



Pushing Back: A Blueprint for Change

*Lessons Learned from the 2016 Needs Assessment of
LGBTQ Marylanders*

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Organizational Profile & History

FreeState Justice is a legal services and policy advocacy organization that seeks to improve the lives of LGBTQ Marylanders. FreeState's mission is to combine direct legal services with policy and legislative advocacy, education and outreach to ensure that all LGBTQ Marylanders have lived equality. A brief history of the two organizations that merged to create FreeState Justice follows:

Equality Maryland was a key actor in statewide civil rights movements to eliminate systemic barriers facing LGBTQ Marylanders. Significant legislative achievements include:

Successful passage of the Maryland Anti-Discrimination Act, banning sexual orientation based discrimination in housing, public accommodations, employment and lending.

Successful passage of the 2012 Civil Marriage Protection Act, a landmark bill legalizing same-sex marriage in Maryland. Equality Maryland was one of the leaders of the coalition that achieved passage of this act.

Fairness for All Marylanders Act (FAMA), 2014

This law expanded state anti-discrimination laws to include gender identity and expression as protected categories. FAMA bars discrimination against transgender Marylanders in employment, housing, and places of public accommodation such as restaurants, theaters, and bars. Equality Maryland played a pivotal role in FAMA's passage, alongside a host of regional and national partners.

FreeState Legal Project, founded in 2007, provided direct legal services to low-income LGBTQ Marylanders in matters arising out of their sexual orientation and/or gender identity. Through its in-house attorneys and statewide network of pro bono attorneys. In addition to direct legal services, FreeState offered capacity building services to attorneys and service providers, and directed an extensive statewide capacity building program for educators and other youth serving professionals. Critical accomplishments include:

Eliminating gender transition related care exclusions from state-regulated insurance plans governed by the federal Affordable Care Act, Maryland state sponsored insurance plans, and Maryland Medicaid.

Obtaining the first legal decision in the country recognizing the rights of incarcerated transgender people under the Prison Rape Elimination Act.

Successful passage of legislation that struck down barriers preventing transgender and gender non-conforming individuals born in Maryland from obtaining an updated birth certificate that is consistent with their gender identity.

Providing direct legal services and undertaking impact litigation on behalf of LGBTQ Marylanders in hundreds of civil matters arising out of their sexual orientation and/or gender identity.

FreeState Justice continues to advocate for the rights of LGBTQ Marylanders. Recent wins include:

Expanded Protections for LGBTQ Youth in Foster Care, 2016

The Youth Equality Alliance (YEA), an LGBTQ youth policy coalition coordinated by FreeState, partnered with the Maryland Department of Human Resources to pass a landmark policy protecting LGBTQ youth in care. This policy includes explicit protections for TGNC youth, including the ban of conversion therapy, and mandates agency professionals and resource families use affirming gender pronouns and names for clients. It also establishes procedures for agency professionals to vet placements for LGBTQ youth.

Access to Sex Segregated Locker Rooms and Bathrooms in Schools, 2018

FreeState Justice secured a ruling recognizing that excluding students who are transgender from sex-segregated facilities, including locker rooms, is a form of sex discrimination barred under state and federal law. The ruling on locker rooms was the first of its kind in the country and continues to be cited by courts nationwide.

Conversion Therapy Ban, 2018

FreeState Justice advocated for the successful passage of the statewide Conversion Therapy Ban. Conversion therapy attempts to change an individual's sexual orientation, gender identity, and/or expression. Studies have found that conversion therapy may lead to suicidality, substance abuse, and depression¹. This legislation protects vulnerable LGBTQ individuals, particularly youth, from these dangerous and widely discredited practices.

¹The Lies and Dangers Of "Conversion Therapy" Human Rights Campaign. (n.d.) Retrieved <https://www.hrc.org/resources/the-lies-and-dangers-of-reparative-therapy>

Acknowledgments

This needs assessment would not be possible without the support, expertise and collaboration of so many partners. Jean Michel Brevelle, Tonia Poteat, Jer Welter and Sean Lare provided critical subject matter expertise in the design and development phase. Hayley Libowitz transcribed all listening session recordings, facilitated a listening session and conducted initial qualitative data coding. Jabari Lyles, Merrick Moises, Blair Franklin, Caro Rodriguez Fucci and Monica Yorkman provided critical feedback during the needs assessment process. FreeState Justice collaborated with twelve organizations to host fourteen listening sessions across the state, including:

- PFLAG Howard-Columbia
- Lower Shore LGBTQ Coalition
- The Frederick Center
- Youth Against Oppression, The LGBTQ Center of Baltimore and Central Maryland
- Maryland Trans* Unity
- Open Door Metropolitan Community Church
- Howard 50s+ Club
- Hearts and Ears
- TEA Time, AIDS Action
- United Church of Christ Annapolis
- PFLAG Chestertown
- Chase Brexton Health Care

FreeState also thanks the Goldseker Foundation for its generous support.

Executive Summary

In January 2016, the Board of Directors of FreeState Justice launched a statewide needs assessment to gather data about the experiences of LGBTQ Marylanders, including: demographics, resiliencies, areas of need, and regional resources. The data garnered from the assessment has deeply informed FreeState’s advocacy work and strategic planning.

DATA COLLECTION

The data analyzed in this needs assessment was gathered over an 11-week period, from February 2016 to May 2016, through three separate collection methods, including:

- Online Surveys**
- Listening Sessions**
- Leadership Roundtables**

Data was collected utilizing a snowball sampling method, where assessment participants referred the FreeState researcher to other participants and stakeholders. 511 individuals participated. This report provides an analysis of the data collected.

SUMMARY OF KEY FINDINGS

The report reviews key findings from the online survey and listening sessions (including the Leadership Roundtables). Over half of the sample—365 participants—took the online survey, and 157 individuals took part in listening sessions and roundtables. Five major issues emerged as the most urgent and pressing concerns for the LGBTQ community in Maryland:

- Street Harassment**
- Affordable and LGBTQ Friendly Healthcare**
- Education**
- Reliable Employment**
- Domestic Violence and Sexual Assault**

This report features case vignettes for each identified issue. These vignettes are client narratives from FreeState’s legal work that will provide much needed insight on the ways each issue area impacts LGBTQ Marylanders in their lived realities.

REVIEW OF METHODOLOGY

Snowball Sampling is a commonly used data methodology, most often employed by researchers working within communities where participants may be difficult to reach. Given the reality that LGBTQ populations in Maryland are more likely to experience social and economic isolation due to a number of systemic factors, snowballing proved to be an effective methodology. Any self-identified LGBTQ community member interested in being part of the research could participate, and also provide recommendations about regions, community groups and organizations that might also be willing to take part. The cumulative impact of this methodology ensured that the dataset was inclusive of critical populations whose voices are often neglected. The data sample includes:

Geographic Representation

Respondents included LGBTQ Marylanders in **20 out of 24 counties**.

Gender and Racial Diversity

Over 1/4th of all respondents identified as people of color.

The United States Census Bureau reported that approximately 50% of Maryland identifies as African American, Indigenous, Biracial, Hispanic and/or Asian². While there was significant participation from communities of color, there is a clear and evident need to refine engagement strategies in future studies.

23.3%

of participants across multiple data collection methods identified as transgender, non-binary, two spirit and/or agender. To date, the United States Census Bureau does not collect data on gender identity. However, several national research agencies have authored studies sharing estimates of transgender and gender non-conforming (TGNC) populations in the United States. A 2016 report by the Williams Institute found that .49% of Maryland's population identify as TGNC³.

² U.S. Census Bureau "Quick Facts: Maryland" July 1, 2017. Available at: <https://www.census.gov/quickfacts/md>

³ Flores, A.R., Herman, J.L., Gates, G.J., & Brown, T.N.T. (2016). How Many Adults Identify as Transgender in the United States? Los Angeles, CA: The Williams Institute.

SUMMARY of CONTEXTUAL DATA

FreeState conducted an extensive literature review of relevant research culled from regional and national reports. These reports include:

1. [2015 U.S. Transgender Survey, Maryland State Report](#)
2. [Widespread Discrimination Continues to Shape LGBT People’s Lives in Both Subtle and Significant Ways, Center for American Progress \(2017\)](#)
3. [Discrimination in America: Experiences and Views of LGBTQ Americans, NPR, Robert Wood Johnson Foundation, Harvard T.H. Chan School of Public Health, \(2017\)](#)
4. [2015 State Snapshot: School Climate in Maryland, GLSEN](#)
5. [Lesbian, Gay, Bisexual, Transgender, Queer, and HIV-Affected Intimate Partner Violence in 2015, National Coalition of Anti-Violence Programs](#)
6. [High School Youth Risk Behavior Survey: Maryland, \(2017\)](#)
7. [LGBTQ Community Needs Assessment Data Summary, Chicago, Illinois, \(April 2012\)](#)
8. [Living in the Margins: A Report on the Challenges of LGBTQ Youth in Maryland Education, Foster Care, and Juvenile Justice Systems \(2014\)](#)

The intent of the review was to gain a richer understanding of the urgent issue areas identified by assessment participants within the context of contemporary research on LGBTQ populations. This research helps to locate the experience of LGBTQ Marylanders within a national perspective, and provide insight about possible concrete strategies to effect lasting change.

CONCLUSIONS

The final section of this needs assessment summarizes the data shared in this report, and shares evidence based practices and recommendations to ameliorate the barriers experienced by LGBTQ Marylanders. The conclusions will highlight reflections from participants in the needs assessment and also share FreeState Justice’s current work to ameliorate systemic barriers that impact their clients and the wider LGBTQ population in Maryland. This work includes pro-bono legal services for LGBTQ clients with low-incomes, LGBTQ capacity building trainings for lawyers, judges, educators and service providers, and policy advocacy.

Methodology

FreeState Justice utilized snowball sampling, a nonprobability sampling technique that is often used to engage populations that may be difficult to access through more traditional research methodologies. Snowball sampling is grounded in collaboration, outreach and feedback. FreeState Justice drafted the initial tools (i.e. online survey and listening session agenda), then shared them for feedback with key community stakeholders. The researcher then conducted outreach to local and statewide organizations to request co-sponsorship of listening sessions, as well as support with promotion of each tool. More than 20 organizations across the state joined the project as co-sponsors. This work could not have been achieved without the energy, passion and investment of so many community members.

Thanks to our partners, FreeState Justice collected 365 responses to the online survey and 157 participants attended the listening sessions, which included 16 participants who took part in the Leadership Roundtable. Data collection took place during an 11-week period from February 2016 to May 2016. The primary researcher conducted 13 listening sessions, and the primary research assistant conducted one. A more detailed description of each tool is below⁴:

Online Survey

Administered via SurveyMonkey, respondents took part in a 22-question survey. This tool collected data on a number of attributes, including gender identity, gender presentation, salary, housing status, etc. Survey respondents were asked to identify and rank the most urgent issues LGBTQ Marylanders face, and answered questions around personal experiences within the spheres of public health, education, intimate partner violence, street harassment, and more.

Listening Sessions

Created in collaboration with several community stakeholders, respondents were asked to fill out brief demographic data forms, and take part in a group conversation about urgent needs for LGBTQ Marylanders. Sessions ranged from 30 minutes to two-and-a-half hours. Participants answered questions similar to the online survey, but also engaged in facilitated conversations that provided rich data and stories about the lived experiences of participants across Maryland. The smallest session was attended by two participants; the largest convened 51 respondents.

Leadership Roundtable

To ensure the needs assessment report featured the voices of LGBTQ leaders and organizers doing critical work in Maryland, FreeState Justice hosted a convening dedicated to community stakeholders. In February 2016, 16 participants gathered to share their thoughts and feedback about the urgent issues they witnessed within their leadership work, and provide recommendations for ways FreeState Justice could amplify their movement building.

