gender identity. This term is categorized in the DSM-V as a medical diagnosis.

## Gender fluid »

Denotes a person whose gender identity or gender expression is not fixed and shifts over time or depending on context.

## Gender nonconforming »

A broad term that refers to a person whose gender identity, expression, and/or experience

does not conform to cultural expectations based on their sex assigned at birth or to the gender they are normally “read” as (what people typically interpret their gender to be).

## Homophobia and transphobia »

A fear, hatred, and/or rejection of queer and trans people, respectively, that results in both individual and societal discrimination.

## Heterosexism and cissexism (or heterocissexism) »

The paradigmatic assumption that heterosexuality and cisgender identity are normal and natural, and that any person, behavior, or value outside of this paradigm is abnormal, unnatural, and/or illegitimate. In the U.S., heterocissexism pervades social customs, norms, and institutions, engendering structural prejudice and discrimination against LGBTQI+ people.

## Intersex »

A category that describes people whose sex characteristics differ from medical definitions of male or female. Intersex conditions can include genetic, hormonal, or anatomical differences.

## Gender Pronouns

Please note that these are not the only pronouns. There are an infinite number of pronouns as new ones emerge in our language. Always ask someone for their pronouns.

Subjective	Objective	Possessive	Reflexive	Example
She	Her	Hers	Herself	She is speaking. I listened to her. The backpack is hers.
He	Him	His	Himself	He is speaking. I listened to him. The backpack is his.
They	Them	Theirs	Themselves	They are speaking. I listened to them. The backpack is theirs.
Ze	Hir/Zir	Hirs/Zirs	Hirself/Zirself	Ze is speaking. I listened to hir. The backpack is zirs.

Source: *Trans Student Educational Resources (TSER)*.

### Lesbian »

A sexual orientation that describes a woman who is exclusively or primarily attracted to other women.

### LGBTQI+ (and other variations, e.g., LGBT, LGBTQ, LGBTQIAAP2S+, etc.) »

A shorthand term for gender and sexual minorities — an array of identities that are not cis and/or straight. The term is an initialism that stands for **L**esbian, **G**ay, **B**isexual, **T**ransgender, **Q**ueer, **I**ntersex, and **+** is a placeholder for additional gender and sexual minorities. There are many variations of the LGBTQI+ acronym, and the “+” acknowledges the impossibility of including every term people use to describe their gender and sexuality.

### Non-binary (also spelled nonbinary) »

Describes someone who does not identify exclusively as either male or female or does not subscribe to the gender binary. Sometimes abbreviated as NB or “enby.”

### Pansexual »

A sexual orientation that describes a person who is attracted to all genders or attracted to people regardless of gender.

### Pronouns »

A pronoun is simply a word that takes the place of a noun. In English, personal pronouns that refer to people are often gendered, e.g., “she/her” or “he/him.” Though it’s not often conscious, when we use pronouns to refer to people, we are *gendering* the person we are referencing, meaning we are not just passively or neutrally describing a person, but actively assigning them a gender. For this reason, one should not assume a person’s pronoun — it’s always best to ask what pronouns people use if they have not made it clear.

Some people might use a gender neutral pronoun like “they/them” or “ze/zir” (pronounced: “zee”/“zeer”). Some people may not feel comfortable sharing their pronouns or are not sure because they are still figuring it out. The important thing is to make room for self-determination: just ask people how they would like to be referred to.

## Queer »

An umbrella term for anyone on the LGBTQI+ spectrum. Formerly a slur, it has also been reappropriated as a political identity meant to counter the assimilation of LGBTQI+ people into binary gender roles, heterosexual family structures, and normative sexual values.

## Sex / sex assigned at birth »

A medically and legally assigned label that categorizes various physical characteristics as either male or female. These characteristics include sexual organs, chromosomes, hormones, and secondary sex characteristics. Sex is usually medically assigned based on the appearance of the genitalia, either in ultrasound or at birth, and is typically legally codified on one's birth certificate as male or female.

## Sexuality »

The way people experience and express themselves sexually. Sexuality has to do with sexual attraction, practices, and identities.

## Sexual orientation »

How a person characterizes their emotional and sexual attraction to others.

