

Improving the Health and Safety of Transgender and Gender Expansive People

Transgender and Gender Expansive People Can Be Found Throughout America and are an Important Part of the HIV Community

As Americans, the story we tell ourselves is that all people have the right to life, liberty, and the pursuit of happiness. While there is no doubt that lesbian, gay, bisexual, transgender, and questioning (LGBTQ) people have come a long way in recent decades, the full realization of these rights is incomplete. Today, transgender and gender expansive people are experiencing a backlash that threatens their lives and weakens the bonds that hold our society together. They are already subject to higher rates of violence, discrimination, and disrespect and there is great fear that these experiences will worsen. On January 20th, the day he was inaugurated, President Trump issued an Executive Order that attacks the concept of gender

Transgender people are those whose gender identity (that is, their innate understanding of what gender they are) is different from the sex they were assigned at birth. **Gender expansive** is an umbrella term that includes people who do not fit neatly into an either or male and female, and can include persons with other identities such as non-binary, gender non-conforming, gender queer, gender fluid, and androgynous.

FOCUSING ON FUNDAMENTAL ISSUES PROVIDES A PATHWAY FOR PROGRESS

Broader societal support for transgender and gender expansive people can be achieved in three critical areas:

RECOGNITION AND RESPECT

Improve journalistic standards and expand opportunities for transgender and gender expansive artists and other cultural influencers to tell their stories

Faith communities need to provide models for embracing transgender and gender expansive people

Health care providers need to build the skills to respectfully and sensitively treat all people, including transgender and gender expansive people

RIGHTS OF ALL PEOPLE

Law enforcement, schools, workplaces, and civic institutions need to protect the safety of all people, including transgender and gender expansive people

Employers, unions, and recruitment agencies must publicize and enforce nondiscrimination protections in employment

Civil society groups need to establish policies that normalize the expectation that transgender and gender expansive people have the same rights as other members

HIGH QUALITY HEALTH CARE

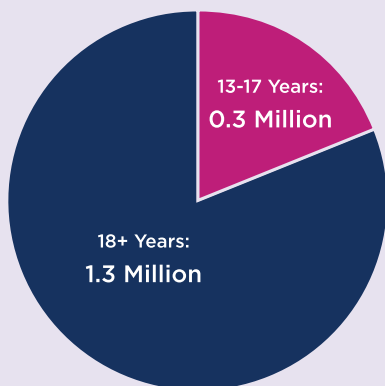
Medical societies, primary care associations, and others need to expand the capacity to provide high quality care consistent with WPATH Standards of Care for Transgender and Gender Diverse People

Providers, researchers, and funders of research must expand the capacity to collect SOGI data while ensuring that privacy and confidentiality can be protected from forced disclosure.

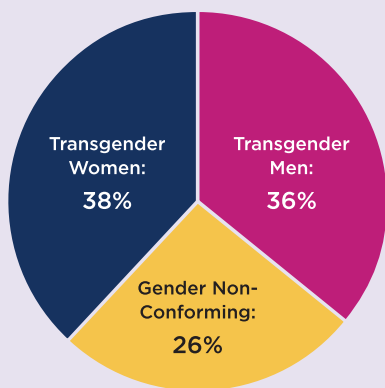
Health departments and clinical providers, and community-based organizations should set goals and monitor progress toward improving HIV prevention and care outcomes for transgender and gender expansive populations

GETTING TO KNOW TRANSGENDER AND GENDER EXPANSIVE PEOPLE: THE BASICS

BY AGE



BY GENDER IDENTITY (For Adults 18+)



BY RACE/ETHNICITY

For Adults 18+ as a Share of the Population

White	0.5%
Black	0.6%
Latino	0.7%
Asian	0.5%
American Indian/ Alaska Native	0.9%
Multiracial or Other	1.0%

Source: Herman, J.L., Flores, A.R., O'Neill, K.K. (2022). How Many Adults and Youth Identify as Transgender in the United States? The Williams Institute, UCLA. School of Law.

identity and seeks to rollback existing protections for transgender and gender expansive people in federal programs.¹ This exercise of presidential power not only seeks to negate the existence of transgender and gender expansive people, this and other orders seek to remove the promise of fair and equal treatment in federal programs and other areas of civic life for not only members of the LGBTQ community, but also people of color and others. This highlights the need to generate the political will to enact into law these fundamental civil and human rights. Reframing the public dialogue around transgender and gender expansive people as part of the evolving story of America, while not a total solution may allow more people to see that, except for those seeking to exploit differences, there are few fundamental areas of conflict.