Report Constraints

FreeState Justice sees this needs assessment as a critical step in movement building work, and poses urgent questions to researchers seeking to address structural inequities within LGBTQ communities. Future needs assessments are recommended to explore the needs of LGBTQ communities experiencing housing instability, incarceration, as well as undocumented Marylanders.

⁴To review the needs assessment tools, please refer to the appendix

Introduction

This report, the first ever known statewide effort to collect data on the strengths and needs of Maryland’s LGBTQ community, is a comprehensive portrait of this population’s lived realities. It focuses on a number of critical arenas, including, but not limited to: employment, housing, education and mental health. The needs assessment was the result of a historic merger between FreeState Legal Project, a nonprofit providing direct legal services to LGBTQ Marylanders, and Equality Maryland, Maryland’s statewide LGBTQ civil rights organization. This merger created FreeState Justice. As FreeState Justice moved forward to develop a mission reflecting its merged status, it recognized that this initiative would provide a democratic mechanism to garner the voices of LGBTQ community members statewide.

The needs assessment was a necessary and urgent step to understand the cultural, societal and political landscape in which LGBTQ Marylanders live. Despite significant legislative protections won thanks to powerful grassroots movements across the nation, LGBTQ populations continue to face significant and disturbing barriers in almost every facet of their lives, including public health, employment, community safety and housing. Communities of color, immigrants, transgender and gender non-conforming populations are even more affected by these barriers. The findings from the listening sessions corroborate national trends and fill gaps in available data about the experiences of LGBTQ Marylanders. This report also offers recommendations to address the focus areas identified by the research. Designed to be accessible to community members, policymakers, legislators, and activists, it is the hope that these findings are used to reduce the disparities experienced by the LGBTQ community and support ongoing advocacy work to realize lived equality for all Marylanders.



Demographics

ONLINE SURVEY DEMOGRAPHIC THEMES

FreeState Justice collected demographic information from both the online survey and listening sessions. The most robust demographic data was collected from the online survey: 16 of the 22 questions answered by 365 respondents concerned identity, income and other attributes. The online survey afforded participants the opportunity to share comprehensive information about their identity in an anonymous setting. Listening session participants filled out an anonymous seven-question demographic questionnaire. This section reflects demographic data gathered using both collection methods.

Residency

The data collected highlights the geographic diversity of its respondent sample. 96.7% of all respondents reside in Maryland. **Approximately half of the sample came from Baltimore City (46.8%) and 17.8% came from Baltimore County.** This is in keeping with the most current data from the U.S. Census, which indicates that Baltimore is the largest city in Maryland, with a population of 611,648. The online survey did yield significant participation from respondents outside of Baltimore City and County:

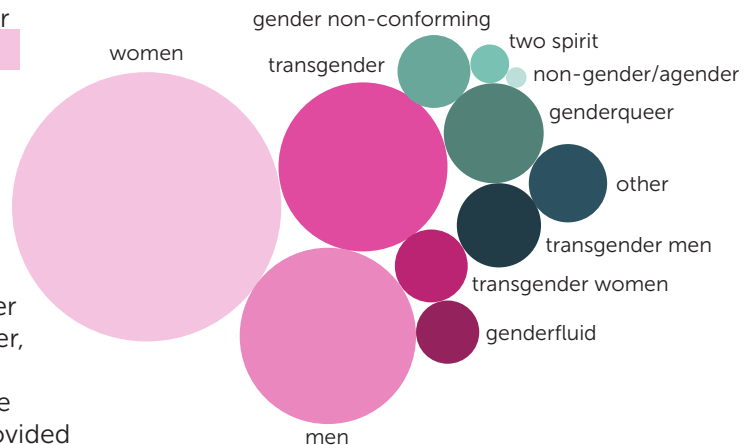
Residency	Respondents
Montgomery County	6.3%
Prince George's	4.9%
Anne Arundel	4.7%
Howard	4.7%
Harford	2.7%
Frederick	2.7%
Wicomico	2.2%
Worcester	2.2%
Carroll	1.4%

The data sample also includes representation from: Calvert 0.5%, Caroline 0.3%, Cecil 0.3%, Garrett County 0.3%, Kent County 0.3%, St. Mary's 0.3%, Talbot County 0.8%, and Washington County 0.8%.

Allegany, Charles, Dorchester and Queen Anne counties were not represented in the needs assessment. One factor that may have contributed to this is FreeState's limited organizational partnerships in these communities at the time of data collection.

Gender Identity

The data sample offered keen insight into the gender identities of respondents.⁵ Respondents could indicate more than one gender identity. At the time of data collection, 50.4% of the sample identified as women and 21.9% identified as men. **Over 20% of the sample identified as part of the transgender community,** within these self-described categories, including transgender, gender non-conforming, non-binary, and agender. All responses can be found in the appendix. 3.6% of respondents identified as transgender women, 4.9% as transgender men, 6.8% as genderqueer, 3% as genderfluid, 3.6% as gender non-conforming, 1.1% as two spirit and 0.3% as non gender/agender. The remaining 4.4% of respondents marked "other" and provided additional information about how they defined their gender.

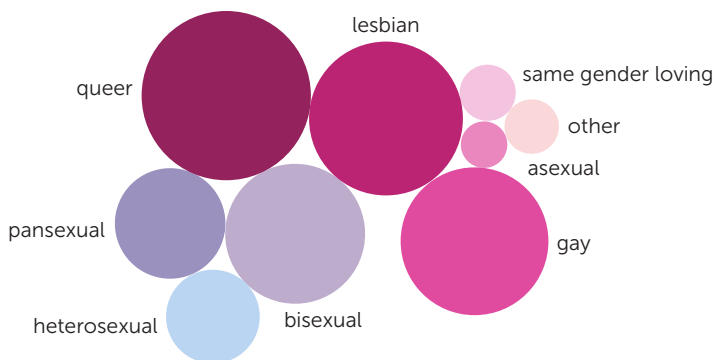


⁵To find definitions for listed gender identities, please refer to the appendix for a Glossary Guide.

Demographics: Online Survey

Sexual Orientation

As with gender identity, respondents could indicate more than one sexual orientation. Close to a quarter of respondents identified as lesbian (24.1%), and over a fifth identified as gay (22.5%). As for the rest of the sample, 29.3% identified as queer, 3.3% as same gender loving, 9% as heterosexual, 12.6% as pansexual, 2.2% as asexual and 20% as bisexual. 3% of respondents shared other identities listed in the appendix.



Ethnicity

The U.S. Census Bureau found that over 40% of Marylanders are people of color. FreeState partnered with a number of organizations to promote the survey within LGBTQ communities of color. However, only a quarter of the needs assessment sample identified as people of color. The low participation from Indigenous, Latinx and Asian populations speaks to a critical dearth of knowledge. **Any new research endeavors must intentionally work to further engage and partner with communities of color, particularly Indigenous, Latinx and Asian LGBTQ communities in Maryland.**⁶

In the sample, 14.2% of respondents identified as African American/Black, 3% as Latinx, 3% as Asian, .8% as Hispanic, and 0.3% as Native Hawaiian or Alaska Native. 72.3% identified as White or Caucasian and 4.1% identified as biracial and/or multiracial. 2.2% of the sample self-identified and shared additional information about their race and ethnicity.

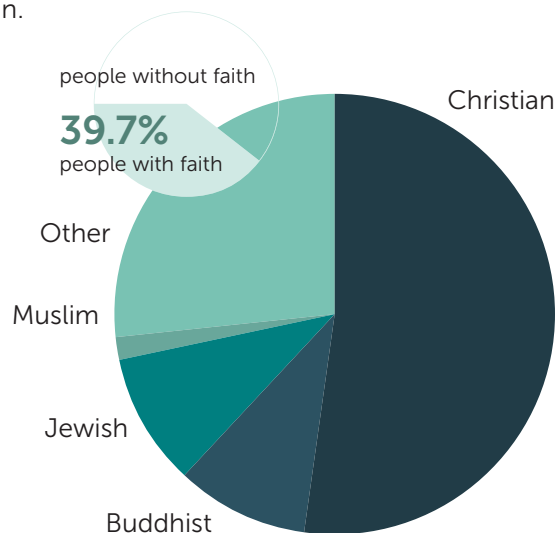
Age

Survey respondents reflected a broad range of ages. There was significant participation from respondents between the ages of 30-39 (32.6%), 22-29 (24.1%) and 40-49 (16.4%). There was also meaningful response from youth age 18-21 (4.9%) and 17 and under (4.4%), as well as from adults 50 and over: 50-59 (10.4%), 60-69 (5.5%) and 70 and over (1.6%).

Age Range	Respondents
17 & under	4.4%
18-21	4.9%
22-29	24.1%
30-39	32.6%
40-49	16.4%
50-59	10.4%
60-69	5.5%
70 & over	1.6%

Religion + Faith

39.7% of respondents identified as people of faith. 52.3% of those respondents identified as Christian, 9.7% Buddhist, 9.7% Jewish and 1.9% Muslim. Respondents also had the opportunity to share information about religious and/or spiritual practices not listed within the survey. Responses included: Heathen, Druid, Unitarian and Wiccan.



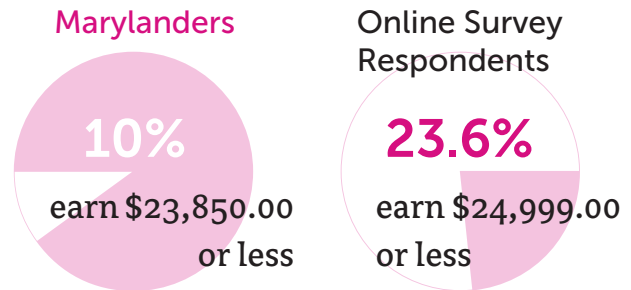
⁶ U.S. Census Bureau. "Maryland Quick Facts". (July 1, 2017). Available at: <https://www.census.gov/quickfacts/md>

Demographics: Online Survey

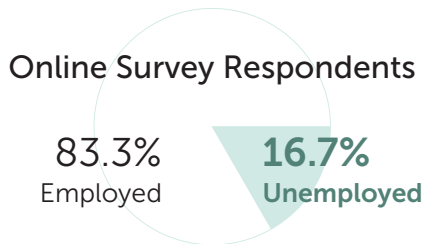
Income, Public Benefits, Housing, + Employment

The sample reflected significant economic diversity. Respondents were asked to best estimate their yearly income, including public assistance, social security, unemployment benefits, disability benefits and other sources. This expansive definition ensured that data collection captured income information from community members earning money outside of traditionally recognized sources such as the street economy.

While 10% of all Marylanders live in poverty, earning a salary of \$23,850.00 or less for a family of four,⁷ 23.6% of survey respondents reported an income of \$24,999.00 or less.



11% earned \$25,000.00-\$34,999.00, 38.4% earned \$35,000.00-74,999.00 and 18.4% earned \$75,000.00 or more. These findings indicate a strong representation from people with low and limited incomes. Of the sample, 83.3% of respondents were employed, and 16.7% reported that they were currently unemployed. 35.5% of respondents had one or more dependents. 14% received public benefits, which were defined for the purposes of this survey to include SNAP benefits and housing vouchers.