## Transgender (or trans) »

An adjective that describes people whose gender does not match their sex assigned at birth.

## Two-Spirit »

A modern umbrella term for third gender, fourth gender, or gender variant individuals common in many Native North American Indigenous cultures. Particular definitions and conceptions of Two-Spirit people vary by tribe and nation, so not all cultures will perceive Two-Spirit people the same way or welcome a pan-Indian term to replace the terms already in use by their culture.

*“[Sex is] a suite of sexually dimorphic traits that may include chromosomes, gonads, external genitals, other reproductive organs, ratio of sex hormones, and secondary sex characteristics. In our society, these traits are classified in a dichotomous manner as either female or male, and people are assigned a legal sex on that basis. However, variability exists in all these traits, plus these traits may not all ‘align’ (i.e., All male or all female) within the same person — when this occurs, such traits (and the people who possess them) are often described as intersex. Some people believe in a strict sex/gender distinction — where sex refers to the realm of biology, and gender refers to the purely social — but I reject that position...the truth is that, in our culture, ‘sex’ is both a social and legal category in addition to describing anatomy.”*

— Julia Serano, *“There is No Perfect Word: A Transgender Glossary of Sorts”* (2016)

# HEALTH DISPARITIES AND HEALTH DETERMINANTS

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**Health disparities** are “preventable differences in the burden of disease, injury, violence, or opportunities to reach your best health that are experienced by socially disadvantaged populations.”<sup>1</sup> In 2016, the National Institute on Minority Health and Health Disparities identified sexual and gender minorities as a “health disparity population.”<sup>2</sup> These disparities are not simply the result of individual bias or behavior: they stem from the structural and systemic nature of homophobia, transphobia, and heterocissexism.

## **Some of these health disparities include »**

### » Higher rates of HIV:

More than half of people living with HIV are gay, bisexual, and men who have sex with men (MSM). In 2018, gay and bisexual men made up 69% of new HIV diagnoses in the U.S., despite representing an estimated 2% of the population.<sup>3</sup> Black and Latino MSM make up a widely disproportionate amount of HIV diagnoses. Transgender people are also at greater risk for infection: overall HIV prevalence among trans people is 9.2%, compared to <.5% of the U.S. adult population.<sup>4</sup> In a recent study, 42% of more than 1,000 transgender women interviewed across seven U.S. cities had HIV; 62% of them were African American, 35% Latina, and 17% white.<sup>5</sup>

### » Higher rates of other sexually transmitted infections (STIs):

Gay, bisexual, and MSM are at higher risk for STIs, including chlamydia, syphilis, gonorrhea, HPV, and hepatitis A and B.<sup>6</sup>


### » Higher rates of certain types of cancer:

Lesbian and bisexual women have higher rates of breast cancer and cervical cancer than heterosexual women, and gay and bisexual men have a higher risk of anal cancer than heterosexual men.<sup>7</sup> There are also studies that show higher rates of lung cancer among LGBT people, likely connected to increased tobacco use.

### » Greater risk for chronic conditions like asthma,<sup>8</sup> diabetes,<sup>9</sup> and heart disease.<sup>10</sup> LGBTQI+ patients also report more gastro-intestinal problems, allergies, and osteoarthritis than their straight, cisgender counterparts.<sup>11</sup>