There are some issues for which a societal consensus over fairness and equal treatment has not been reached. Regarding health care for minors, for example, clinical practice is evolving, and there is a wide range of interventions. Public discussion, however, often seems geared toward scaring parents about the potential for irreversible surgical procedures or gender-affirming hormone therapy (GAHT). Current legislative and administrative efforts seek to shift healthcare decision-making away from parents and healthcare providers to politicians with no expertise in these matters and no personal connection to the young people involved. While not undercutting the salience of this issue, there are a broader set of issues that impact the daily lives of transgender and gender expansive people. Transgender and gender expansive people make meaningful contributions to society. By considering how their aspirations are universal (to be safe, to be loved, to be a valued part of a community, to have employment and educational opportunities, to have access to high-quality health care), it becomes easier to see how strengthening their connections to society benefits everyone. Importantly, transgender and gender expansive people make up a very small share of the U.S. population, yet they are often among the most disproportionately impacted by HIV. Taking action to improve their standing in society, protecting their rights, and addressing their specific health and other needs offers a critical pathway for making progress at preventing HIV and strengthening the lives of people with HIV.

1. RECOGNITION AND RESPECT

Transgender and gender expansive people have been with us throughout history. What is new today is that more are willing to assert their right to be seen and acknowledged for who they are. For others encountering transgender and gender expansive people, this can be new and perhaps uncomfortable. A current flashpoint is the subject of pronouns, i.e. how we refer to individuals in the third person, which traditionally have been tied to gender (she/her and he/him). Pronouns are important as a proxy for acknowledgment and respect. When people use pronouns that do not match an individual's identity, it can be hurtful and traumatizing whether done accidentally or intentionally. For many gender expansive people, the ability to use pronouns that go beyond masculine and feminine also can be empowering. Habits of language, however, can be hard to change and mistakes can be made. On the one hand, there are people enjoying a newfound freedom of expression and on the other, some people may feel like they do not understand new rules of behavior that are being asked of them. By focusing more on outwardly demonstrating respect in a variety of ways, we can make the use of pronouns less fraught. Offering proactive social affirmations also may serve to buffer some of the negative impacts of political attacks on these communities. For many transgender people, securing a legal name change is an important step toward making their

legal identities match their lived experience. A lack of identity documents such as driver's licenses and passports can prevent people from applying for jobs, from traveling, from seeking to enroll in school, or accessing public benefits.² Standardizing the requirements across federal and state jurisdictions and reducing the costs and barriers associated with securing legal name changes would represent an important advance.

A related issue is the use of bathrooms that match a person's gender identity. Bathrooms are intimate spaces where people can feel vulnerable. The idea of cisgender men pretending to be transgender women in order to use women's restrooms and threaten their physical safety has been used as a reason to deny transgender people access to restrooms congruent with their gender identity. Such behavior is already subject to civil or criminal sanction and it is typically transgender or gender expansive individuals who are most vulnerable in these settings. Forcing them to use restrooms inconsistent with their gender identity undermines their dignity and can create a real threat to their physical safety. In the recent congressional election, the people of Delaware elected Sarah McBride to represent them in the House of Representatives. She is the first transgender person to serve in the U.S. Congress. Immediately, however, members of the Republican conference advocated for changes to House rules to restrict individuals to using the restroom that matched their sex assigned at birth. Few people would assert that this is grounded in well-meaning concern for personal safety, especially in such a secure and policed environment as the U.S. Capitol. Rather, it is a public rejection of transgender existence. The consequences of such a change goes well beyond the House of Representatives. Federal legislation also has been introduced that would prohibit any entity from receiving federal funds that allows transgender or gender expansive people to use bathrooms consistent with their gender identity.³ There is no easy solution to public figures who use transgender and gender expansive people for political advantage. There are several actions, however, that can better recognize and respect transgender and gender expansive people in society:

POLICY ACTION

Improve journalistic standards and expand opportunities for transgender and gender expansive artists and other cultural influencers to tell their stories.