Earning	Respondents
Public Benefits	14%
\$24,999 or less	23.6%
\$25,000 - \$34,999	11%
\$35,000 - \$74,999	38.4%
\$75,000 or more	18.4%

It must be noted that while respondents indicated high levels of educational attainment in comparison to other Marylanders, this did not seem to impact income. While Maryland is the wealthiest state in the nation and the median income is \$78,945.00, there seemed to be significant income disparity among LGBTQ community members, with over 34% of respondents earning under \$35,000 annually.⁸ This is troubling, given that educational attainment is touted as a clear path to economic stability. This correlation seems to be complicated by factors such as race, gender,

⁷ Maryland Alliance for the Poor. 2016 Maryland Poverty Profiles. (2016). Retrieved <http://familyleague.org/wp-content/uploads/2016/01/Maryland-Poverty-Profiles-2016.pdf>

⁸ Leins, Casey. "The 10 Wealthiest States". (May 29, 2018). U.S. News & World Report.

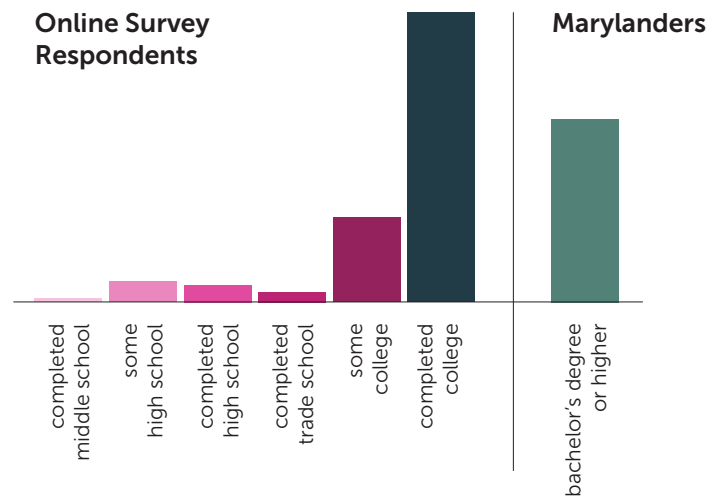
Demographics: Online Survey

sexuality and community acceptance. These findings are in keeping with national research. Sexual orientation, race and gender identity were identified as predictive factors of income within a 2016 Prudential study researching income within LGBTQ communities.⁹ While gay cisgender men report the highest levels of income within the LGBTQ community, marked income gaps exist for lesbians, bisexual individuals and transgender individuals. Amongst same sex couples, Black lesbians are most likely to live in poverty, transgender individuals are four times as likely to live in households earning below ten thousand dollars, and 29% of bisexual women are living in poverty, in comparison to 21% of their heterosexual counterparts.¹⁰ Future studies are recommended to explore the relationship between educational attainment, income, race and gender identity within LGBTQ populations.

National studies have found that LGBTQ populations are much more likely to be recipients of public benefits, experience higher rates of unemployment and experience homelessness.¹¹ In contrast to publicly available data on the significant levels of housing instability amongst LGBTQ communities, only 4.4% of respondents reported currently experiencing housing instability. This finding requires more research and may be linked to the fact that those experiencing housing instability were unable to complete the survey due to limited internet access. Future studies will need to provide alternatives beyond what FreeState offered to ensure a stronger response from unstably housed populations and other groups more likely to experience social isolation.

Education

Respondents reported high levels of educational attainment. 60.8% completed college, 17.8% indicated that they had some college education, 2.2% completed trade school, 4.4% completed some high school, 3.6% are high school graduates, and 0.8% completed middle school. These findings are in sharp contrast to the educational attainment of the state population at large. The 2017 Census found that 38.4% of Marylanders possess a bachelor's degree or higher.¹² **It is advised that future studies identify strategies to engage a more representative sample.**



⁹ Schneider, J. & Auten, D. "Prudential LGBT Survey Reveals LGBT Pay Gap". (November 30, 2017). Forbes. Retrieved <https://www.forbes.com/sites/debtfreeguys/2017/11/30/prudential-lgbt-survey-reveals-sexual-orientation-pay-gap/#73328aff1916>

¹⁰ Badgett, M. V. L., Durso, L. E., & Schneebaum, A. New patterns of poverty in the lesbian, gay, and bisexual community (2013). Retrieved <http://williamsinstitute.law.ucla.edu/wp-content/uploads/LGB-Poverty-Update-Jun-2013.pdf>

¹¹ Center for American Progress and Movement Advancement Project, Paying an Unfair Price: The Financial Penalty for Being LGBT in America. (2014), Retrieved <http://www.lgbtmap.org/file/paying-an-unfair-price-full-report.pdf>; Lourdes, A. H., McGovern, A., & Sutherland, C., eds., *Intersecting Injustice: A National Call to Action* (New York: Social Justice Sexuality Project of the Graduate Center at the City University of New York, 2018), Retrieved http://socialjusticesexuality.com/intersecting_injustice/. Brown, T.N.T., Romero, A.P., & Gates, G.J., *Food Insecurity and SNAP Participation in the LGBT Community*. (Los Angeles: The Williams Institute, 2016), available at: <https://williamsinstitute.law.ucla.edu/wp-content/uploads/Food-Insecurity-and-SNAP-Participation-in>

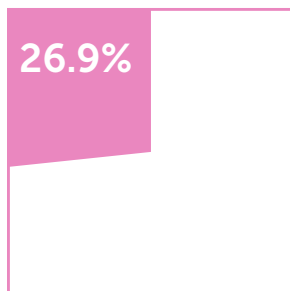
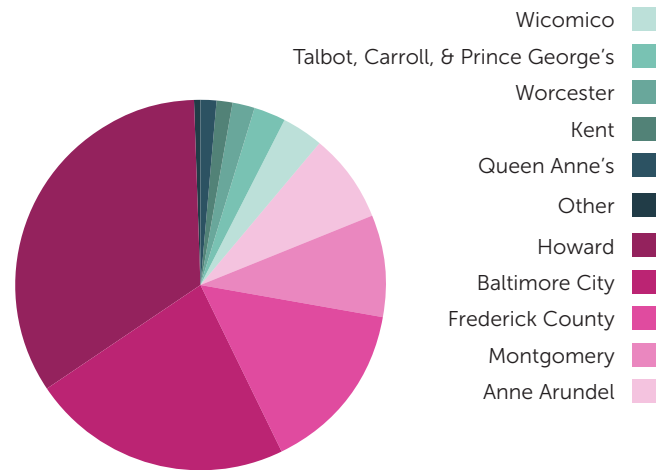
¹² Flores, A. R., Herman, J. L., Gates, G. J., & Brown, T. N. *How Many Adults Identify as Transgender in the United States?*. (2016). Williams Institute. Retrieved <https://williamsinstitute.law.ucla.edu/wp-content/uploads/How-Many-Adults-Identify-as-Transgender-in-the-United-States.pdf>

LISTENING SESSION DEMOGRAPHIC THEMES

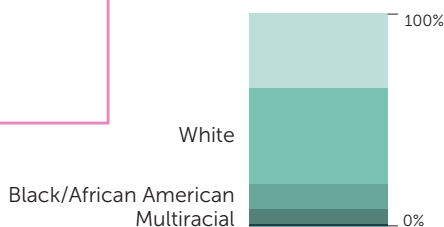
For the listening sessions, FreeState designed a brief demographic questionnaire providing participants the opportunity to self-define for all listed categories. **157 individuals participated in listening sessions, representing 13 counties.** Of this sample, 34% came from Howard County, 22.6% from Baltimore City, 15% from Frederick County, and 9% of participants are from Montgomery County. Other participants included 1.4% from Kent, 0.7% from Talbot, 1.4% from Queen Anne's, 2.1% from Worcester, 3.5% from Wicomico, 7.8% from Anne Arundel, 0.7% from Baltimore County, 0.7% from Carroll, and 0.7% from Prince George's County.

16 participants took part in the leadership roundtable and were not asked to complete the questionnaire. Therefore, **the data sample is reflective of 141 individuals who attended one of 13 listening sessions across the state.**

Current Residency

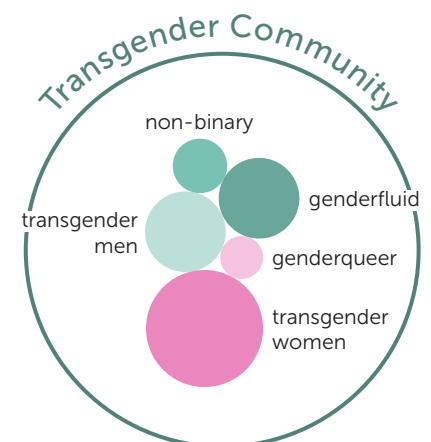


Over a quarter of respondents were 17 and under. There was also significant participation from respondents 18-21 (9.9%), 22-29 (6.4%), 30-39 (9.9%), 40-49 (14.3%), 50-59 (12%) and 60-69 (12.8%). 7.8% of the sample was 70 and over.



The sample had strong participation from people of color: 19.8% identified as Black and/or African American, 7.8% as Multiracial, 2.8% as Latinx, 0.7% as Asian and 0.7% as Hispanic. 65% of the sample identified as White. It must be noted that while over a quarter of the respondents identified as people of color, **there was significantly less participation from Latinx, Asian, and Indigenous communities.**

22.7% of the sample identified as part of the transgender community, within these self-described categories: transgender women (9%), transgender men (4.3%), genderfluid (4.3%), non-binary (2.1%) and genderqueer (1.4%). 43% of respondents self-identified as women while 29.7% identified as men, with 2.1% of the sample identifying as cisgender. Other identities included demiboy and "other."



Respondents identified across the spectrum of sexual orientations:

Orientation	heterosexual	gay	queer	lesbian	pansexual	bisexual	asexual
Respondents	23%	17%	7.8%	10.6%	12.8%	10.6%	6.3%

Focus Areas

Facilitators asked participants to identify urgent issues for the LGBTQ population, and share thoughts about what concerns were most pressing to their community. The data presented here reflects an analysis of both data samples. Survey respondents were asked to identify areas where they and/or people in their networks experienced discrimination on the basis of their LGBTQ identity. The highest ranked focus areas were:

- Street Harassment
- Healthcare
- Education
- Reliable Employment
- Domestic Violence and Sexual Assault

Street Harassment

REPORT FINDINGS

“my partner and i have had bottles thrown at us, and someone even shattered our front windshield.”

Listening Session Respondent, Salisbury

Respondents participating in listening sessions and the online survey reported multiple instances of physical assault, property damage, intimidation and verbal harassment. The severity of these assaults seemed to be most pronounced within more rural and suburban regions of Maryland, including Frederick, Wicomico and Chesapeake. **56% of online survey respondents have either been harassed themselves or know someone who has been.**

Respondents reported being the targets of physical and sexual violence (threatened or enacted),

and 27.4% of those surveyed identified street harassment as an urgent issue for the LGBTQ community. The fear of being harassed or physically harmed has had a deleterious impact on the lives of some respondents. Some participants significantly altered their daily routines to minimize the threat of harm. This was a pronounced theme for transgender and gender non-conforming respondents, particularly Black transgender women. One respondent in a listening session dedicated to Black transgender women in Baltimore City noted:

“I have to run all my errands at night, because as a trans woman, if i go out during the day, i get harassed by the police.”

Listening Session Respondent, Baltimore

Street Harassment: Report Findings

Participants in listening sessions and the online survey remarked that they experienced harassment and threats when attempting to use public accommodations. A survey respondent shared:

“using public restrooms is the worst thing on earth. If I had a dollar for every time I've been asked for my ID or had someone say ‘this is the ladies room,’ I'd be rich. Oh, and if a cop calls you sir, and you're not, just go with it. I promise, it's easier than having to explain yourself to them.”

Survey Respondent

Respondents reported that self-defense was a significant concern. Several participants reported regularly carrying self-defense aids to minimize the risk of assault. One survey participant noted:

“Especially since last spring until now I can't seem to walk out of my apartment without some man opening his useless mouth and making a comment about my very obvious butch lesbian looks.

now i carry pepper spray because some of those men have also followed me.”

