

Healing All Sons & Brothers:

Addressing Gay, Bisexual, and Transgender Boys and Men of Color

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Young men and boys of color face staggering disparities in health, education, and employment. A growing national movement has emerged to respond to the systemic barriers and persistent challenges confronting this population. Anchored by public and philanthropic initiatives including My Brother's Keeper and the Executives' Alliance to Expand Opportunities for Boys and Men of Color, this movement seeks to improve the lives of African American, Latino, Asian, and Native American males.

The heightened focus by grantmakers on the diverse needs of these communities is vital, but to date little attention has been paid to the unique experiences of gay, bisexual, and transgender (GBT) boys and men of color. GBT boys and men of color face significant stigma and marginalization, based not only on race, but also on gender identity and sexual orientation. As a result, GBT boys and men of color face a number of health inequities, connected to limited access to health care, disproportionate HIV/AIDS rates, inadequate housing, and unsafe schools.

HEALTH CARE ACCESS

Although there is limited data about GBT males of color, research shows that lesbian, gay, bisexual, and transgender (LGBT) individuals experience major barriers to health care. In addition to encountering bias and prejudice from providers, LGBT people are more likely to lack health insurance than non-LGBT people (Durso et al. 2014). LGBT people are also more likely to delay medical care and visit emergency rooms for treatment (Krehely 2009). While the Affordable Care Act (ACA) offers a wide range of protections for LGBT individuals, many have not yet benefitted from the law. In fact, 70 percent of low- and middle-income LGBT people report being unaware of coverage options through the ACA (Out2Enroll 2014).

HIV/AIDS

GBT males of color are disproportionately affected by the HIV/AIDS epidemic. African American and Latino gay and bisexual men make up less than one percent of the population but represent the majority of all new HIV infections (CDC 2014). Among young men who have sex with men diagnosed with HIV, 78 percent are African American or Latino (CDC 2014). These disparities are fueled not only by limited HIV

prevention and treatment, but also structural inequities such as homophobia, racial injustice, stigma, and poverty (Robinson and Moodie-Mills 2012).

HOUSING

LGBT youth of color are particularly vulnerable to housing instability and homelessness. An estimated 42 percent of homeless youth are LGBT (Ray 2006). Studies suggest that a disproportionate number are youth of color (Cray et al. 2013). Many LGBT youth become homeless after experiencing family rejection or violence based on their sexual orientation or gender identity (Cray et al. 2013). Lacking quality, affordable, and safe housing has serious consequences for LGBT youth, including poor physical and mental health, substance abuse, and sexual exploitation (Ray 2006).

SCHOOL ENVIRONMENT

For many LGBT youth, schools are unsafe and hostile environments where they regularly confront bullying and discrimination. According to school climate data, nearly 50 percent of African American and Latino LGBT students have experienced harassment or assault based on sexual orientation (Kosciw et al. 2014). LGBT youth of color are also disproportionately affected by harsh school discipline policies (Kosciw et al. 2014). LGBT students are often punished more severely when trying to defend against bullying or when they do not conform to traditional gender norms (Winder 2011). As a result, LGBT youth are more likely to have lower academic achievement and drop out of school, putting them at risk for poor health outcomes and poverty as adults.

GBT males of color experience significant disparities related to health care access, HIV/AIDS, housing, and education. These disparities push GBT males of color to the margins and lead to unhealthy lives and diminished opportunities.

GRANTMAKER ACTIVITIES

A few foundations are working to advance equity for GBT boys and men of color through a range of grantmaking strategies.