Media always has played a critical role in increasing understanding among people, expanding the range of policy opportunities for addressing critical issues, and creating demand for legislative action. The portrayal of transgender and gender expansive people in news media, however, is often insensitive

or offensive. Newspapers and online media sites regularly sensationalize transgender and gender expansive people and often amplify highly transphobic comments. Media organizations and journalist associations should elevate their standards for covering issues about transgender and gender expansive people by more judiciously relying on available research in place of a both-sides framing of these issues and by developing relationships with transgender advocacy organizations to develop trainings and guidelines for covering these communities. Transgender and gender expansive artists, actors, social media influencers and other creators also need to be given more opportunities to show the public the diverse lives and experiences of transgender and gender expansive people. In the 1970s, television programs by Norman Lear, for example, created new ways to have dialogues over race and racism through television programs such as *All in the Family* and *The Jeffersons*. Starting in the late 1990s, the television show *Will and Grace* and the first television lesbian kiss on *Ellen* were critical in exposing the lives of gay and lesbian people in a way that the public could see that these individuals were friends and neighbors, not strange foreigners to whom they could not relate. Today, increasing representation in television and film such as through programs such as *Pose* and the increased prominence of actors such as Laverne Cox, Michaela Jaé Rodriguez, Elliot Page and others allows the public to see how relatable transgender and gender expansive people are.

POLICY ACTION

Faith communities need to provide models for embracing transgender and gender expansive people.

Faith communities can be both a source of hope and harm for LGBTQ people. Today, we need more people of all faith traditions to affirmatively express support for transgender and gender expansive people. This builds on a rich history of many faith-based organizations that have served as a source of community for LGBTQ people and those with HIV. The Balm in Gilead was founded to promote caring for people with HIV by Black churches 36 years ago and the National Black Leadership Commission on AIDS (now the National Black Leadership Commission on Health) continues to bring together Black faith and political leaders to respond to the HIV in Black communities. The Episcopal Caring Response to AIDS is just one example of a denomination-specific HIV response and numerous faith leaders have been critical advocates for and partners with the President's Emergency Plan for AIDS Relief (PEPFAR), the U.S. global HIV program. There are also Muslim organizations that work on HIV issues that are transgender-friendly including RAHMA based in Washington, DC, as well as the Transgender and Muslim

AMERICANS HAVE COMPLEX VIEWS ON TRANSGENDER ISSUES

Most Support Non-Discrimination Protections

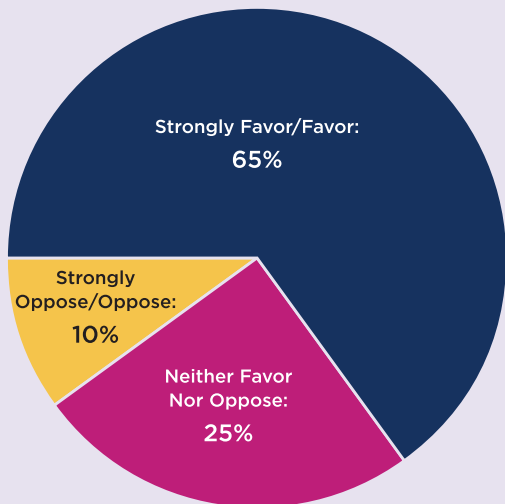
Americans are often divided in their views on transgender and gender expansive policy issues. The Pew Research Center conducted a nationally-representative survey of Americans views in May 2022.

KNOWING SOMEONE WHO IS TRANSGENDER OR GENDER EXPANSIVE

Respondents reporting that they know someone who is transgender	40%
Respondents reporting that they know someone who is non-binary	20%
Respondents who believe that gender identity can be different than sex assigned at birth:	
• Know someone who is transgender	48%
• Do not know someone who is transgender	32%

PROTECTION FROM DISCRIMINATION

Respondents support for laws or policies that would protect transgender people from discrimination in jobs, housing, and public spaces:



PACE OF CHANGE

(Selected respondent comments)

Views on issues are changing too quickly: The issue is so new to me I can't keep up. I don't know what to think about all of this new information. I'm baffled by so many changes.