Survey Respondent

Seeking Aid from Law Enforcement

Listening session participants spoke of troubling encounters with law enforcement when seeking assistance. Several participants shared accounts of requesting help from the police, only to be mocked or arrested. One respondent from Boyd remarked, “Hate crimes are able to happen because police aren't dealing with protecting of the safety of LGBTQ people.” Others spoke of being profiled by the police, with several respondents reporting multiple instances of being harassed on their own property for “sitting/walking while being trans.”

The following statement from one survey respondent highlights the critical barriers some LGBTQ Marylanders face when seeking assistance from law enforcement:

“My friends and I were leaving a bar one night and a car pulled up, about 4 guys got out of the car and started calling us names and throwing beer bottles at us. We took off running, called the police. When the police arrived, our response from the police was we should expect that to happen to us because of our lifestyle.

so yeah, really not any help from the baltimore city police.”

Survey Respondent

CONTEXTUAL DATA

The needs assessment findings align with national reports exploring the impact of street harassment within LGBTQ populations. The Center for American Progress released a 2017 report sharing the findings of a national LGBTQ survey. The report highlighted the correlation between street harassment and social isolation. A significant number of respondents reported experiencing social isolation as a direct result of street harassment: 23.9% of LGBTQ people reported avoiding social situations due to fear of discrimination, and 12% avoided public places.¹³ Another national study found that over half of the sample (57%) have heard slurs and/or offensive comments about their gender identity and/or sexual orientation.¹⁴ 51% of respondents reported being physically assaulted and sexually harassed.¹⁵

Advising LGBTQ victims of hate crimes or street harassment to call on the police for assistance can have unintended and severe consequences. This is compounded by race and gender identity. A 2016 Department of Justice report on the Baltimore Police Department (BPD) found that “the transgender community [reported] that their interactions with BPD are degrading and dehumanizing and that, as a result, transgender individuals are afraid to report crime to law enforcement.”¹⁶ The findings of the report culminated into a consent decree, whereby the BPD agreed to series of rigorous policy changes. The consent decree calls for police officers to be trained in implicit bias and strategies for interacting with LGBTQ citizens, among other areas of professional development.¹⁷ The same report found that the Baltimore Police Department has a consistent pattern of racially profiling and over-policing Black citizens. Police officers were found to stop Black citizens three times more than their White counterparts.¹⁸ These findings align with national trends. Recent studies have found that there is a historical reluctance on the part of LGBTQ people and people of color to turn to the police for help. In 2012, Lambda Legal conducted research on police interactions, and found that 13% of cisgender individuals in their sample reported being verbally assaulted by police, 2% experienced sexual assault and 3% reported physical assault by law enforcement.¹⁹ The same study also found that 36% of transgender women and 27% of TGNC people of color had been verbally assaulted during police interactions.²⁰

Access to public accommodations continues to be a significant area of discrimination. Lambda Legal discovered that 34% of LGBTQ respondents reported being harassed when attempting to use public restrooms. The risk of harassment rises for transgender and gender non-conforming populations.²¹ Indeed, 58% of respondents from the 2015 U.S. Transgender Survey reported that they had intentionally not used a public restroom to avoid the risk of harassment.²² The 2015 U.S. Transgender Survey also found that 29% of transgender Marylanders were mistreated in places of public accommodations²³ when staff assumed or knew they were transgender. This mistreatment included being denied services, harassed, or physically attacked.²⁴

¹³ Center for American Progress, “Widespread Discrimination Continues to Shape LGBT People’s Lives in Both Subtle and Significant Ways” . (2017). Retrieved <https://www.americanprogress.org/issues/lgbt/news/2017/05/02/429529/widespread-discrimination-continues-shape-lgbt-peoples-lives-subtle-significant-ways>

¹⁴National Public Radio, the Robert Wood Johnson Foundation, and The Harvard T.H. Chan School of Public Health. Discrimination in America: Experiences and Views of LGBTQ Americans .(2017).

¹⁵ Ibid

¹⁶ U.S. Department of Justice, Civil Rights Division. Investigation of the Baltimore City Police Department. (August 10, 2016).

¹⁷ Baltimore Police Department. Summary of Consent Decree. (n.d.) Retrieved https://www.baltimorepolice.org/sites/default/files/General%20Website%20PDFs/Draft_Summary_of_Consent_Decree_1-11-17.pdf

¹⁸ Ibid

¹⁹ Lambda Legal. Protected and Served?. (2012). Retrieved <https://www.lambdalegal.org/protected-and-served>

²¹ Ibid

²² Ibid

²³ The Fairness for All Marylanders Act defines public accommodations as hotels, restaurants, bars, movie theaters and other establishments offering goods and services. From: Welter, J & Thirion, K. Know Your Rights: The Fairness for All Marylanders Act. (No Date). FreeState Legal & Equality Maryland, Baltimore, MD. Retrieved <https://freestatelegal.org/wp-content/uploads/2014/10/FAMA-Know-Your-Rights.pdf>

²⁴ James, S. E., Herman, J. L., 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.



CASE VIGNETTE

FreeState represented “Vi,” a transgender woman in her mid-seventies. Vi transitioned over a decade ago, and her identification clearly indicates that she is female. However, when she applied to renew her membership at her gym, the gym manager demanded that she provide doctor’s letters attesting that she is a woman, because the manager claimed the gym had received complaints of a “man dressed as a woman” using the women’s locker room. FreeState staff counsel sent a demand letter to the gym, warning that the gym was in violation of the Fairness for All Marylanders Act of 2014, which prohibits discrimination on the basis of gender identity in places of public accommodation in Maryland. The matter was resolved when the gym agreed to adopt a policy prohibiting staff from requiring patrons to submit medical documentation of their gender on the basis of their gender identity or expression.

Healthcare

REPORT FINDINGS

36.1% of survey respondents identified healthcare as a critical issue.

For the purpose of this report, FreeState is using Fenway Health's definition of affirming healthcare: a medical practice that offers a welcoming, non-discriminatory environment for LGBTQ patients; support staff competent in working with diverse populations; and inclusive and non-discriminatory policies.²⁵ Those surveyed were deeply concerned about a wide array of medical issues, from family planning to treatment and prevention of sexually transmitted infections, including HIV/AIDS.



More than a quarter of respondents (26.7%) indicated that HIV/AIDS continues to be a significant health concern for LGBTQ Marylanders, and 12.1% identified family planning as an area of critical need.

Respondents shared the following remarks on their experiences with accessing healthcare in Maryland:

"i said i was a lesbian, the doctor responded, 'i don't know what you think you're doing here,' and was then asked to leave the office."

Listening Session Respondent, Wicomico

"People have come into the ER reporting that their doctors told them they weren't trans, they were sick in the head."

Listening Session Respondent, Boyd

²⁵ Fenway Institute, "Providing Inclusive Services and Care for LGBT People: A Guide for Medical Staff". Date not listed. Available at: <https://www.lgbthealtheducation.org/wp-content/uploads/Providing-Inclusive-Services-and-Care-For-LGBT-People.pdf>

Healthcare: Report Findings

Respondents report interacting with few, if any, LGBTQ affirming and knowledgeable medical practitioners. Listening session participants noted that even medical practitioners who wish to be supportive are often untrained and know little about how to create supportive care environments for LGBTQ patients.

Listening session respondents also shared that healthcare services designed for LGBTQ populations were challenging spaces to navigate. Issues included: staff misgendering clients, significant lags in conducting necessary medical tests and providing incorrect information regarding medical procedures. Many respondents spoke of driving anywhere between 45 minutes to three hours to access inclusive services. This was a particularly pronounced theme in data from respondents outside of city centers. **19.5% of the sample indicated that transition-related care is one of the top five issues impacting the LGBTQ community in Maryland.** Survey respondents shared the following about troubling barriers to accessing appropriate healthcare for transgender and non-binary populations:

“We have a 14 year old trans son. LGBTQ healthcare for adolescents is challenging to find locally...

we drive one and a half hours for trans related healthcare.”

Survey Respondent

“healthcare providers routinely do not understand or even know the definitions of non-binary identities.

The providers I've worked with are friendly but completely uneducated, and offer support like ‘we'll treat you just like anybody else!’ There are times when misguided attempts to be inclusive and treat trans folks ‘like anybody else’ results in us being misgendered or excluded from services we need. There are issues that are specific to our demographic and I hope awareness and education among healthcare professionals improves.”

Survey Respondent

“There is a lack of trans friendly healthcare on Delmarva. Not even Chase Brexton in Easton provides adequate healthcare for trans people. The ‘providers’ just take vitals and write prescriptions. You have to go to the western shore (which usually means a hotel stay) in order to obtain adequate healthcare services.

there is absolutely no support for us out here.

All services are Baltimore-centric.”

Survey Respondent

Healthcare: Report Findings + Contextual Data

Listening Session respondents shared many discriminatory experiences with medical professionals, including pediatricians refusing services to the child of lesbian parents and medical professionals outing youths' gender identity and/or sexual orientation to their guardians. Respondents shared that they struggle to find medical providers who are both culturally competent and LGBTQ friendly.

A number of participants also provided stories that illuminated the challenges LGBTQ Marylanders face when attempting to access mental health services:

“i saw a counselor who told me that the only reason i thought i was trans was because i was sexually abused.”

Survey Respondent

“The therapist in my in treatment facility wouldn't let anyone call me by my preferred pronoun and said that no one was going to put up with my issues.”

Listening
Session Participant, Columbia

CONTEXTUAL DATA

National and regional research demonstrates that the LGBTQ community experiences significant health disparities, further compounded by intersecting identities such as race, age, income and documentation status. Even accessing inclusive healthcare services proves to be challenging, given significant fears about mistreatment and possible discrimination. Several reports have found that some LGBTQ individuals avoid medical settings rather than risk discrimination. The Center for American Progress found that 8% of all LGBTQ Americans—and 14% of those who have previously experienced discrimination or harassment by healthcare staff—delay or even completely avoid medical care.²⁶ The 2015 U.S. Transgender Survey reported that almost one in four transgender people avoided seeking needed healthcare in the past year.²⁷ Fear of discrimination is not the only factor respondents faced. The same survey revealed that 31% of respondents did not seek necessary medical care because they could not afford it.²⁸



**almost 1 in 4 transgender
people avoided seeking needed
healthcare in the past year²⁶**

²⁶ Center for American Progress. Widespread Discrimination Continues to Shape LGBT People's Lives in Both Subtle and Significant Ways. (2017). Retrieved <https://www.americanprogress.org/issues/lgbt/news/2017/05/02/429529/widespread-discrimination>

²⁷ James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. The Report of the 2015 U.S. Transgender Survey. Washington, DC: National Center for Transgender Equality. 2015 U.S. Transgender Survey. (2016). Washington, DC: National Center for Transgender Equality.