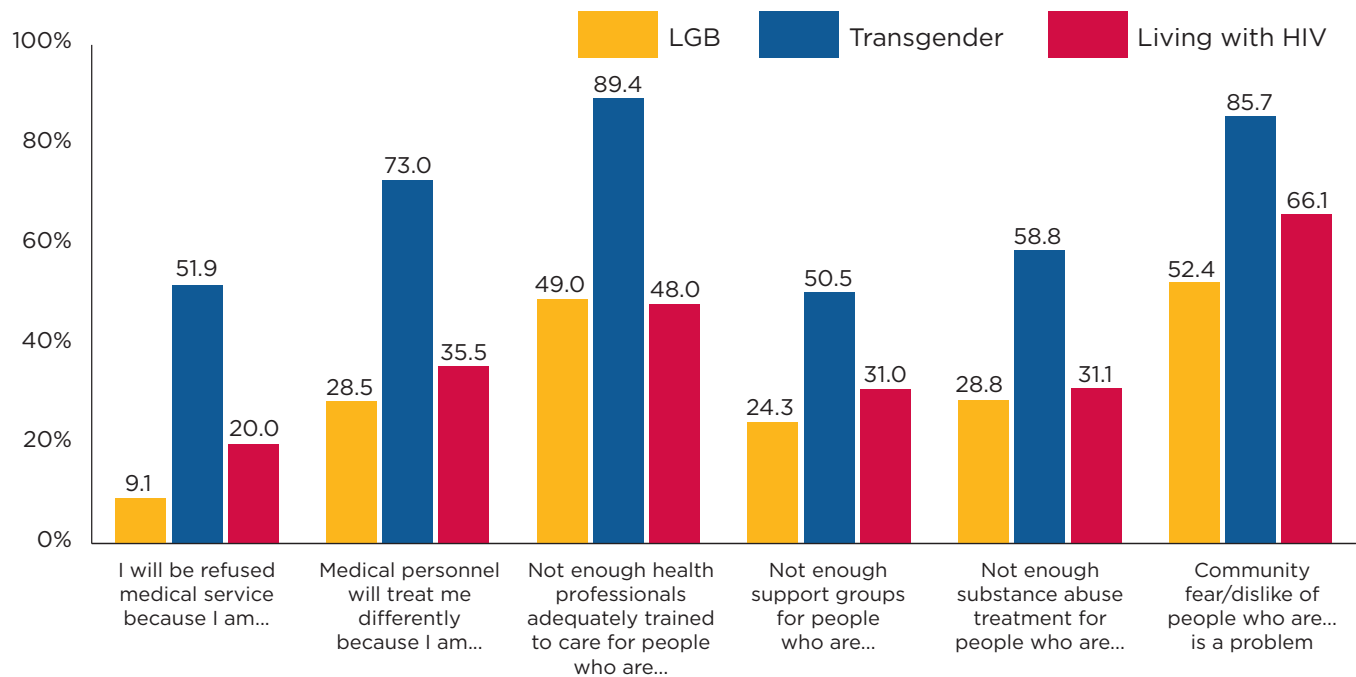
### » More likely to score their health as poor or fair in surveys.<sup>12</sup>

### » More likely to have a disability compared to the general population. Lesbian, gay, and bisexual adults with disabilities are also significantly younger than heterosexual adults with disabilities.<sup>13</sup>



**When it comes to mental and behavioral health, LGBTQI+ people are also at greater risk of suicide and suicidal thoughts, mood disorders, depression, anxiety, and eating disorders. They are more than twice as likely to have a mental health disorder, 2 ½ times more likely to experience depression, 4 times as likely to attempt suicide.**

## Fears and concerns about accessing health care



Source: *When Health Care Isn't Caring: Lambda Legal's Survey of Discrimination Against LGBT People and People with HIV (2010)*.

### When it comes to mental and behavioral health, LGBTQI+ people are also »

- » At greater risk of suicide and suicidal thoughts, mood disorders, depression, anxiety, and eating disorders. They are more than twice as likely to have a mental health disorder, 2 ½ times more likely to experience depression, 4 times as likely to attempt suicide.<sup>14</sup> Nearly 40% of LGBTQI people reported dealing with a mental illness in the past year. 48% of trans adults report they have considered suicide in the last year.
- » More likely to experience alcohol, tobacco, and substance abuse.<sup>15</sup> 20–30% of queer and trans people misuse alcohol and other substances compared to about 9% of the general population. More than a quarter of respondents in a recent nationwide survey reported misusing drugs or alcohol specifically to cope with discrimination based on their gender or sexuality.

### Health Care Disparities for LGBTQI+ Patients »

Health disparities mean more queer and trans people live in a state of compromised health, and the health impacts of disparities are compounded by the fact that LGBTQI+ people have lower access to health care and other services, face discrimination from health care providers, and are more likely to be un or underinsured.

