

January 29, 2021

Submitted via email to <a href="mailto:SGMRO@nih.gov">SGMRO@nih.gov</a>

RE: Request for Information on Research Opportunities Related to the National Institutes of Health Scientific Workshop on Violence and Related Health Outcomes in Sexual and Gender **Minority Communities** 

Dear Colleagues,

Howard Brown Health would like to thank you for the opportunity to provide comment on this Request for Information. Howard Brown is the largest LGBTO health center in the Midwest, serving over 38,000 patients across twelve clinic locations in Chicago. As a federally qualified health center (FQHC), Howard Brown provides primary care, behavioral and mental health services, HIV/STI prevention, social services and community outreach initiatives to our patients regardless of ability to pay. Through these programs, Howard Brown fulfills its mission of eliminating health disparities and improving health outcomes experienced by LGBTQ individuals.

We are pleased that the NIH will be hosting a scientific workshop regarding violence and related health outcomes in sexual and gender minority communities. As a leader in LGBTO health, we know firsthand that there is an epidemic of violence affecting LGBTO communities—especially Black and Latinx transgender women. Below, we provide background on how various forms of violence are affecting LGBTQ communities and make recommendations for key research opportunities for the NIH to prioritize.

## Family of origin abuse across the lifespan

Research has shown that parent and family rejection is strongly associated with various negative health outcomes and risk behaviors—including mental health problems, substance use, and sexual risk behaviors—in LGBTO youth.<sup>1,2</sup> Family rejection also contributes to the overrepresentation of LGBTQ youth among all homeless youth.<sup>3</sup> On the flipside, perceived family support is associated with improved mental and behavioral

<sup>&</sup>lt;sup>1</sup> Bouris A, Guilamo-Ramos V, Pickard A, et al. (2010). A systematic review of parental influences on the health and well-being of lesbian, gay, and bisexual youth: Time for a new public health research and practice agenda. J Prim Prev. 31:273-309.

<sup>&</sup>lt;sup>2</sup> Simons L, Schrager SM, Clark LF, et al. (2013). Parental support and mental health among transgender adolescents. J Adolesc Health;53:791-793.

<sup>&</sup>lt;sup>3</sup> Choi SK, Wilson BDM, Shelton J, Gates G. (2015). Serving our Youth 2015: The Needs and Experiences of Lesbian, Gay, Bisexual, Transgender, and Questioning Youth Experiencing Homelessness. Los Angeles, CA: The Williams Institute with The True Colors Fund.



health outcomes.<sup>4</sup> There is a need for more research that examines mechanisms and strategies for helping parents become more supportive and communicate more affirmatively and effectively with their LGBTO children. While some family-based interventions have been found to be effective in improving health outcomes and reducing risk behaviors in youth populations generally, few have been conducted specifically for LGBTQ youth.<sup>5</sup> Researchers should evaluate if these interventions can be adapted to address issues unique to LGBTQ youth and their families. Additionally, little research has been done that focuses on cultural differences and how that may affect parent-child relationships when the child identifies as LGBTQ.

## Victimization by peers and friends

The 2019 GLSEN School Climate Survey of 16,713 students from across the country found that among LGBTQ students, 59.1% felt unsafe at school because of their sexual orientation and 42.5% felt unsafe because of their gender expression. The survey also showed that among LGBTQ students: 68.7% experienced verbal harassment and 25.7% experienced physical harassment based on sexual identity, while 56.9% experienced verbal harassment and 21.8% experienced physical harassment based on gender expression.<sup>7</sup>

The GLSEN survey also identified a number of protective factors for LGBTQ students, including presence of Gay-Straight Alliance or Gender and Sexuality Alliance (GSA) clubs, LGBTQ-inclusive curricula, supportive educators, and anti-bullying policies that specifically enumerate sexual orientation and gender identity. LGBTQ students in schools that utilized these protective strategies experienced better educational outcomes and were less likely to experience discrimination and harassment.8 Future research should examine protective factors and strategies for fostering resiliency and community among LGBTQ youth. Policy analysis and research should be done around anti-bullying policies as well as LGBTQinclusive school curricula.

## Romantic and sexual partner violence

Data from the National Crime Victimization Survey (NCVS), the nation's primary source for data on criminal victimization, show that LGBTQ people are disproportionately the victims of violence. LGBTQ people were significantly more likely to experience violence perpetrated by a well-known person (OR = 6.61) or an intimate partner (OR = 6.88)

<sup>4</sup> Newcomb M, LaSala M, Bouris A, et al. (2019). The Influence of Families on LGBTQ Youth Health: A all to Action for Innovation in Research and Intervention Development. LGBT Health; 6(4).

<sup>&</sup>lt;sup>5</sup> Ihid.

<sup>&</sup>lt;sup>6</sup> Kosciw, J. G., Clark, C. M., Truong, N. L., & Zongrone, A. D. (2020). The 2019 National School Climate Survey: The experiences of lesbian, gay, bisexual, transgender, and queer youth in our nation's schools. New York: GLSEN.