²⁸ Ibid

Healthcare: Contextual Data

The Center for American Progress reported that LGBTQ populations experience severe and ongoing discrimination when accessing medical care.²⁹ 29% of transgender respondents reported that a doctor denied them care due to their perceived or real gender identity, and 8% of cisgender respondents were denied care because of their sexual orientation.³⁰ Others have reported troubling acts of verbal and sexual violence in medical settings: 29% of transgender respondents and 8% of cisgender respondents experienced unwanted physical contact, including sexual assault, fondling or rape.³¹

Given these troubling patterns, it is not surprising that LGBTQ populations report significant health disparities. LGBTQ youth are two to three times more likely to attempt suicide.³²

These disparities are compounded by gender identity. A 2017 study conducted by the American Academy of Pediatrics reported that 41.8% of non-binary youth will attempt suicide by 18, while 29.2% of transgender girls and over half of transgender boys reported suicide attempts.³³ LGBTQ individuals are much less likely to access wellness and cancer prevention services.³⁴ Transgender and gender non-conforming communities are less likely to have health insurance coverage than their cisgender counterparts, and are at higher risk of attempting and/or completing suicide.^{35 36} HIV/AIDS continues to be a major public health concern, deeply impacting Black LGBTQ populations. A 2015 AmFar report found that African American gay men and transgender women are much more likely to contract HIV/AIDS. Black gay men made up 53% of all new HIV cases in the United States, and 1 in 3 Black gay men are living with HIV today.³⁷ It is estimated that Black transgender women are three times more likely to be living with HIV than their White and Latinx counterparts.³⁸

Studies have also found that LGBTQ populations are much more vulnerable to an array of risk factors that can lead to poorer health outcomes.³⁹ These factors include social and economic isolation and higher burdens of mental distress. Studies have found that LGBTQ populations are twice as likely to smoke cigarettes, and have higher rates of unhealthy weight control, substance abuse and violence victimization.⁴⁰

²⁹ Center for American Progress, "Widespread Discrimination Continues to Shape LGBT People's Lives in Both Subtle and Significant Ways" (2017). Retrieved <https://www.americanprogress.org/issues/lgbt/news/2017/05/02/429529/widespread-discrimination-continues-shape-lgbt-peoples-lives-subtle-significant-ways/>

³⁰ Ibid

³¹ Ibid

³² Garofalo, R., Wolf, R.C., Wissow, L.S., et al. Sexual orientation and risk of suicide attempts among a representative sample of youth. *Arch Pediatric Adolescent Med.* 1999;153(5):487-93.

³³ Toomey, R.B., Syvertsen, A.K., Shramko, M. Transgender Adolescent Suicide Behavior. *Pediatrics.* 2018; 142 (4).

³⁴ Dilley JA, Simmons KW, Boysun MJ, et al. Demonstrating the importance and feasibility of including sexual orientation in public health surveys: Health disparities in the Pacific Northwest. *Am J Public Health.* 2010;100(3):460-7.

³⁵ National Gay and Lesbian Taskforce. National transgender discrimination survey: Preliminary findings. Washington, DC: National Gay and Lesbian Taskforce; 2009 Nov. Retrieved http://www.thetaskforce.org/downloads/reports/fact_sheets/transsurvey_prelim_findings.pdf [PDF - 1.17 MB]

³⁶ Dilley, J.A., Simmons, K.W., Boysun, M.J., et al. Demonstrating the importance and feasibility of including sexual orientation in public health surveys: Health disparities in the Pacific Northwest. *Am J Public Health.* 2010;100(3):460-7.

³⁷ AmFar, HIV and the Black Community: Do Black (Gay) Lives Matter?. (February 2015). Retrieved https://www.amfar.org/uploadedFiles/_amfarorg/Articles/On_The_Hill/2016/Black-Gay-Men-and-HIV.pdf

³⁸ Clark, H., Babu, A.S., Wiewel, E.W., Opoku, J. & Crepaz, N. Diagnosed HIV Infection in Transgender Adults and Adolescents: Results from the National HIV Surveillance System, 2009-2014. 2017;21(9):2774-2783.

³⁹ Fenway Health. Understanding the Health Needs of LGBT People, (March 2015). Retrieved <https://www.lgbthealtheducation.org/wp-content/uploads/LGBTHealthDisparitiesMar2016.pdf>

⁴⁰ Ibid

Healthcare: Contextual Data

A 2015 federal survey on drug use found that lesbian, gay and bisexual adults were twice as likely as their heterosexual counterparts to abuse illicit substances.⁴¹ LGBTQ adults were also more likely to engage in binge drinking, initiate alcohol intake at a younger age, and report higher rates of substance use disorders.^{42 43}

Age and gender identity appeared to increase the risk of substance abuse. A 2017 statewide study exploring substance abuse in transgender high school students reported that TGNC students were 2.5 to 4 times more likely than their cisgender peers to engage in substance use.⁴⁴ The Youth Risk Behavior Survey in Maryland has found that lesbian, gay and bisexual (LGB) high school students were more likely to engage in substance abuse than their heterosexual counterparts.⁴⁵ The survey found that LGB youth were five times as likely as their heterosexual counterparts to use heroin and/or inject an illegal drug.⁴⁶ In addition, LGB youth were more likely to engage in binge drinking (5 or more drinks of alcohols), and reported higher rates of alcohol intake before the age of thirteen.⁴⁷

Researchers attribute higher rates of substance abuse within LGBTQ communities to several environmental factors, such as heightened levels of discrimination, and lower rates of familial and community acceptance.⁴⁸ LGBTQ individuals are more likely to be raised in unaccepting environments, and experience identity based discrimination. Studies have determined that these factors exacerbate the risk of depression and other mental health disorders amongst LGBTQ populations. Researchers have coined the phrase “minority stress” to describe how chronic stigma and stress impact vulnerable communities.⁴⁹ These hostile environments lead to higher likelihood of substance use to manage the chronic stress of discrimination.⁵⁰

⁴¹ Medley, G., Lipari R., Bose, J., Cribb, D., Krout, I. L., & McHenry, G. Sexual Orientation and Estimates of Adult Substance Use and Mental Health: Results from the 2015 National Survey on Drug Use and Health. (October 2016). NSDUH Data Review. <https://www.samhsa.gov/data/sites/default/files/NSDUH-SexualOrientation-2015/NSDUH-SexualOrientation-2015/NSDUH-SexualOrientation-2015.htm>.

⁴² Ward, B.W., Dahlhamer, J.M., Galinsky, A.M., & Joestl, S.S. Sexual Orientation and Health Among U.S. Adults: National Health Interview Survey, 2013. (2014). Hyattsville, Md.: National Center for Health Statistics. Retrieved <https://www.cdc.gov/nchs/data/nhsr/nhsr077.pdf>.

⁴³ McCabe, S.E., West, B.T., Hughes, T.L., & Boyd, C.J. Sexual orientation and substance abuse treatment utilization in the United States: results from a national survey. *J Subst Abuse Treat.* 2013;44(1):4-12. doi:10.1016/j.jsat.2012.01.007.

⁴⁴ Day, J.K., Fish, J.N., Perez-Brumer, A., Hatzenbuehler, M.L., & Russell, S.T. Transgender Youth Substance Use Disparities: Results From a Population-Based Sample. *J Adolesc Health.* 2017 Dec;61(6):729-735. doi: 10.1016/j.jadohealth.2017.06.024. Epub 2017 Sep 21.

⁴⁵⁻⁴⁷ Center for Disease Control. High School Youth Risk Behavior Survey: Maryland 2017 Results. Retrieved <https://nccd.cdc.gov/youthonline/app/Results.aspx?LID=MD>

⁴⁸ Redding, B. LGBT Substance Use — Beyond Statistics. (n.d.). *Social Work Today.* Vol. 14 No. 4 P. 8

^{49 & 50} Meyer, I.H. Prejudice, Social Stress, and Mental Health in Lesbian, Gay, and Bisexual Populations: Conceptual Issues and Research Evidence. *Psychol Bull.* 2003 Sep; 129(5): 674–697.



CASE VIGNETTE

Every day throughout the state transgender people living in incarceration encounter countless barriers to medically necessary care. Women undergoing hormone therapy upon entry have been freeze framed out of treatment or have their treatment regimens altered for no legitimate reason.

Prison officials ignore requests by transgender people and recommendations by outside healthcare professionals to begin hormone therapy and access other care. These cruel decisions to deny care continue even in the face of attempted suicide and other self-harm.

Too often, a facility's response to requests for safe and appropriate housing is to place a transgender person in isolation, a practice that has devastating effects on mental health and is considered torture by many, including the United Nations. Transgender youth in detention have to fight for basic hygiene and are generally assigned housing based on birth sex, a practice that places many in extremely dangerous situations. FreeState has had some success in its advocacy here: fighting alongside Sandy Brown to secure a remedy under the Prison Rape Elimination Act for the extended solitary confinement and other torture she endured, working with the public defender to obtain release for detainees who are transgender on bail review, and helping to secure gender appropriate housing for a transgender girl in delinquency proceedings. But there is much work still to be done. LGBTQ advocacy must center the experiences of community members forced to endure the horrors of incarceration.

Education

REPORT FINDINGS

“the guys at my middle school, they don't like it so much that this girl is a lesbian, 'cause she is so pretty. so they do corrective flirting.”

Listening Session Respondent, Frederick, 14 years old

47%

of survey respondents either have experienced discrimination in school personally or know someone who has because of their gender identity and/or sexual orientation.

24.1%

Close to a quarter of all survey respondents indicated that the need for safer schools is an issue that deeply impacts LGBTQ Marylanders.

Listening session participants corroborated these findings, sharing a number of concerns around intentional deadnaming and misgendering. Students who are perceived to be LGBTQ reported being threatened with sexual and/or physical violence as a corrective action. Guardians and students shared that going to administrators for aid yielded varying levels results.

“[When I talked about my safety concerns for my child] the principal told me just to move to a more metropolitan area.

I should... trust... that my child will have the same opportunities and not be discriminated against.”

Listening Session Respondent, Salisbury

“my daughter has been harassed at a Baltimore city public school for having two moms and the school did not have a good immediate response.”

Survey Respondent

Education: Report Findings

*“I have a 9 year old son who is gender non-conforming and his daycare and school experiences have been horrible. We have had daycare workers tell me **i was making my son gay for allowing him to play with dolls***

This has caused my son a lot of unnecessary anxiety. He is currently extremely closeted and is seeing a counselor to help him cope with social anxiety and low self-esteem, of which I feel is the direct result of the treatment he has received in the school system (and all the other microaggressions we experience regularly).”

Survey Respondent

Listening session participants reported that administrators would sometimes refuse to get LGBTQ inclusive training to build safer schools. When discussing safer schools, participants almost universally referenced GLSEN as a critical resource for schools. GLSEN is a national education organization dedicated to building safer schools for LGBTQ youth. Their work includes supporting Gender and Sexuality Alliances (GSAs) in schools, student groups for LGBTQ youth and allies.⁵¹ Listening session participants reported that GSAs are often not well supported by schools, despite a strong array of research indicating the critical role GSAs play in reducing bullying.⁵² Other participants stated that student materials from GLSEN are not allowed in their school buildings. Counselors are often cited as a resource for LGBTQ students, but respondents reported receiving little to no support from their counselors. In some cases, students risked being outed by counselors to family or other staff. Many LGBTQ youth may risk losing their homes, familial relationships, or even jeopardize their personal safety by disclosing their sexual orientation and/or gender identity.⁵³ As such, it is critical that coming out be a personal choice that is protected by teachers, support staff and other trusted adults. Some students reported fear of utilizing school bathrooms or locker rooms for fear of being assaulted. A number of respondents shared that they would often wait until they went home to use the bathroom. One participant in a Frederick listening session remarked:

*“Whenever I have to go to the [boys] bathroom, I get a guy friend to escort me, because none of the doors have locks and **i don't feel safe.**”*

Listening Session Participant, Frederick

Listening session respondents also shared that there was little access to inclusive sex education in their schools. Several participants shared that teachers refused to talk about LGBTQ issues for fear of offending parents or administrators. A number of students shared that their sex education curriculum focused on solely on abstinence or made no mention of LGBTQ populations when discussing safer sex and/or healthy relationships.