- » LGBTQI+ people are more likely to lack health insurance. 17% of LGBTQI+ adults do not have any kind of health insurance compared to 12% of non-LGBTQI+ adults.<sup>16</sup>
- » LGBTQI+ patients are also more likely to avoid or delay seeking medical care. They are far less likely to utilize preventative care services and are more likely to receive care in emergency rooms.<sup>17</sup>

In a recent survey, more than half of LGBTQI+ respondents reported they have experienced “providers denying care, using harsh language, or blaming the patient’s sexual orientation or gender identity as the cause for an illness.”<sup>18</sup> About 12% of LGB respondents in a nationwide survey reported experiencing discriminatory language from their providers and health care professionals who refused to touch them or used excessive precautions.<sup>19</sup> 8% of queer people and 27% of transgender people report being denied health care outright because of their sexual orientation or gender identity.<sup>20</sup>

Access to health care is particularly compromised for trans and gender nonconforming (TGNC) people who face excess barriers to care due to limited means and experiences of discrimination, gatekeeping, discrimination, and abuse from health care providers:

- » 48% of trans people have postponed health care when sick or injured because they could not afford it.<sup>21</sup>
- » 28% of trans people have postponed health care when sick or injured due to discrimination.
- » 19% of trans people surveyed reported being refused care due to their trans or gender non-conforming status.
- » 28% of trans respondents were subjected to harassment in medical settings.

**Health disparities, health care inequities, and barriers to care for queer and trans people are often directly tied to socio-economic status, institutional discrimination, targeted policing and criminalization, and persistent harassment and exposure to violence.**

## **Social Determinants of Health »**

Gender and sexuality regulate people’s access and proximity to the institutions, services, and material means of sustaining life, like jobs, housing, health care, and freedom from harassment, coercion, violence, and discrimination. For this reason, health disparities, health care inequities, and barriers to care for queer and trans people are often directly tied to socio-economic status, institutional discrimination, targeted policing and criminalization, and persistent harassment and exposure to violence.

### **Socio-economic status »**

- » Before the Covid-19 pandemic, almost 22% of LGBTQ adults lived in poverty.<sup>22</sup> Transgender people have especially high rates of poverty — almost 30%. In general, LGBTQ adults have a 15% greater likelihood of being poor than non-LGBTQ adults in the U.S.
- » In December of 2019, 9% of LGBTQ people were unemployed in the U.S., compared to the national unemployment rate of 3.6%.<sup>23</sup>
- » These trends have continued with the Covid-19 pandemic: 17% of LGBTQ people lost their jobs during the pandemic compared to 13% of the general population.<sup>24</sup> The disparities are worse for LGBTQ people of color: 22% of queer and trans people of color (QTPOC) have lost their jobs due to the pandemic, and 38% had their work hours reduced compared to 29% of white LGBTQ people and 24% of the general population. Even as states have initiated policies to reopen parts of the economy, LGBTQ people and LGBTQ people of color are 50% and 150% more likely, respectively, than the general population to have suffered a pay cut.<sup>25</sup>



- » 27% of LGBTQI+ people experience food insecurity, compared to 17% of non-LGBT people. One in four LGB adults between the ages of 18–44 have participated in the Supplemental Nutrition Assistance Program (SNAP).<sup>26</sup>
- » Housing unaffordability, instability, and homelessness excessively plagues LGBTQ communities, especially poor, TGNC adults and LGBTQI+ youth.
  - › LGBTQ people are 20% less likely to own homes than non-LGBTQ people.<sup>27</sup> Among those that do own homes, same sex couples pay higher interest rates and experience higher rates of loan rejection than heterosexual couples.<sup>28</sup>
  - › 69% of low-income LGBT people have experienced homelessness.
  - › 19% of trans and gender-nonconforming people have experienced homelessness.
  - › LGBTQ youth are 120% more likely than non-LGBTQ youth to experience homelessness.

### Discrimination »

Data from a nationally representative survey of LGBT people conducted by the Center for American Progress (CAP) shows that more than a quarter of LGBT respondents have experienced discrimination because of their sexual orientation or gender identity in the past year.<sup>29</sup> Additionally, according to another recent nationally representative survey:<sup>30</sup>

- » 57% report they have been threatened or assaulted.
- » 51% have been sexually harassed.
- » 51% have experienced violence.
- » 57% have been the target of slurs.

