Recent developments have influenced the fundamental rights of sexual and gender minorities (SGMs) in the United States, affecting SGMs in schools, in the workplace, and in other public settings.

**WITHIN THE LAST YEAR:**

- The Department of Education announced its Office of Civil Rights would no longer investigate complaints from transgender students who are barred from using restrooms consistent with their gender identity.
- The Department of Justice indicated that Title VII of the Civil Rights Act does not protect lesbian, gay, or transgender people.
- The Department of Health and Human Services indicated plans to expand religious refusal policies enabling health care providers to deny services to SGMs.
- The Department of Defense stated plans to prohibit almost all transgender Americans from serving in the military.
- The Administration for Community Living announced that some surveys would cease asking questions about sexual orientation and gender identity.
- Approximately 125 state bills were introduced designed to restrict the rights of LGBT individuals and their families.
KEY FINDINGS

The minority stress model shows that the unique, persistent stressors experienced by SGMs are significant contributors to well-documented health disparities, such as higher rates of depression, suicidality, and substance use disorders. And recent public policies are a significant source of stress.

 Discriminatory policies deprive SGMs from privileges granted to heterosexual, cisgender individuals (such as access to gender-appropriate facilities) or fail to protect SGMs from potential discrimination or violence (such as lack of protections against hate crimes). Research has shown that discriminatory policies are associated with increased stress levels, resulting in harmful health outcomes:

- Sexual minority individuals living in states without policies protecting them from employment discrimination and hate crimes are at an increased risk for psychological disorders such as anxiety and PTSD.
- Following the implementation of state-level bans on gay marriage, sexual minorities in these states experienced an up to 248% increase in psychological and alcohol use disorders.
- Discriminatory policies that restrict access to gender-appropriate facilities and exclusion from necessary health care can harm the health of the transgender population.

 Supportive policies that grant equal rights and legal protections to SGMs (such as marriage equality statutes) are associated with decreased stress levels, resulting in beneficial health outcomes:

- The implementation of state policies permitting same-sex marriage was associated with a 7% decrease in adolescent suicide attempts.
- The legalization of same-sex marriage is linked to reduced rates of physical and mental health care use among sexual minority men.
- Workplaces that have implemented SGM-supportive policies have benefited from improved health outcomes among LGB employees, as well as greater job commitment, satisfaction, and productivity.
RECOMMENDATIONS

The American Psychological Association supports legislative, administrative, and regulatory solutions that promote equality for, and combat discrimination against, sexual and gender minorities:

Enact federal civil rights protections for SGMs. Several bills introduced in the 115th Congress would prohibit discrimination against SGMs. For example, the Equality Act (S. 1006/H.R. 2282) would amend the Civil Rights Act of 1964 to include sexual orientation and gender identity; the Every Child Deserves a Family Act (S. 1303/H.R. 2640) would prohibit such discrimination in foster care and adoptions; and the Student Non-Discrimination Act (S. 2584/H.R. 5374) would protect SGM elementary and high school students.

Oppose federal policies that enable discrimination against SGMs. For example, the First Amendment Defense Act (S. 2525) would enable discrimination against same-sex couples, and proposed federal regulations would expand religious refusal policies and roll back nondiscrimination measures, such as Section 1557 of the Affordable Care Act.

Advance SGM data collection. SGM data collection is critical to better understand the sources of mental and physical health disparities. Health disparities data can be used to help craft effective policy solutions that will make mental health and substance use services available to SGM populations, which would result in improved health outcomes and reduced health-care costs. The LGBT Data Inclusion Act (S. 1570/H.R. 3273) would require uniform collection of data about SGMs in federal surveys. APA also supports the collection of sexual orientation and gender identity data in federally funded surveys, surveillance systems, and research.

Exercise Congressional Oversight. Congress should use the tools it has at its disposal, such as holding oversight hearings and requesting Government Accountability Office reports, to inquire into systemic administration actions that are limiting SGM civil rights protections.
Public Policies, Prejudice, and Sexual and Gender Minority Health

REFERENCES