⁵¹ Gender and Sexuality Alliances are a core initiative of GLSEN, a national education advocacy organization dedicated to improving the lives of LGBTQ Students. For more information visit www.glsen.org

⁵² Bochenek, M. & Brown, A. W. Hatred in the hallways: Violence and discrimination against lesbian, gay, bisexual, and transgender students in U.S. schools. (2001). New York: Human Rights Watch. Harris Interactive & GLSEN. From teasing to torment: School climate in America, a survey of teachers and students. (2005). New York: Gay, Lesbian and Straight Education Network. Children and Schools, 25, 225-239.

⁵³ Russell, S.T. & Fish, J.N. Mental Health in Lesbian, Gay, Bisexual, and Transgender (LGBT) Youth. Annu Rev Clin Psychol. 2016 Mar 28; 12: 465–487.

CONTEXTUAL DATA

National and statewide studies have determined that LGBTQ students experience a number of challenges in the classroom. The vast majority of Maryland LGBTQ students have heard anti-gay comments in their school, and 65% reported being mistreated at school.⁵⁴ The 2017 Youth Risk Behavior Survey (YRBS) found that 11.2% of all Maryland high school students identify as lesbian, gay or bisexual.^{55 56} There is little available information on the number of TGNC identified students in Maryland, however the National Center for Transgender Equality conducts a nationwide TGNC census, which offers state specific data on the experiences of Maryland respondents. 78% of transgender students report experiencing some form of discrimination in schools.⁵⁷ This includes physical violence (28%) and sexual assault (14%).⁵⁸ Indeed, for 23% of transgender respondents to the U.S. Transgender Survey, the discrimination was so intense, they were forced to leave school.⁵⁹ Multiple studies have found that LGBTQ students feel unsafe in their school community. The YRBS found that 13.8% of LGB youth carried a weapon to school as a means of self protection (compared to 5.4% of heterosexual students).⁶⁰ In addition, 14.2% of LGB youth reported being threatened with a weapon on school property, in comparison to 5.7% of heterosexual students.⁶¹ Indeed, LGB students were much more likely than their heterosexual counterparts to experience higher rates of rape (18.4% to 6.8%) and seriously consider attempting suicide (42.9% to 12.8%).⁶²

The GLSEN 2015 Maryland State Snapshot found that there is a growing number of LGBTQ youth in schools working to build safer learning environments.⁶³ 76% of Maryland LGBTQ students attended a school with a GSA, and 26% indicated that the school offered an inclusive and affirming curriculum.⁶⁴ While this is heartening news, the numbers demonstrate that LGBTQ students are in clear need of more support and advocacy.

⁵⁴ GLSEN. 2015 State Snapshot: School Climate in Maryland. (n.d.) Retrieved <https://www.glsen.org/sites/default/files/Maryland%20State%20Snapshot%20-%20NSCS.pdf>

⁵⁵ Center for Disease Control and Prevention. High School Youth Risk Behavior Survey: Maryland. (2017). Retrieved <https://nccd.cdc.gov/youthonline/app/Results.aspx?LID=MD>

⁵⁶ The Youth Risk Behavior Survey does not collect data pertaining to gender identity or presentation.

⁵⁷ James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. The Report of the 2015 U.S. Transgender Survey. (2016). Washington, DC: National Center for Transgender Equality.

⁵⁸ Ibid

⁵⁹ Ibid

⁶⁰ Center for Disease Control and Prevention. High School Youth Risk Behavior Survey: Maryland. (2017). Retrieved Available at: <https://nccd.cdc.gov/youthonline/app/Results.aspx?LID=MD>

⁶¹ Ibid

⁶² Ibid

⁶³ GLSEN. 2015 State Snapshot: School Climate in Maryland. Retrieved <https://www.glsen.org/sites/default/files/Maryland%20State%20Snapshot%20-%20NSCS.pdf>

⁶⁴ Ibid



CASE VIGNETTE

When Max Brennan was in the eighth grade, his school district denied him access to the boys' restrooms and locker rooms simply because he was transgender. Instead, they designated three single-occupancy restrooms in his school as "gender neutral." The school required Max to use these far away restrooms for changing clothes for physical education class and other athletic activities, as well as for toilet usage. This humiliated and embarrassed Max. It also alienated him from fellow students; he received "weird looks" from other kids when he used the single-occupancy restrooms. He was also sometimes penalized for being late to class or for not being able to change his clothes for P.E. Max, represented by FreeState, eventually filed a federal civil rights suit against the school district. In March 2018, Judge George L. Russell III, denied the defendants' motion to dismiss the case. He ruled that, under Title IX of the Education Act of 1972 (the federal statute barring sex discrimination in education) as well as federal and state constitutional protections, students who are transgender cannot be barred from sex-segregated school restrooms and locker rooms that align with their gender identity. The decision was the first of its kind in Maryland, and one of the first anywhere to hold that a school district could not exclude a student who is transgender from its locker rooms. The case eventually settled, with the school district allowing Max permanent access to male restrooms and locker rooms.

Max's case has already made an impact for other students who are transgender. In June 2018 in *Grimm v. Gloucester County School Board*, the United States District Court for the Eastern District of Virginia found Judge Russell's opinion persuasive in ruling that Gavin Grimm had similarly stated claims for relief under Title IX and the Equal Protection clause of the Fourteenth Amendment against his school district for being denied access to the boys' restroom.

Reliable Employment

REPORT FINDINGS

“At my job, I am not allowed to talk to any patients about me being trans, and if asked directly about it I am not to answer them. this policy of erasure was made by the president of HR, not my site.”

Survey Respondent

“I am being discriminated against at my work, violating my FMLA rights, failure to promote and one of my managers has threatened to fire me for unjust reasons.”

Survey Respondent

45.4%

Nearly half of online survey respondents indicated that **they or someone they know has experienced employment discrimination.**

16.7% of those surveyed were unemployed, which is more than triple the state unemployment rate of 4.3%.⁶⁵ 10.4% of respondents earned \$10,000.00 or less annually, which is under the federal poverty guidelines of \$12,140.00 for a household of one.⁶⁶

Listening Session participants shared significant concerns about employment. Respondents discussed the difficulty of tracking the experience of LGBTQ employees in Maryland. Few knew what their rights were and how to advocate for themselves in discriminatory environments. Several individuals shared that they had been formally reprimanded and/or terminated because of their sexual orientation, gender expression and/or gender identity. Two respondents shared specifically about being a transgender employee in a hostile work environment:

“I had to sue a former employer for discrimination. I'm constantly in situations where I'm being pushed out. It's easier to work online or do phone work. I have a fear of being 'found out.' this is why i have an anger problem.”

Listening Session Participant,
Montgomery County

⁶⁵ Bureau of Labor Statistics. The Employment Situation. (September 7, 2018). Retrieved <https://www.bls.gov/news.release/empsit.toc.htm>

⁶⁶ U.S. Department of Health and Human Services. 2018 HHS Poverty Guidelines. (n.d.) Retrieved <https://aspe.hhs.gov/prior-hhs-poverty-guidelines-and-federal-register-references>

Reliable Employment: Report Findings + Contextual Data

*“I was force outed at several jobs as trans and had to leave and it would not count as unemployment. It took me five months where I could not be employed to legally change my documents so this would not be an issue, and **the process was extremely traumatic.**”*

Survey Respondent

Others reported that employers refused to hire trans and gender non-conforming people. In one listening session, employment was designated as a “third priority,” meaning that transgender communities were more focused on survival (housing and food) than employment. Participants expressed a lack of knowledge about what legal rights they had and how to pursue legal recourse when necessary. A number of participants remarked that even those employed in jobs where they were “safe” often felt vulnerable and knew that their employment stability was dependent upon affirming employers and supervisors. Participants often spoke of avoiding workplace discrimination by working in the shadow economy.⁶⁷

CONTEXTUAL DATA

Other studies corroborate the findings of FreeState’s need assessment. **One in four LGBTQ employees have experienced workplace discrimination in the past five years.**⁶⁸ Almost two thirds of LGBTQ employees have heard gay or lesbian jokes at work, and 40% heard jokes about transgender people.⁶⁹ People of color and transgender employees tend to be the most vulnerable to discrimination in the workplace: 27% of transgender individuals reported being not hired or being fired in 2015 due to their actual or perceived gender identity, and LGBTQ people of color were more likely to be vulnerable to workplace discrimination than their White counterparts.⁷⁰ LGBTQ communities also reported concealing information about their sexual orientation, gender identity, and other attributes from their resumes to further increase the likelihood of securing employment.⁷¹ People of color and people with disabilities were most likely to change their resumes.⁷² LGBTQ workers reported feeling pressured to conceal parts of their identity to avoid hostility and adverse reactions from colleagues and supervisors.⁷³ This is unsurprising, given that 70% of heterosexual employees believe it is inappropriate to discuss gender identity or sexual orientation in the workplace.⁷⁴

⁶⁷ The International Monetary Fund defines the shadow economy as labor done in exchange for cash or goods which takes place “off the books” and is therefore untaxed. From: Schneider, F. & Enste, D., “Hiding in the Shadows”, (March 2002). International Monetary Fund.

⁶⁸ Sears, B. & Mallory, C., “Documented Evidence of Employment Discrimination & Its Effects on LGBT People”, (July 2011). Los Angeles: Williams Institute. Retrieved <https://williamsinstitute.law.ucla.edu/wp-content/uploads/Sears-Mallory-Discrimination-July-20111.pdf>

⁶⁹ Fidas, D., Cooper, L., & Raspanti, J. The Cost of the Closet and the Rewards of Inclusion: Why the Workplace Environment for LGBT People Matters to Employees. (2014). Human Rights Campaign

⁷⁰ Ibid

⁷¹ Ibid

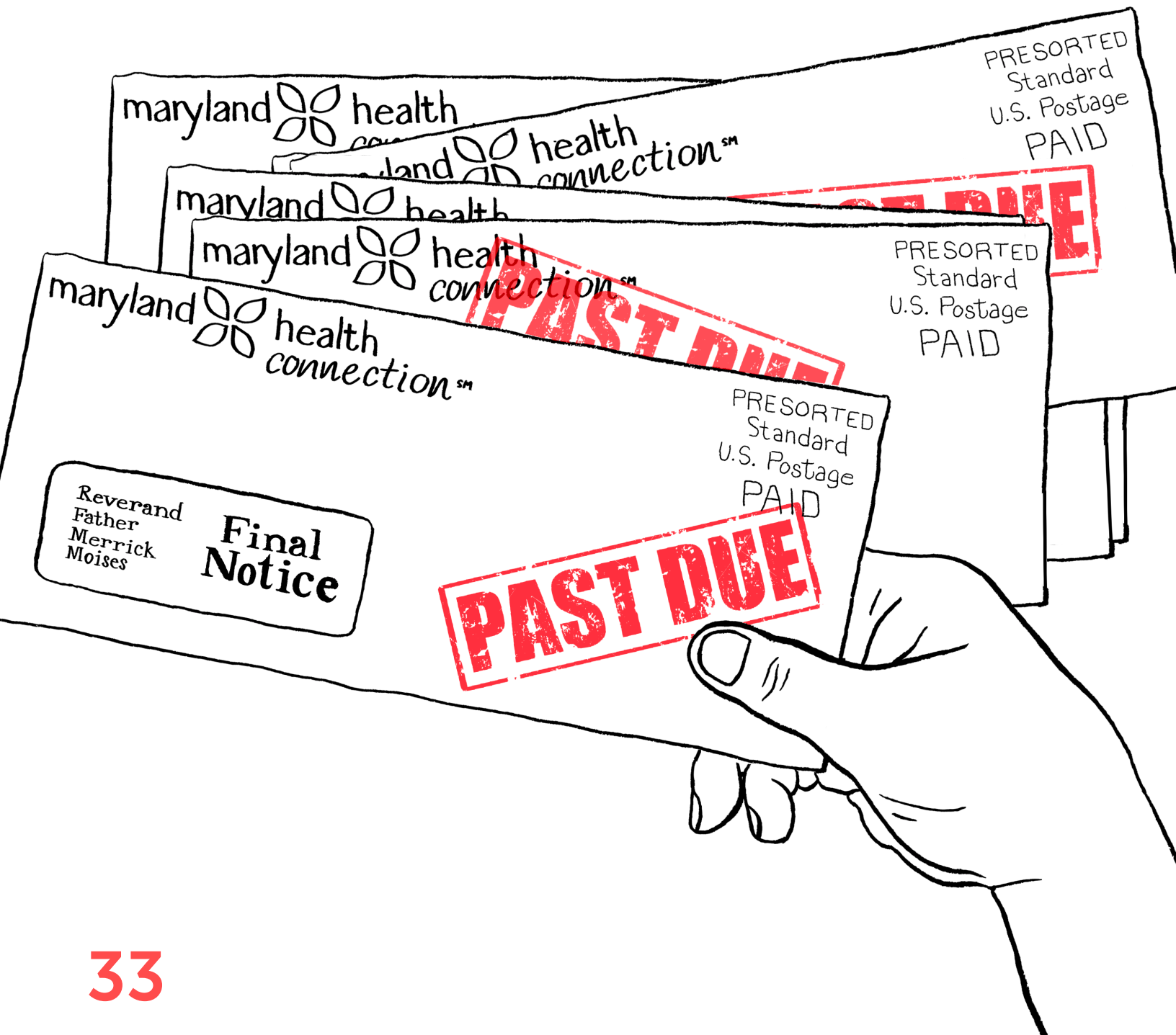
⁷² National Public Radio, the Robert Wood Johnson Foundation, and The Harvard T.H.Chan School of Public Health, Discrimination in America: Experiences and Views of LGBTQ Americans (2017).