The high rates of poverty, unemployment, and housing disparities among LGBTQI+ people is directly linked to high rates of reported discrimination when applying to jobs and housing:

- » One in five LGBTQ adults experience discrimination when applying to jobs due to their sexual orientation or gender identity. 22% report being paid less or denied promotion.
- » Between 8% and 17% of LGB workers and between 13% and 47% of transgender workers report being unfairly fired or denied employment.<sup>31</sup>
- » 16% of same-sex couples, 19% of transgender people, and 48% of seniors with same-sex partners report discrimination when applying to housing.<sup>32</sup>

The CAP study found that among people who experienced sexual orientation or gender identity based discrimination in the past year:<sup>33</sup>

- » 68.5% reported that discrimination at least somewhat negatively affected their psychological well-being.
- » 43.7% reported that discrimination negatively impacted their physical well-being.
- » 47.7% reported that discrimination negatively impacted their spiritual well-being.
- » 38.5% reported discrimination negatively impacted their school environment.
- » 52.8% reported that discrimination negatively impacted their work environment.
- » 56.6% report it negatively impacted their neighborhood and community environment.

This discrimination is prevalent not just in workplaces, schools, and communities, but also within families of origin. About 40% of LGBTQ adults report that they have been rejected by a family member or close friend because of their sexual orientation or gender identity.<sup>34</sup> Without a familial safety net to fall back on, LGBTQI+ people are even more vulnerable to the harmful effects of poverty, homelessness, and unemployment.

## **Familial rejection is particularly harmful to LGBTQI+ youth »**

- » 50% of LGB youth who have come out to their parents reported negative parental reactions when they disclosed their sexual identity.<sup>35</sup> 34% report being physically assaulted by a family member after coming out. 26% are forced to leave their family of origin after conflicts with parents regarding their sexual orientation or gender identity.
- » When placed in foster care, 79% of LGBTQ youth are removed or run away from their foster placements as a result of their orientation or identity.
- » LGBTQI+ youth are 120% more likely to experience homelessness than their straight cisgender peers. Up to 40% of the homeless youth population in the U.S. identifies as LGBTQI+.<sup>36</sup>

Due in part to such violence and discrimination, LGBTQI youth are heavily overrepresented in the criminal justice and foster systems.<sup>37</sup> They also face heightened health risks including depression, suicidality, substance abuse, psychological distress, low self-esteem, HIV/AIDS infection, and others.<sup>38</sup> Research shows that rejecting behaviors by parents can increase these risks, including contributing to far higher levels of suicidal behavior and depression:<sup>39</sup>

- » LGBT youth who experience parental rejection were nearly 6 times as likely to have depression, more than 8 times as likely to have attempted suicide, and more than 3 times as likely to use illegal substances.<sup>40</sup> Numerous studies have also shown that a lack of parental acceptance is a primary driver of homelessness for LGBT youth.<sup>41</sup>
- » Nearly 30% of LGB youth had attempted suicide at least once in the prior year compared to 6% of heterosexual youth.<sup>42</sup>
- » Almost 35% of trans youth have attempted suicide and almost 40% have “seriously considered suicide” just in the last year.<sup>43</sup>

- » Transgender and/or gender nonconforming (TGNC) youth are several times more likely to have attention deficit disorders and depressive disorders, and more likely to self-harm than non-TGNC youth.<sup>44</sup>

## **Criminalization »**

LGBTQI people are more likely to be unemployed, poor, houseless, and/or engaged in criminalized economies due to the economic inequality, discrimination, and violence they disproportionately face. As a result, they are frequent targets of police and laws criminalizing prostitution and related so-called quality of life offenses. More than a quarter of LGBTQ people surveyed have been harassed or unfairly treated by police or the courts due to their sexuality or gender identity.<sup>45</sup>