Views on issues are changing too slowly: There is far too much discrimination, hate, and violence directed toward people who are brave enough to stand up for who they truly are. We, as a country and as a society, need to respect how people want to identify themselves and be kind toward one another, end of story.

Sources: Pew Research Center, June 2022, "Americans' Complex Views on Gender Identity and Transgender Issues".

Project led by a transgender faith leader. United Reform Judaism, Keshet, and Eshel are just a few organizations that have a long history of affirming LGBTQ people in the Jewish community. These and other faith-led efforts are needed to extend the love and protection for transgender and gender expansive people.

POLICY ACTION

Health care providers need to build the skills to respectfully and sensitively treat all people, including transgender and gender expansive people.

Many transgender and gender expansive people delay or avoid seeking health care for many reasons including experiences of disrespect, lack of knowledge about their bodies and health needs, and dehumanizing behavior from providers.⁴ There is an urgent need to broaden the capacity of our health care workforce to provide culturally sensitive care to transgender and gender expansive people. Training on cultural awareness particularly in providing holistic gender affirming care approaches, should be a required part of medical education.⁵ For the existing workforce, continuing medical education courses should be required that include basics of serving distinct populations including not only transgender and gender expansive people, but also for other populations with unique health care needs and cultural practices. We are not calling for all health care providers to become experienced specialist transgender health providers. Rather, we are calling for the health system to be better equipped to provide affirming care to broader segments of the population.

2. RIGHTS OF ALL PEOPLE

A promise of citizenship is that all people have certain rights. Our Constitution guarantees us the right to speak freely, to assemble, the right to due process, the right to equal access to government programs and services. There are also unenumerated rights including the right to privacy, the right to vote, and the right to travel. Much of the backlash against transgender and gender expansive people seeks to infringe on these rights. Transgender and gender expansive people must have access to the same rights as others. The Pew Research Center conducted a nationally-representative survey of Americans' views on transgender issues and found that while there are divergent views on a number of issues, two in three (64%) support protecting transgender people from discrimination in employment, housing and public spaces.⁶

POLICY ACTION

Law enforcement, schools, workplaces, and civic institutions need to protect the safety of all people, including transgender and gender expansive people.

Transgender and gender expansive people are much more likely to be victims of violence than other groups. Since 2017, there have been 296 documented homicides of transgender people in the U.S. Of these, 63% were Black transgender women.⁷ Additionally, according to an analysis of data from the National Crime Victimization Survey for 2017-2018, transgender people experienced victimizations more than four times more frequently than cisgender people.⁸ Transgender households also were over two times more likely to experience property victimization than cisgender households.

There continues to be a need for new analyses that provide more insights into the types of victimizations, including intimate partner violence and hate crimes, as well as more granular data based on demographic characteristics. While law enforcement reforms have been enacted over the last decade, there remains a need for greater oversight, enforcement of policies, and ongoing training at the federal, state, and local levels. A 2022 survey of police misconduct by Lambda Legal and Black and Pink found that 47.3% of transgender people and 46.4% of gender non-conforming/nonbinary people reported that they did not trust local police at all.⁹ Similar to addressing healthcare providers lack of training and skills, increasing law enforcement's awareness and understanding of transgender and gender expansive people's lived experiences could address misconceptions and improve interactions. Community organizations including workplaces, schools, and civic institutions also have a critical role by conducting outreach, creating community forums both to raise awareness of intimate partner violence and other forms of victimization, and creating more active allies to ensure that various forms of victimization are prevented or when they do occur, are addressed appropriately by public institutions.¹⁰

POLICY ACTION

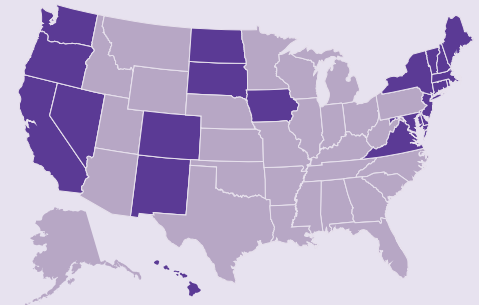
Employers, unions, and recruitment agencies must publicize and enforce nondiscrimination protections in employment.