⁷³ Singh, S. & Durso, L.E., Widespread Discrimination Continues to Shape LGBT People’s Lives in Both Subtle and Significant Ways. (May 2, 2017). Center for American Progress

⁷⁴ Ibid

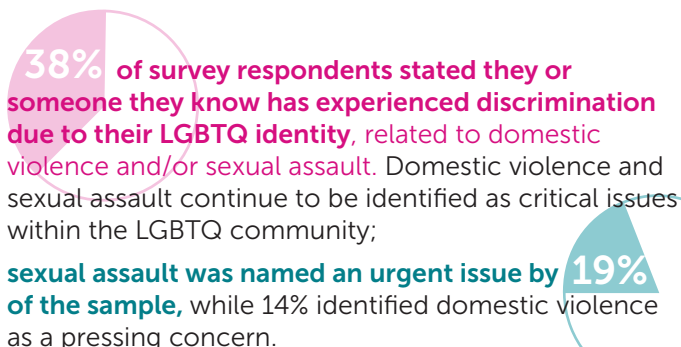
CASE VIGNETTE

In spring of 2018 the Reverend Father Merrick Moises, the Citywide LGBTQ Community Liaison for the Baltimore City State's Attorney's Office, was denied medically necessary transition-related healthcare by Baltimore City because the City's health insurance plan excluded gender affirming surgery from coverage. Though FreeState Justice has previously been successful in working with the state of Maryland to remove discriminatory transgender care exclusions in Maryland Medicaid, ACA Plans, and plans for Maryland state employees, the state's policy does not cover self-funded employee benefits plans like Merrick's. FreeState brought the issue to the city's attention, and the city eventually voted to update its employee benefits plan to provide health care coverage to include gender affirming surgery. Although the Equal Employment Opportunity Commission has found that transgender care exclusions in employee health benefits are a form of employment discrimination, an untold number of private employee benefits plans throughout Maryland continue to contain these exclusions. This can cause shock and trauma to transgender employees when they are denied medically necessary care.



Domestic Violence and Sexual Assault

REPORT FINDINGS



38% of survey respondents stated they or someone they know has experienced discrimination due to their LGBTQ identity, related to domestic violence and/or sexual assault. Domestic violence and sexual assault continue to be identified as critical issues within the LGBTQ community;

19% of the sample, while 14% identified domestic violence as a pressing concern.

Participants in both the survey and listening sessions discussed a number of concerns about the treatment of LGBTQ survivors within medical and law enforcement settings. One individual shared a troubling story that highlights the discrimination LGBTQ survivors face when interacting with medical professionals and investigators:

“Soon after I came out, I was date raped. When I tried to press charges, the nurse at Mercy hospital as well as the cop and the detective mocked me and told me that i was lying and that women dont rape women. They didn't take my case seriously and so the woman who raped me is most likely still walking around Baltimore. More recently, just 2 years ago, I had a very serious partner who I moved in with. 1 month after moving in with her, she assaulted me. When I called the cops, again they mocked me and they treated me like a criminal for fighting back and made me apologize to her for fighting her off me. They also left my words off of the police report.”

Survey Respondent

Listening session participants discussed the dearth of LGBTQ affirming support services and/or shelters for survivors, and also underscored the reality that there was not enough information about healthy relationships, intimate partner violence and/or consent taught in schools. Sexual violence was marked as a significant concern for respondents who had experienced unstable housing. **Several listening session participants reported higher rates of sexual violence in shelters, particularly the code blue shelters that open to provide respite when the temperature is below freezing.** Former residents of code blue shelters noted that maintenance staff had sexually harassed clients, especially targeting transgender women. LGBTQ residents reported feeling forced to provide sex to other clients to avoid getting into altercations that could lead to them being dismissed from the shelter. Indeed, in one listening session, former shelter residents shared that even if they did report instances of sexual violence, staff and police officers either mocked the individual or did nothing.

CONTEXTUAL DATA

For transgender survivors of domestic and sexual violence, safety cannot be found in shelters. The National Center for Transgender Equality found that 70% of all transgender individuals living in shelters reported experiencing sexual and physical violence and other forms of harassment.⁷⁵ Given the high rates of violence transgender and non-binary survivors experience when seeking public services such as therapy, case management, and shelter, it comes as no surprise that TGNC survivors report feeling that they have few systems of support to cope with sexual and domestic violence. Studies have found that Black women and transgender individuals are at a higher risk of experiencing criminalization and violence by police upon reporting domestic violence and sexual assault.⁷⁶ The National Coalition of Anti-Violence Projects conducted a survey which found that 85% of victim advocates worked with LGBTQ survivors who were denied supportive services due to their sexual orientation and/or gender identity.⁷⁷

LGBTQ populations are disproportionately more likely to experience sexual and/or domestic violence in their lifetimes.⁷⁸ 47% of the transgender population has reported being sexually or physically assaulted, while 1 in 8 lesbian women and close to half (46%) of bisexual women will be sexually assaulted, stalked, and/or physically attacked in their lifetime.^{79,80} The Center for Disease Control found that 26% of gay men and 37% of bisexual men reported being sexually assaulted.⁸¹

LGBTQ people of color were found to be more vulnerable to sexual violence. The 2015 U.S. Transgender Survey found that Native and Indigenous transgender communities were most likely to experience sexual assault (65%), followed by Multiracial (59%), Middle Eastern (58%), and Black (53%).⁸² The National Coalition of Anti Violence Projects found that LGBTQ communities of color were also more vulnerable to domestic violence.⁸³ Other reports have found that LGBTQ survivors of color experience higher rates of employment discrimination and housing instability. This can make survivors more dependent on abusive partners who may provide housing, income, and other necessities.⁸⁴

⁷⁵ James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. The Report of the 2015 U.S. Transgender Survey. (2016). Washington, DC: National Center for Transgender Equality.

⁷⁶ deVuono-Powell, S., et al. Who Pays? The True Cost of Incarceration on Families," Ella Baker Center, Forward Together, & Research Action Design. (September 2015). Retrieved <http://ellabakercenter.org/sites/default/files/downloads/who-pays.pdf>.

⁷⁷ Waters, E. Lesbian, Gay, Bisexual, Transgender, Queer, and HIV-Affected Intimate Partner Violence in 2015. (2016). New York, NY: National Coalition of Anti-Violence Programs (NCAVP).

⁷⁸ Ibid

⁷⁹ James, S. E., Herman, J. L., 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.

⁸⁰ Center for Disease Control NISVS: An Overview of 2010 Findings on Victimization by Sexual Orientation. (2010). Retrieved https://www.cdc.gov/violenceprevention/pdf/cdc_nisvs_victimization_final-a.pdf

⁸¹ Ibid

⁸² James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. The Report of the 2015 U.S. Transgender Survey.(2016). Washington, DC: National Center for Transgender Equality.

⁸³ National Coalition Of Anti-Violence Programs. Hate Violence Against the Lesbian, Gay, Bisexual, Transgender, Queer AND HIV-Affected Communities In The United States In 2015. (2016). Retrieved <http://www.avp.org/publications.htm> (click "NCAVP releases National Report on anti-LGBTQ Hate Violence in 2015")

⁸⁴ Durso, L.E., & Gates, G.J. Serving Our Youth: Findings from a National Survey of Service Providers Working with Lesbian, Gay, Bisexual, and Transgender Youth who are Homeless or At Risk of Becoming Homeless. (2012). Los Angeles: The Williams Institute with True Colors Fund and The Palette Fund.

CASE VIGNETTE

FreeState Justice represented "Kimberly," who is the biological mother of three-year-old "Jo." Kimberly and "Grace," her (now deceased) same-sex partner, conceived Jo via artificial insemination. Kimberly came to FreeState in crisis. Jo's alleged biological father had kidnapped Jo and refused to return the baby. Even though the alleged biological father was not on Jo's birth certificate, the police originally refused to intervene; FreeState had to officially seek a statement of charges from the District Court Commissioners. When FreeState originally accompanied Kimberly to the Commissioner's office and explained that Jo was the child of Kimberly and Grace, the Commissioner on duty refused to issue a statement of charges for kidnapping. Only after FreeState was able to connect with a supervising officer at the Commissioner's office were charges eventually issued. Kimberly was eventually reunited with Jo after almost a month apart.



Conclusions

What becomes evident in these findings is a pronounced and urgent demand for accountability, recognition and dignity. So many of the respondents spoke about the need for rights that would help promote their safety and the safety of their loved ones. At the heart of FreeState's work is a deep commitment to protecting and expanding the rights of LGBTQ Marylanders. This work has become even more necessary in recent years, given the sustained backlash against recent advancements by the LGBTQ civil rights movement. 2018 has been among the most violent and lethal for LGBTQ individuals: historic numbers of LGBTQ individuals have been victimized by hate crimes. The Trans Murder Monitoring Project recorded the murders of 369 TGNC people across the globe in the past year.⁸⁵ 28 transgender people were known to be killed in the U.S. as of September 2018, a majority of whom were transgender women of color.^{86 87} Youth continue to face real and present dangers in their homes, schools, communities, and on the street. More than 40% of homeless youth are LGBTQ, and transgender students have lost significant protections due to the Department of Education's refusal to investigate any new cases regarding school bathrooms and locker rooms for TGNC youth.^{88 89}

It is incumbent upon advocates and organizers to realize comprehensive policy change centering the most vulnerable populations within the LGBTQ community. It is not by mistake that many of the pressing issues facing LGBTQ populations today intersect with the challenges faced by people of color, immigrants and other oppressed communities. Respondents recognized these intersections, and called them in. More than half of survey participants (51.9%) stated that it is necessary for LGBTQ movements to actively work towards racial justice, and close to a third (32.3%) identified criminal justice reform as a necessary facet of any future organizing and advocacy.