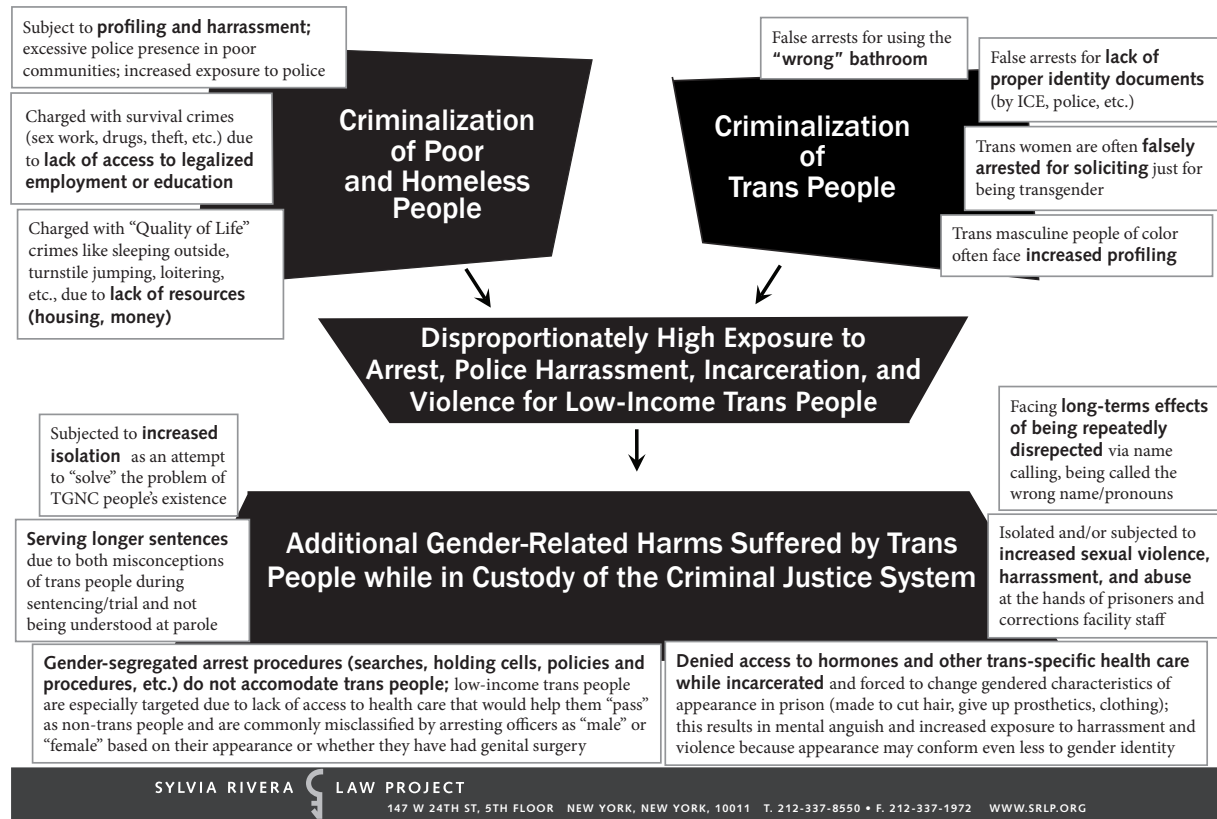
Additionally, LGBT people, especially LGBT people of color, are disproportionately represented in the U.S. prison population:

- » Criminalization and discrimination increase the likelihood of incarceration for LGBT adults. LGBT adults are 3 times more likely to be incarcerated than non-LGBT adults.<sup>46</sup> The incarceration rate is several times higher among transgender people of color. For example, in the 2015 U.S. Transgender Survey, 9% of Black transgender women were incarcerated in the previous year, approximately 10 times the rate of the general population.
- » While an estimated 7% of U.S. youth identify as lesbian, gay, or bisexual, 12 to 20% of youth in juvenile detention identify as LGB. 85% of incarcerated LGB youth are people of color.

Within our prisons, there is extreme and widespread racial and gender violence, and incarcerated LGTBQI people are disproportionate targets of abuse and violence compared to non-LGBTQI prisoners and are significantly more likely to spend extended time in solitary confinement. Institutional discrimination contributes to these injustices. Trans women are often placed in men’s prisons and trans men in women’s prisons where they are subject to high rates of physical abuse and harassment:

## SYSTEMS OF INEQUALITY: CRIMINAL “IN”JUSTICE

This diagram illustrates how overpolicing and profiling of low-income people and of transgender and gender non-conforming people intersect, producing a far higher risk than average of imprisonment, police harassment, and violence for low-income trans people.