The ability to earn an income to sustain oneself and one's family and the ability to experience the dignity of work is central to enjoying the benefits of society. Too frequently, however, transgender and gender expansive people are denied access to formal employment, and when they are employed, they are more vulnerable and subject to more discrimination from both employers and coworkers. **Workplace discrimination on the basis of sexual orientation and gender identity (SOGI) status is illegal. The Supreme Court in *Bostock v. Clayton Cty., 140 S. Ct. 1731 (2020)* ruled that firing individuals based on their SOGI status violates Title VII of the Civil Rights Act of 1964.** The law forbids discrimination in terms of any aspect of employment, including hiring, firing, pay, job assignments, promotions, layoff, training, fringe benefits, and any other term or condition of employment.¹¹ Workplace SOGI discrimination, however, remains rampant. The U.S. Equal Employment Opportunity Commission (EEOC) reported that from 2017-2021, they received more than 9,000 complaints of unlawful workplace discrimination based on SOGI status.¹² In the FY 2023 fiscal year alone, the EEOC reported recovering \$13.5 million in monetary benefits to resolve charges of SOGI discrimination in the workforce.¹³ Additionally, a November 2024 survey that compared the experience of transgender employees to cisgender LGBQ employees found that 82% of transgender employees reported discrimination or harassment at work, compared to 47% of cisgender LGBQ employees and 59% of non-binary (gender expansive) employees.¹⁴

Prior research has shown that Black, Indigenous and other workers of color are at heightened risk of dependence on informal, nonstandard,

STATE LAWS TO PROTECT TRANSGENDER PEOPLE AND PROPOSALS TO ATTACK LGBTQ RIGHTS

Twenty-one states plus the District of Columbia ban discrimination against transgender people in housing, jobs, and public spaces

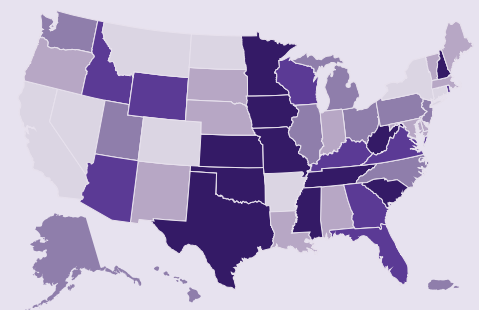


States that ban discrimination

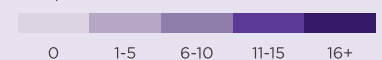
Notes: Bans apply to both sexual orientation and gender identity. In addition, Utah bans discrimination in housing and employment, but not public accommodations. Wisconsin bans discrimination in all three categories based on sexual orientation, but not gender identity.

In 2024, 559 bills have been proposed in state legislatures to attack LGBTQ rights. (Not all of these bills will become law)

Bills fall into the following categories: barriers to accurate IDs, free speech and expression bans, health care restrictions, public accommodation bans, restrictions on student and educator rights, weakening civil rights laws, and other anti-LGBTQ bills.



Bills per state



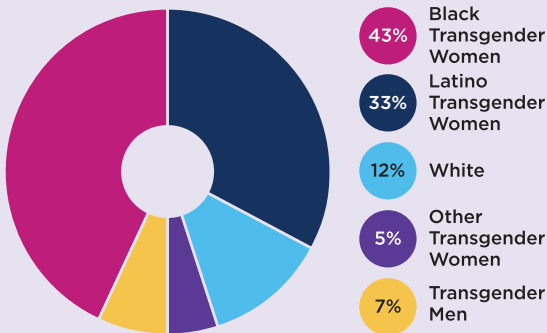
Sources: Pew Research Center, September 2022, "How Americans view policy proposals on transgender and gender identity, and where such policies exist" and ACLU, "Mapping Attacks on LGBTQ Rights in U.S. State Legislatures in 2024," last updated November 22, 2024.

