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## LESBIAN, GAY, BISEXUAL, TRANSGENDER, AND QUEER OR QUESTIONING (LGBTQ+) HEALTH

### AAFP Position

The AAFP supports [full legal equality](#) for same-gender families, including individuals that identify as lesbian, gay, bisexual, transgender, and/or queer or questioning (LGBTQ+), as well as access to health care that addresses health disparities that occur within this historically marginalized population, including [gender-affirming health care](#) for gender-diverse patients, including children and adolescents. The AAFP, along with the American Medical Association and American Academy of Pediatrics, opposes legislation that further marginalizes the LGBTQ+ community and its health needs, including [reparative or conversion therapy](#). Within the AAFP, the [LGBT Member Constituency](#) advocates for the unique needs of both this patient population as well as LGBTQ+ physicians.

### LGBTQ+ Health

Approximately 5.6 [percent](#) of Americans identify as LGBTQ+. This population possesses a unique set of patient health priorities and experiences significant discrimination in housing, employment, schooling, and health settings. LGBTQ+ people are at a higher risk for suicide, substance use, depression, and other adverse health outcomes as compared to the general population.<sup>1</sup> Among LGBTQ+ youth, [suicide rates](#) are four times higher than that of their heterosexual peers, with rates amongst trans youth even higher. Family physicians are uniquely positioned to provide comprehensive care for LGBTQ+ individuals because of their whole-person focus to create care plans tailored to each patient's needs over the course of their lifespan. In a [joint letter](#) with countless national and state medical and health care organizations, the Academy urged the Senate to pass the [Equality Act](#), legislation containing comprehensive nondiscrimination protections for LGBTQ+ Americans.

### Legislative Restrictions on LGBTQ+ Health Care

#### *Gender-Affirming Care*

Medically necessary [gender-affirming care](#) (GAC) and interventions include supportive behavioral health care, hormone therapy, puberty blockers, medical procedures, and surgical interventions. GAC gives transgender individuals the opportunity to seek the interventions they desire to affirm their own gender identity. The denial of such care has been proven to increase [mental health issues](#), high-risk behaviors, HIV infection, and [health care costs](#).

Unfortunately, state efforts to restrict the ability of physicians to provide GAC negatively impact trans youth and directly interferes with the patient-physician relationship. More than [20 states](#) introduced legislation in the 2021 session to prohibit GAC in some way, define it as child abuse, and/or make it a crime for physicians to provide hormone therapy or other medical treatments.

[Arkansas](#) and [Tennessee](#) became the first states to enact legislation prohibiting doctors from providing GAC to transgender minors. Overriding Governor Asa Hutchinson's veto, the Arkansas state legislature passed legislation to penalize physicians for providing GAC to individuals under age 18 or referring them for such care. The law is currently being challenged in court. Tennessee's law prohibits physicians from providing hormone treatment to prepubescent minors.

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<sup>1</sup> Lesbian, Gay, Bisexual, and Transgender Health. (2018). Office of Disease Prevention and Health Promotion. Web.

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## *Reparative Therapy*

Overwhelming scientific evidence has disproved the pseudoscience behind reparative, or conversion, therapy. This practice often uses coercion, spiritual, or religious means to change an individual's sexual orientation, gender identity, or gender expression to heterosexual, cisgender, and gender-conforming. Despite no scientific evidence for the efficacy of this treatment, it is estimated that approximately 689,000 LGBTQ+ adults in the U.S. have undergone some form of conversion therapy, which is ineffectual and harmful, particularly for LGBTQ+ youth. Approximately 350,000 of these adults received treatment as adolescents.<sup>2</sup> As of June 2021, [20 states](#) (CA, CO, CT, DE, HI, IL, MA, ME, MD, NJ, NY, NV, NM, NH, OR, RI, UT, VA, VT, WA), DC, and dozens of counties and municipalities across the country have passed [legislation](#) to ban the practice on minors. [New York](#) has prohibited Medicaid and private payers from covering conversion therapy through executive order.

## **Decriminalization of HIV**

HIV/AIDS disproportionately affects members of the LGBTQ+ community, particularly men who have sex with men (MSM). Despite great advances in the prevention and treatment of HIV/AIDS, there is still no cure for this virus, which is responsible for thousands of new cases diagnosed annually.<sup>3</sup> Pre-exposure prophylaxis (PrEP) is a preventive, once-daily pharmacological treatment for populations at high risk for HIV. Taken consistently and correctly, PrEP can reduce the risk of sexual transmission of HIV by more than 90 percent.<sup>4</sup> With correct condom use, regular screenings for sexually transmitted infections, and comprehensive sexuality education, the risk of HIV transmission can be even lower.

Some states have taken steps to eliminate stigma and the criminalization of HIV from state statute codes. Unlike most communicable diseases, the intentional transmission of HIV in most states is a criminal offense: 37 [states](#) have laws criminalizing HIV exposure (AL, AR, CA, FL, GA, ID, IL, IN, IA, KS, KY, LA, MD, MI, MN, MO, MS, MT, ND, NE, NJ, NV, NY, NC, ND, OH, OK, PA, RI, SC, SD, TN, UT, VA, WA, WI, WV). In 2017, California passed [legislation](#) reducing the punishment for intentional transmission of HIV and knowingly donating HIV-infected blood from a felony to a misdemeanor and Washington passed similar [legislation](#) in 2020.

## **Transgender Markers**

Individuals who identify as transgender may obtain birth certificates with gender markers to match their gender identity. While most states have a process in place to address this, the requirements [vary by state](#). In 14 states, a court order is needed to change a gender marker, with seven states (AL, AR, GA, LA, MO, TX, WI) requiring proof of gender-confirming surgery and six (NV, NH, UT, VT, VA, WV) not requiring proof. In another 17 states and DC, a [physicians' note is required](#) to change a gender marker, with five states (AZ, KY, MI, NE, NC) requiring proof of gender-confirming surgery and 12 (CT, DE, FL, HI, IL, IA, KS, ME, MA, ND, PA, RI) and DC not requiring proof. [Mississippi](#) and [Wyoming](#) require both a court order and physician letter, while [Maryland](#) and [Minnesota](#) require one or the other.

Eight states (CA, CO, MT, NJ, NM, OH, OR, WA) allow individuals to self-attest to their gender identity to change the gender marker on their birth certificate. The ACLU won [a lawsuit](#) in Ohio in 2020 allowing individuals to do so. In Nevada, an individual can self-attest to their gender identity, but must also provide an affidavit from someone close to them (family member, friend, colleague). In an additional seven states (AK, IN, ID, OK, SC, SD, WV), the law generally does not address gender marker changes, although legal experts believe it is possible to change gender markers with a court order in most of those states. Tennessee expressly [prohibits](#) the changing of gender markers on its birth certificates. When Idaho attempted to do the same in 2020, the law was struck down by a [federal court](#).

In 2017, California became the first state to pass [legislation](#) requiring all state-issued documents, including birth certificates, to allow residents to choose a third, non-binary category in addition to male or female known as "non-specified," or "X." New York City also allows for a gender-neutral category, or "X," option after the city passed [legislation](#) in 2018.

*Updated: June 2021*

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<sup>2</sup> Mallory C, Brown T, Conron K. (2019). "Conversion Therapy and LGBT Youth Update." The Williams Institute. Web.

<sup>3</sup> Centers for Disease Control and Prevention. (2020). "HIV in the United States: At A Glance." Web.

<sup>4</sup> Hiv.gov. (2019). "Pre-Exposure Prophylaxis." Web.