- » An estimated 40% of transgender people in prisons reported a sexual assault in the previous year.<sup>47</sup>
- » LGB prisoners are 3 times more likely to report sexual abuse from other prisoners.

As a result, incarcerated queer and trans people experience marked health and health care inequities in prison. Gender-affirming care for incarcerated trans people for example, is exceedingly difficult to access and maintain:

- » 20% of transgender people in prison report being denied hormone therapy. 14% report being denied health care outright while incarcerated.

The problems of violence and discrimination that we see in prisons also affect people in immigration detention centers. Many queer and trans migrants seek asylum specifically for the intense violence and threat of death they experience in their home countries for

being queer or trans. While the U.S. recognizes LGBTQ identity and HIV status as legal grounds for political asylum, the process of seeking asylum is increasingly difficult, complicated, and can expose LGBTQ people to numerous threats. Further, LGBTQ asylum seekers are more likely than non-LGBTQ asylum seekers to be detained, even if they pose no safety or flight risk. Queer and trans people in detention, especially trans women, are treated particularly poorly and face more abuse and neglect than cisgender and heterosexual detainees:

- » LGBT immigrants held at federal detention centers are 97 times more likely to be sexually assaulted than other detainees.<sup>48</sup>
- » 20% of sexual abuse cases in the custody of ICE involve a transgender detainee.

# RESOURCES

## LGBTQI+ Organizations

- » **Anti-Violence Project** (NYC-based anti-LGBT violence organization): <https://avp.org/>
  - › Crisis Support and Legal Help: <https://avp.org/get-help/get-support/>
- » **The Audre Lorde Project** (NYC-based community organizing center): <https://alp.org/>
- » **CenterLink** (association of national LGBT centers): <https://www.lgbtcenters.org>
  - › LGBT Center Search Tool: <https://www.lgbtcenters.org/LgbtCenters>
- » **Center of Excellence for Transgender Health, UCSF** (transgender health research, education, and advocacy): <https://prevention.ucsf.edu/transhealth>
- » **Fenway Health and Fenway Institute** (Boston-based LGBT health providers; national advocacy and policy group): <https://fenwayhealth.org/about/>
- » **Intersex Justice Project** (intersex activists working to end intersex surgery): <https://www.intersexjusticeproject.org/>
- » **Lambda Legal** (national LGBT rights nonprofit): <https://www.lambdalegal.org>
  - › Legal Help Desk: <https://www.lambdalegal.org/helpdesk>
- » **National LGBTQ Task Force** (LGBTQ organizing and advocacy): <https://www.thetaskforce.org/>
  - › Queering Reproductive Health Campaign: <https://www.thetaskforce.org/reproductive-justice.html>
- » **National Center for Lesbian Rights** (LGBTQ legal rights organization): <https://www.nclrights.org/>
  - › Legal Help: <https://www.nclrights.org/get-help/>
- » **National Center for Transgender Equality** (transgender advocacy and policy nonprofit): <https://transequality.org/>
- » **Pride at Work** (AFL-CIO constituency group representing LGBTQ union members and allies): <http://www.prideatwork.org/>
- » **Sylvia Rivera Law Project** (NYC-based LGBT legal advocacy collective): <https://srlp.org/>
  - › Legal Services: <https://srlp.org/legal-services/>
- » **Transgender, Gender-Variant, and Intersex Justice Project** (CA-based support and legal services for incarcerated and formerly incarcerated TGNC people): <http://www.tgijp.org/>
- » **Transgender Law Center** (legal advocacy and support services for TGNC people): <https://transgenderlawcenter.org>
  - › Resources/Legal Aid: <https://transgenderlawcenter.org/resources>
- » **Trans Lifeline** (national crisis hotline and support for TGNC people): <https://translifeline.org/>
  - › Hotline: (877) 565-8860
- » **Trans Student Educational Resources** (national youth-led trans education and advocacy organization): <https://transstudent.org/>
- » **The Trevor Project** (national LGBT youth crisis intervention and suicide-prevention): <https://www.thetrevorproject.org>
  - › Hotline: (866) 488-7386