- **Improving Access to Health Care** – Health funders have been instrumental in closing the coverage gap for LGBT people. The California Endowment, along with the Gill

Foundation and Evelyn and Walter Haas, Jr. Fund, supported the launch of Health Happens with Equality, a statewide initiative designed to increase ACA outreach and enrollment among LGBT Californians. The campaign targets LGBT communities of color by providing culturally tailored information and in-person assistance. Similarly, the New York State Health Foundation funds a statewide network of 19 organizations that provide ACA education, outreach, and enrollment to communities that are more likely to be uninsured, including LGBT New Yorkers. Additionally, the Sellers Dorsey Foundation supports Out2Enroll, a national campaign that educates the LGBT community about the ACA. Out2Enroll engages uninsured individuals through LGBT-specific marketing, events, and community partnerships. The campaign has also provided cultural competency training to more than 200 assisters in five states (Out2Enroll 2014).

- ***Elevating Awareness and Research*** – The stories of GBT boys and men of color often go unheard and unnoticed, leading to a lack of understanding about this population. Some funders have addressed this issue by providing platforms for GBT males of color to share their experiences and by supporting efforts to capture data about this community. In 2012, The California Endowment partnered with Funders for LGBTQ Issues to convene a symposium on GBT males of color. The symposium brought together grantmakers and community partners from across health, LGBT, and racial equity sectors to discuss the challenges facing GBT males of color. The symposium also featured a series of videos funded by The California Endowment that documented the concerns of GBT males of color. The California Endowment also partnered with The Liberty Hill Foundation to fund the report “The Experience and Needs of LGBTQ Male Youth of Color.” The report illuminates the disparities and social determinants that affect GBT boys and young men of color (Durso et al. 2014). The New York State Health Foundation has also addressed gaps in research by recently funding the advocacy organization Empire State Pride Agenda to conduct a statewide health needs assessment of LGBT New Yorkers.
- ***Building Leadership and Supporting Advocacy*** – To address the underlying factors that drive inequities among GBT males of color, some funders are investing in advocacy, policy, and organizing. From 2003 to 2014, The Liberty Hill Foundation’s Queer Youth Fund awarded \$100,000 grants to programs across the United States that advance equality and social justice for LGBT youth. Among the grantees are several programs that primarily serve GBT males of color. This includes Brown Boi Project, an organization that improves the well-being of gay and transgender men as well as masculine-identified individuals through leadership development and health outreach.

Similarly, the LGBT Racial Justice Fund supports advocacy, capacity building, and leadership development to create long-term social change for LGBT youth of color. Funded by the Astraea Lesbian Foundation for Justice, the Ford Foundation, the Arcus Foundation, and an anonymous donor, the initiative awarded six inaugural grants to programs tackling issues such as health care access, education, housing, and the criminalization of LGBT youth of color.

IMPLICATIONS FOR GRANTMAKERS

Health funders can play a critical role in eliminating disparities and improving health outcomes for GBT males of color. Philanthropy can bring much-needed attention, resources, and upstream thinking to address the needs of this community. Grantmakers focused on health equity, LGBT health, and boys and men of color may already be reaching this population and can be more strategic about tailoring efforts to GBT males of color. Potential strategies for better supporting the health and well-being of GBT males of color include the following:

- ***Expand health care access*** – Support efforts to increase ACA outreach and enrollment among LGBT communities, especially ones targeting LGBT youth. Funding can also be directed toward programs and policies that increase the cultural competency of health care providers and help them understand the complex needs of GBT males of color.
- ***Improve school climate*** – Support advocacy to make schools safer and healthier for all LGBT youth, including GBT males of color. Invest in grassroots and national efforts to eliminate harsh discipline policies that disproportionately target students of color and LGBT youth. Funders can also support initiatives to increase graduation rates and strengthen support services in schools.
- ***Increase research and awareness*** – Amplify the voices of GBT males of color by supporting research and data collection efforts. Funders can also foster dialogue and build awareness through convenings and public education campaigns.
- ***Collaborate across issue areas*** – Develop strategies that take an intersectional approach to issues affecting GBT males of color. Funders can expand the conversation about boys and men of color and think more broadly about the impact of race, sexual orientation, gender identity, and masculinity on health. Health philanthropy can also serve as an ally to LGBT, youth, and racial justice funders, creating spaces for shared learning and partnership (Funders for LGBTQ Issues 2014).

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