TRANSGENDER PEOPLE AND HIV

HIV DIAGNOSES IN 2019

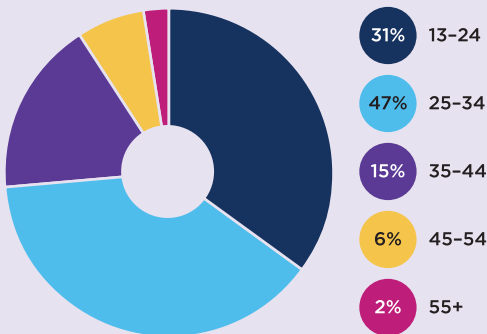
By Race and Gender

There were 671 HIV diagnoses among transgender people in 2019. They make up 0.3% of the U.S. population and accounted for 2% of new diagnoses



By Age

Seventy-eight percent of new HIV diagnoses in transgender people were among people 34 and under



HEALTH INEQUITIES ARE LARGE

A special HIV surveillance report in 7 U.S. cities from 2019-2021 found:

- 92% of transgender women without HIV were aware of PrEP, but only 32% had used it
- 62% of Black Transgender women had HIV, 35% of transgender Latinas had HIV, and 17% of white transgender women had HIV

CDC's Medical Monitoring Project found (among people with HIV 18+):

- 35% of transgender people with HIV **took all doses of HIV medications** in the last 30 days compared to 62% of all people with HIV
- 29% of transgender people with HIV **reported homelessness** in the last 12 months compared to 8% of all people with HIV
- 26% of transgender people with HIV **experienced symptoms of depression or anxiety** in the last 12 months compared to 19% of all people with HIV

Sources: Centers for Disease Control and Prevention, "Fast Facts: HIV and Transgender People," March 28, 2024.

and precarious jobs due to racial discrimination in formal employment.^{15,16} A more recent study found that low-income transgender women of color, particularly Black and Indigenous women, were at the highest risk of workplace discrimination, making them more vulnerable to economic precarity.^{17,18} Additionally, recent research has found that compared to transgender men, transgender women and gender expansive individuals are at greater risk of workplace hostility and as a result, more likely to engage in sex work.¹⁹ More than half of Black transgender women and 7 of 10 gender expansive Alaska Native/American Indians engaged in sex work when fired or forced to resign.²⁰ While the law may protect transgender and gender expansive people in the workplace, significant work must be done to raise awareness of the law's requirements, educate employers on their responsibilities, and create a culture where transgender and gender expansive people can feel valued, included, and protected along with other workers.

POLICY ACTION

Civil society groups need to establish policies that normalize the expectation that transgender and gender expansive people have the same rights as other members.

First introduced in the U.S. Congress in 2019 and re-introduced in subsequent Congresses, the Equality Act would amend the Civil Rights Act of 1964 to prohibit discrimination on the basis of sex, sexual orientation, and gender identity in employment, housing, public accommodations, education, federally-funded programs, credit and jury service. With or without this law, civil society groups should establish and enforce policies that guarantee equal treatment of all members and customers. It is essential to create a culture that respects the rights of transgender and gender expansive people to fully participate in society by establishing norms and practices and giving people models for engaging with transgender and gender expansive people as part of everyday life.

3. HIGH QUALITY HEALTH CARE

Effective HIV prevention and care must be built on a foundation of affirming high quality care. Transgender and gender expansive people are highly disproportionately impacted by HIV, yet it is not possible to construct accessible HIV care services to this community without first building trust and addressing the full range of their health needs. For transgender health care, this means seeing individuals as whole people and addressing their holistic needs. This includes primary care including annual visits and routine check-ups that can provide and address any physical, mental, and sexual health services and needs, as well as reproductive health care and gender affirming services that span a spectrum including, but not limited to hormones and body modification.

POLICY ACTION

Medical societies, primary care associations, and others need to expand the capacity to provide high quality care consistent with WPATH Standards of Care for Transgender and Gender Diverse People.