## Studies and Data

- » **Center for American Progress (CAP):** <https://www.americanprogress.org/issues/lgbtq-rights/view/>
- » **Freedom for All Americans Legislative Tracker** (for anti-LGBT legislation): <https://freedomforallamericans.org/legislative-tracker/>
- » **MAP, LGBTQ Equality by State:** <https://www.lgbtmap.org/equality-maps>
- » **The Williams Institute, UCLA:** <https://williamsinstitute.law.ucla.edu/>
  - › Demographics and data graphic: <https://williamsinstitute.law.ucla.edu/visualization/lgbt-stats/?topic=LGBT#density>

## Clinical Guidelines for LGBTQI+ Patients

- » **“5 Pearls on Transgender Health: Gender Affirming Care”** podcast: <https://www.coreimpodcast.com/2020/03/18/5-pearls-on-transgender-health-gender-affirming-care-episode-1/>
- » **“10 Tips for Working with Transgender Patients”** (Transgender Law Center): <https://transgenderlawcenter.org/resources/health/10tips>
- » **CDC, Toolkit for Providing HIV Prevention Services to Transgender Women of Color:** <https://www.cdc.gov/hiv/effective-interventions/library/toolkit-transgender-women-of-color/implementation-materials/cdc-hiv-ei-twoc-toolkit.pdf>
- » **GLMA Resources:** <http://www.glma.org/index.cfm?fuseaction=Page.viewPage&pageId=534>
  - › Guidelines for Care of Lesbian, Gay, Bisexual, and Transgender Patients: [http://glma.org/\\_data/n\\_0001/resources/live/GLMA%20guidelines%202006%20FINAL.pdf](http://glma.org/_data/n_0001/resources/live/GLMA%20guidelines%202006%20FINAL.pdf)

- » **Lavender Health LGBTQ Resource Center:** <https://lavenderhealth.org/>
- » **National LGBTQIA+ Health Education Center** (Fenway Institute): <https://www.lgbtqiahealtheducation.org/>
  - › Learning Resources: <https://www.lgbtqiahealtheducation.org/resources/>
- » **Stanford Medicine LGBTQ Medical Education Research Group Resources:** <https://med.stanford.edu/lgbt/resources.html>
- » **UCSF LGBT Resource Center:** <https://lgbt.ucsf.edu/lgbtqia>
  - › UCSF LGBT Health Library: [https://guides.ucsf.edu/lgbt\\_health](https://guides.ucsf.edu/lgbt_health)

## Information on Trauma-Informed Care and Harm Reduction

- » **Harm Reduction: Compassionate Care of Persons with Addictions:** <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4070513/>
- » **Harm Reduction Principles for Healthcare Settings:** <https://harmreductionjournal.biomedcentral.com/articles/10.1186/s12954-017-0196-4>
- » **Harm Reduction Strategies: Imperatives and Implications for Nurses:** <https://doi.org/10.3928/02793695-20190430-02>
- » **The Institute on Trauma and Trauma-Informed Care, University of Buffalo Center for Social Research:** <http://socialwork.buffalo.edu/social-research/institutes-centers/institute-on-trauma-and-trauma-informed-care/what-is-trauma-informed-care.html>
- » **National Harm Reduction Coalition:** <https://harmreduction.org/>

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## Media

- » **5B documentary:** <https://5bfilm.com/>
- » **CURED documentary:** <https://www.cureddocumentary.com/>
- » **How to Survive a Plague documentary:** <https://surviveaplague.com/>
- » **Major! documentary:** <https://www.missmajorfilm.com/>
- » **NNU LGBTQI+ Health Interviews** (password= solidarity): <https://vimeo.com/showcase/7836702>
- » **PRIDE documentary:** <https://www.fxnetworks.com/shows/pride>
- » **Stonewall Forever documentary:** <https://stonewallforever.org/documentary/>
- » **Transgender Oral History Project:** <http://transoralhistory.com/>

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