BUILDING SOLUTIONS

Listening session and survey respondents were generous. They shared not only their stories, but also their perspectives of what future movement building should look like to address ongoing disparities confronted by LGBTQ Marylanders. Participants deeply engaged and struggled with the question of how to eliminate barriers and promote the well-being of LGBTQ communities. Several movement building strategies emerged from the listening sessions:

⁸⁵ Trans Murder Monitoring. Trans Day of Remembrance (TDoR) 2018 Press Release. (2018). Retrieved <https://transrespect.org/en/tmm-update-trans-day-of-remembrance-2018/>

⁸⁶ National Coalition Of Anti-Violence Programs. Hate Violence Against the Lesbian, Gay, Bisexual, Transgender, Queer AND HIV-Affected Communities In The United States In 2015 . (2016). Retrieved <http://www.avp.org/publications.htm> (click "NCAVP releases National Report on anti-LGBTQ Hate Violence in 2015")

⁸⁷ National Coalition of Anti-Violence Programs (NCAVP). A Crisis of Hate: A Mid Year Report on Homicides Against Lesbian, Gay, Bisexual and Transgender People: Emily Waters, Sue Yacka-Bible (2017).

⁸⁸ Durso, L.E., & Gates, G.J. (2012). Serving Our Youth: Findings from a National Survey of Service Providers Working with Lesbian, Gay, Bisexual, and Transgender Youth who are Homeless or At Risk of Becoming Homeless. Los Angeles: The Williams Institute with True Colors Fund and The Palette Fund.

⁸⁹ GLSEN. Department of Education Turns Back on Transgender Students. (2018). Retrieved <https://www.glsen.org/article/Dept-of-Ed-Turns-Back-on-Trans-Youth>

MEDIA CAMPAIGN

Design and implement a statewide public education campaign targeted to both LGBTQ Marylanders and their cisgender heterosexual counterparts. The purpose of this campaign is threefold:

- Educate Marylanders about the diversity of the LGBTQ community.
- Encourage residents to learn LGBTQ history.
- Provide information on how to be welcoming and affirming of LGBTQ individuals.

GRASSROOTS ENGAGEMENT

Train residents across in Maryland in grassroots organizing, advocacy, and public speaking. Offer technical assistance to leaders and organizers seeking to address barriers faced by their community.

KNOW YOUR RIGHTS CAMPAIGN

Develop accessible materials such as brochures, fliers, infographics and videos to educate LGBTQ residents of their civil rights in areas such as employment, housing, education and medical care.

BLUEPRINT FOR THE FUTURE: Bridging the Gaps

Given the intersectional nature of the focus areas identified in the needs assessment, advocating for change will not only improve the lives of LGBTQ Marylanders, but for all of those seeking a better quality of life. This report is a clear community mandate to address the profound barriers experienced by LGBTQ Marylanders. FreeState will continue to advocate for the rights and needs of the LGBTQ community and for clear, concrete solutions that center the most vulnerable. This includes ongoing advocacy work to implement the strategies named in *Living in the Margins*, YEA's landmark report identifying the needs of LGBTQ youth. YEA report recommendations broadly advocated for comprehensive LGBTQ-specific anti-harassment policies with clear accountability mechanisms for youth in education, foster care, and juvenile justice.

Other solutions that can be drawn from the needs assessment data include:

1. Increased Accountability Mechanisms for Police & First Responders

Increased training and comprehensive policies offering guidance for police and first responders on respectful interactions with the LGBTQ community. These policies should include strong, transparent, and easily accessible accountability mechanisms for citizens to pursue grievances when their rights are not protected or respected by law enforcement.

2. Comprehensive Education Reform

The Maryland State Department of Education (MSDE) and its schools must institute clear, transparent and enforceable policies to build safer school environments for all youth. This includes the creation of a position at MSDE devoted to the safety of LGBTQ students and the work of school support liaisons or equity liaisons acting as LGBTQ liaisons, as well as to support the GSAs. Integration of LGBTQ subject matter across all curricula, including sex education, history, etc. Development of tools to assess the safety of LGBTQ students in schools. Create clear anti-bullying policies that promote transformative justice, rather than suspension and expulsion.⁹⁰

3. Affirming Shelters & Housing Programs

The implementation of anti-harassment policies protecting the rights of LGBTQ shelter and transitional housing residents that mandate regular and consistent training for shelter staff. The creation of LGBTQ specific emergency housing and transitional care and dedicated congregate care settings for LGBTQ youth.

4. State Support for LGBTQ Affirming Health Care

Earmarked funding to support individual and group healthcare providers dedicated to providing high quality medical care for LGBTQ clients, particularly in rural communities. This includes state policies mandating that providers receiving state monies, such as Medicare and Medicaid, and take necessary steps to provide LGBTQ affirming care.

5. Pass a Living Minimum Wage in Maryland

The current minimum wage in Maryland is \$10.10 per hour. The National Low Income Housing Coalition found that Marylanders must work 115 hours weekly to rent a two bedroom apartment.⁹¹ Data from reports on wage equity suggests that increasing the minimum wage would greatly reduce poverty within LGBTQ populations.⁹² The Prudential LGBT Survey reported that raising the minimum wage would reduce poverty rates by 25% for queer women and 30% for queer men.⁹³

These solutions are a critical part of the work. Over 500 LGBTQ Marylanders contributed their voices to this research. This chorus of voices is calling for concrete and real change. This is an opportunity for advocates, allies, and movement builders to step forward and become architects of a future where LGBTQ Marylanders can work, live, and raise families without fear of harm.

⁹⁰ Youth Equality Alliance. Living in the Margins: A Report on the Challenges of LGBTQ Youth in Maryland Education, Foster Care, and Juvenile Justice Systems. (2014). Baltimore: FreeState Legal Project

⁹¹ National Low Income Housing Coalition. Out of Reach: The High Cost of Living. (2018). Washington, D.C. Retrieved https://nlihc.org/sites/default/files/oor/OOR_2018.pdf

⁹² Badgett, M.V.L. & Schneebaum, A. "The Impact of a \$15 Minimum Wage Among Same Sex Couples" (September 2016). Los Angeles: Williams Institute. Retrieved <https://williamsinstitute.law.ucla.edu/wp-content/uploads/Poverty-and-the-15-Minimum-Wage-1.pdf>

⁹³ Schneider, J. & Auten, D. Prudential LGBT Survey Reveals LGBT Pay Gap. (November 30, 2017). Forbes. Retrieved <https://www.forbes.com/sites/debtfreeguys/2017/11/30/prudential-lgbt-survey-reveals-sexual-orientation-pay-gap/#73328aff1916>

Appendix

Glossary of Terms

These terms are from GLSEN's Professional Development Manual. For more information about GLSEN and their work, go to www.glsen.org

Asexual: A sexual orientation and/or identity of a person who does not experience sexual attraction.

Bisexual: A sexual orientation and/or identity of a person who is emotionally and sexually attracted to more than one gender.

Cisgender: Refers to a person whose gender identity and expression is aligned with their sex assigned at birth.

Coming Out: Declaring one's identity, specifically as being lesbian, gay, bisexual or transgender, whether to a person in private or a group of people. To be "in the closet" means to hide one's identity.

Gay: A sexual orientation and/or identity of a person who is emotionally and sexually attracted to some members of the same sex. Although gay can refer to both males and females,

Gender: A social construct based on a group of emotional, behavioral and cultural characteristics attached to a person's assigned biological sex. Gender can be understood to have several components, including gender orientation, gender identity, gender expression and gender role.

Gender Binary: The concept that everyone is one of two genders: male or female. The term also describes the system in which a society divides people into male and female gender roles, identities and attributes.

Gender Expression: An individual's physical characteristics, behaviors and presentation that are linked, traditionally, to either masculinity or femininity, such as: appearance, dress, mannerisms, speech patterns and social interactions.

Gender Identity: How we identify ourselves in terms of our gender.

Gender-Neutral Pronoun: A pronoun that does not associate a gender with the person being discussed. Two of the most common gender-neutral pronouns are "zie," replacing she and he, and "hir," replacing her and him.

Gender Non-Conforming or Gender Variant: An identity of a person who has gender characteristics and/or behaviors that do not conform to traditional or societal gender expectations.

Gender Orientation: An individual's internal sense of their gender. Gender orientation does not necessarily align with the sex assigned at birth.

Genderqueer: An identity of a person who identifies as and/or express themselves as somewhere in the continuum between maleness/masculinity and femaleness/femininity, or outside of the gender binary system.

Lesbian: A sexual orientation and/or identity of a person who is woman-identified and who is emotionally and sexually attracted to some other women.

LGBT: An umbrella term referring collectively to people who identify as lesbian, gay, bisexual and/or transgender. Sometimes the acronym is written as LGBTQ, with the "Q" referring to those who identify as questioning and/or queer. In the past "gay" was used as a general, overarching term, but currently the more inclusive terms LGBT and LGBTQ are regularly used and preferred by many LGBT people and allies.

Queer: An umbrella term used to describe a sexual orientation, gender identity or gender expression that does not conform to dominant societal norms. While it is used as a neutral, or even a positive term among many LGBT people today, some consider it a derogatory term as historically, it had been used negatively.

Questioning: An identity of a person who is uncertain of their sexual orientation/identity and/or their gender orientation/identity.

Sex or Biological Sex: This is determined by our chromosomes, our hormones and our internal and external genitalia. Typically, we are assigned the sex of male or female at birth.

Sexual Identity: What we call ourselves in terms of our sexuality. Such labels include "lesbian," "gay," "bisexual," "pansexual," "queer," "heterosexual," "straight," "asexual" and many more. This term is also sometimes used to refer to sexual orientation.

Sexual Orientation: The inner feelings of who we are attracted or oriented to emotionally and sexually. This term is also sometimes used to refer to sexual identity.

Transgender: An identity of a person whose gender identity is not aligned with their sex assigned at birth and/or whose gender expression is non-conforming.

Transition: The myriad of actions a person may take to transition from one gender identity to another. These may include social, psychological and/or medical processes. Transitioning is a complex process that occurs over a long period of time, it is not a one-time event.

Two-Spirit (also Two Spirit or Twospirit): Used in many Native American groups to refer to people who are lesbian, gay, bisexual, transgender or gender non-conforming. The term usually implies a masculine spirit and a feminine spirit living in the same body and has been adopted by some contemporary LGBT Native Americans to describe themselves.

Survey Responses

[Access the survey responses online here.](#)

Listening Session Agenda & Questions

Community Listening Sessions Agenda

Outcomes:

1. Identify issues critical to the LGBTQ community in the region
2. Outline community needs that are not currently being met by FSL or EqMD
3. Discuss ways to prioritize identified issues in FSL's work
4. Engage in visioning work about the merged organization's reputation, resources and service
5. Foster community reinvestment and support

I. Welcome 15 Minutes

1. Talking Points:
 - Thanking community members for coming
 - Hosting listening sessions statewide
- Opportunity for us to solicit input from the community
- Status of merger

II. Visioning 65 minutes

1. Brainstorm 15 minutes
 - 5 posters will be placed across the room, entitled:
 - Critical LGBTQ Issues in Maryland
 - Unmet Needs in the LGBTQ Community
 - Themes & Words that should be in the Mission
 - What Will Make You Proud of FSL/EqMD
 - Name Suggestions

Participants will be asked to go to each poster and respond to the prompt.

2. Group Work 30 minutes

Participants will be divided into 4 groups, and given posters 1-4. They will be asked to review the information, and do the following:

 - Write summary of brainstorm
 - Identify overarching themes (what ideas/words were being repeated)
 - Any ideas that stuck out
 - Information that you want FSL/EqMD to know
3. Report Back 20 minutes

Groups report on work, solicit feedback from wider group

III. Closing

1. Session Evaluation 5 minutes

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