While not all health care providers need to specialize in transgender health care, there is an urgent need to expand the capacity of more providers to deliver specialized care. The World Professional Association for Transgender Health (WPATH) is a critical resource. Medical societies, primary care associations, sexual health providers, mental health providers and others should consult with and develop partnerships with WPATH and their members. In particular, WPATH has published *Standards of Care for the Health of Transgender and Gender Diverse People, Version 8* which is a comprehensive, evidence-based guide to ensure that care is appropriate and responsive to patient needs.²¹ In many cases, HIV specialist providers have built their own capacity to provide gender affirming care and they, along with the RWHAP AIDS Education and Training Centers (AETC) Program may offer trainings and other resources for assisting other providers.

Primary care providers are often the first point of contact for transgender and gender expansive patients seeking healthcare services. They need to be equipped with the knowledge and skills to provide culturally appropriate care, including understanding the basics of transgender health and how to refer patients to gender-affirming care services, and awareness of specific preventive care needs for transgender and gender expansive patients. Primary care settings should implement systematic changes to create affirming environments, from inclusive intake forms to staff training on transgender and gender expansive healthcare. In addition, primary care practices should develop comprehensive protocols for routine health maintenance and referral systems that include appropriate cancer screenings, cardiovascular risk assessments, and bone health monitoring. The integration of transgender and gender expansive awareness into standard primary care practice, rather than treating it as a separate specialty, is essential for improving healthcare access and outcomes for transgender and gender expansive individuals.

POLICY ACTION

Providers, researchers, and funders of research must expand the capacity to collect SOGI data while ensuring that privacy and confidentiality can be protected from forced disclosure.

For too long, transgender and gender expansive people, along with other LGBTQ people, have been invisible in national data sets, as well as in clinical records that are important both for high quality individual health care, as well as public health. In recent years, there have been significant efforts to standardize and normalize the collection of sexual orientation and gender identity (SOGI) data. The Census Bureau has published a *Sexual Orientation and Gender Identity (SOGI) Data Action Plan*.²² In clinical settings, the National LGBTQIA+ Health Education Center of the Fenway Institute has published a guide, *Ready, Set, Go! Guidelines and Tips For Collecting Patient Data on Sexual Orientation and Gender Identity (SOGI) - 2022 Update* to help health centers and other health care organization to collect SOGI data. Successful use of SOGI data, however, requires trust and willingness to honestly disclose SOGI information to providers. In the current climate of fear, many individuals are fearful that allowing their gender identity information to go into their medical record could lead to involuntary disclosure to law enforcement or other government officials. New efforts are needed to protect this sensitive information. One potential model is the enhanced protections in the HIPAA privacy rule for psychotherapy notes.²³ In this case, disclosures are not permitted without patient authorization, except when required by other law, such as for mandatory reporting of abuse, and mandatory “duty to warn” situations regarding threats of serious and imminent harm made by the patient.

Therefore, there is a need both for more analysis of disaggregated data on transgender and gender expansive people to inform policy and new efforts are needed to provide assurances that this sensitive information will remain confidential.

POLICY ACTION

Health departments and clinical providers, and community-based organizations should set goals and monitor progress toward improving HIV prevention and care outcomes for transgender and gender expansive populations.

Transgender people accounted for only 2% of new HIV diagnoses in 2019, yet relative to their population size, they are disproportionately impacted by HIV. This means that addressing their unique perspectives and needs are often given too limited attention. This calls for health departments, clinics, and community-based organizations to develop HIV action plans with specific goals and accountability measures for serving transgender and gender expansive people.

THE TIME IS NOW

U.S. history has shown that freedom and rights are almost never generously granted; they must be demanded, fought for, and in our democratic society, they frequently must be won with the acceptance and support of the majority of the population. HIV history shows that marginalized people can come together and transform the world. Most people in the U.S. report that they do not yet know anyone who is transgender or gender expansive, yet already two in three favor protecting them from discrimination in jobs, housing, and public spaces. By acknowledging their dignity and place in society, extending them the same basic rights as others enjoy, and ensuring that the health system can offer high quality health care, transgender and gender expansive people will be given the freedom to contribute fully to society. Taking these steps will help move us forward toward ending the HIV epidemic in the United States.

ENDNOTES

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