<sup>&</sup>lt;sup>7</sup> Ibid.

<sup>8</sup> Ibid.



compared to the general population. Rates of intimate partner violence (IPV) are especially high among transgender individuals. According to the 2015 U.S. Transgender Survey, more than half of respondents (54%) reported experiencing IPV in their lifetimes. and nearly one quarter (24%) reported experiencing severe physical violence by an intimate partner. 10 Given this data, we would recommend that the NIH prioritize research into developing innovative, affirming, and trauma-informed interventions to provide care to LGBTQ individuals experiencing IPV, especially for transgender people. This is even more important given that those who are experiencing IPV may be stuck in dangerous situations due to stay-at-home orders to combat the COVID-19 pandemic.

## **Community violence**

Data from the NCVS show that LGBTQ people are disproportionately the victims of violence. LGBTQ people were significantly more likely to experience violence victimization—including events such as robbery, physical and sexual assault, and assault with a weapon—compared to non-LGBTQ people (OR = 3.91).<sup>11</sup> The most recent hate crime data from the FBI show that in 2019, there were 7,314 reported hate crime incidents.<sup>12</sup> Of the reported hate crimes, 16.8% were motivated by bias against sexual orientation and 2.8% were motivated by bias against gender identity. 13 In particular, Black and Latinx transgender women have disproportionately been the victims of violence and hate crimes. Human Rights Campaign (HRC) reported that in 2020, at least 44 transgender and gender nonconforming people, the vast majority of whom were Black and Latinx transgender women, were victims of fatal acts of violence. This is the highest number since HRC began tracking this data in 2013.

Unfortunately, in addition to hate crimes, there is also a significant history of law enforcement violence and discrimination against LGBTQ people. Until relatively recently in this country, LGBTQ people were criminalized for their very identities. This criminalization and stigmatization formed the basis for the history of mistreatment of LGBTQ people by law enforcement that is still unfortunately widespread today. One national survey of LGBTQ people and people living with HIV found that 73% of respondents had face-to-face

<sup>9</sup> Flores A, Langton L, Meyer I, Romero A. (October 2, 2020). Victimization rates and traits of sexual and gender minorities in the United States: Results from the National Crime Victimization Survey, 2017. Science Advances. 6(40): eaba6910.

<sup>&</sup>lt;sup>10</sup> James SE, Herman JL, Rankin S, Keisling M, Mottet L, Anafi M. (2016). The Report of the 2015 U.S. Transgender Survey. Washington, DC: National Center for Transgender Equality.

<sup>&</sup>lt;sup>11</sup> Flores A, Langton L, Meyer I, Romero A. (October 2, 2020). Victimization rates and traits of sexual and gender minorities in the United States: Results from the National Crime Victimization Survey, 2017. Science Advances. 6(40): eaba6910.

<sup>&</sup>lt;sup>12</sup> Uniform Crime Report Program. (2020). Hate Crime Statistics, 2019. FBI. Available online at: https://ucr.fbi.gov/hate-crime/2019/topic-pages/incidents-and-offenses.pdf <sup>13</sup> *Ibid*.



contact with police in the past 5 years. Of those respondents, 21% encountered hostile attitudes from officers, 14% were verbally assaulted, 3% were sexually assaulted, and 2% were physically assaulted. The report also found that many respondents who were victims of a crime reported inadequate response by police, and of those that filed a police misconduct complaint, the majority (71%) reported that the complaint was not fully addressed.14

While there is much research to suggest that LGBTQ people are disproportionately the victims of violence, measurement of violence and victimization is often challenging generally, and especially for marginalized populations. Stigma in combination with inconsistent recording of sexual orientation and gender identity data likely contribute to an underreporting of violent acts. More robust data collection and research is needed to better identify differences in victimization among LGBTQ sub-communities and understand how experiences of victimization over the life course contribute to risk behaviors and health outcomes. In designing forms and methodologies to better capture data and experiences of transgender and queer people, it is critical that researchers work with the communities that they are trying to study in order to minimize error while addressing community needs. Additional research is also needed to better address the social determinants of health that often contribute to violence and discrimination against communities, especially communities of color.

Thank you for the opportunity to provide comment. We look forward to learning more about the work going on at NIH around addressing violence against sexual and gender minority communities. If you have any questions about our feedback, feel free to reach out to Tim Wang, Director of Policy and Advocacy, at timothyw@howardbrown.org.

Sincerely,

David Ernesto Munar President and CEO

<sup>&</sup>lt;sup>14</sup> Mallory C, Hasenbush A, Sears B. (March 2015). Discrimination and Harassment by Law Enforcement Officers in the LGBT Community. Los Angeles: The Williams Institute, UCLA. Available online at: https://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBT-Discrimination-by-Law-Enforcement-Mar-2015.pdf