



STATEMENT OF NATIONAL CENTER FOR TRANSGENDER EQUALITY

House Committee on Oversight & Reform

December 14th, 2022

The Rise of Anti-LGBTQI+ Extremism and Violence in the United States

The National Center for Transgender Equality (NCTE) is a nationwide, non-profit, non-partisan organization founded in 2003 to promote public understanding, opportunity, and well-being for the nearly two million Americans who are transgender. In the nation's capital and throughout the country, NCTE works to replace disrespect, discrimination, and violence with empathy, opportunity, and justice. In addition to conducting public education and groundbreaking national survey research, NCTE works with federal, state, and local agencies on a wide range of issues facing transgender individuals in the United States to change policies to create a society where transgender people are able to freely and safely participate in public life to the same extent of their cisgender peers. It is in pursuit of these goals that NCTE enters this testimony. We observe that there is a coordinated effort to prevent transgender people from freely & safely participating in public life.

NCTE's testimony will demonstrate that the epidemic of violence against the LGBTQ+ community is the consequence of dehumanizing rhetoric from media and lawmakers alike, persistent and increasing waves of transphobic sentiment on social media, legislative attacks on transgender people's human rights, and the fomenting of individual and large-scale acts of anti-transgender violence. We observe a direct link between this dehumanization and the devaluation of transgender¹ lives that results in targeted acts of violence against the transgender community and individuals.

¹ Unless otherwise specified, NCTE uses the term "transgender" throughout this testimony in a broad, inclusive sense that is inclusive of transgender men, transgender women, nonbinary people, agender people, genderfluid people, and gender-nonconforming people.

1. A Community Under Siege

On November 17, 2022, NCTE released our *Remembrance Report*, honoring the 47 known transgender individuals whose lives had been lost to violence since November 1, 2021.² Before dawn on November 20, Transgender Day of Remembrance,³ the report was already out of date.

At 11:57 p.m. Mountain Time on Saturday, November 19, 2022, the Colorado Springs Police Department received a call about an active shooter at an LGBTQ+ bar called Club Q. Over the next few minutes, the shooter took five lives and wounded at least 18 other patrons of the club. Two of the five killed were transgender: Daniel Aston (age 28)⁴ and Kelly Loving (age 40).⁵

We know that these 49 deaths are not the only transgender lives taken by violence during this time period. Violence against our community is often underreported, and data about it is difficult to capture. Transgender victims of violence are frequently misidentified in death by law enforcement, journalists, and even unsupportive family members, preventing them from being counted accurately.⁶ We also recognize that in 2022, as in every year, transgender people of color have suffered a disproportionate amount of violence, with Black transgender women representing fully two-thirds of all known cases of fatal violence.⁷

Year after year, NCTE and other LGBTQ+ advocacy organizations have observed the Transgender Day of Remembrance by noting that the year is “the deadliest year on record” for transgender people.⁸ Sadly, we make this observation expecting that the next year will once again set another new record.

² National Center for Transgender Equality (NCTE), *Remembrance Report*, attached.

³ Trans Day of Remembrance is an annual event of collective mourning for transgender people who have been murdered or otherwise lost to violence in the previous year.

⁴ Laurel Powell, “HRC Mourns Daniel Aston, Beloved Son & ‘Master of Silly Business,’ Killed in Club Q Shooting,” *Human Rights Campaign* (Nov. 29, 2022), available at <https://www.hrc.org/news/hrc-mourns-daniel-aston-beloved-son-master-of-silly-business-killed-in-club-q-shooting>.

⁵ Laurel Powell, “HRC Mourns Kelly Loving, ‘Loving Friend & Caring Person,’ Killed in Club Q Shooting,” *Human Rights Campaign* (Nov. 29, 2022), available at <https://www.hrc.org/news/hrc-mourns-kelly-loving-loving-friend-caring-person-killed-in-club-q-shooting>.

⁶ See, e.g., Lucas Waldron & Ken Schwencke, “Deadnamed,” *Pro Publica* (Aug. 10, 2018), available at <https://www.propublica.org/article/deadnamed-transgender-black-women-murders-jacksonville-police-investigation> (describing how the Jacksonville Sheriff’s Office consistently referred to murdered transgender women as men and used their previous names and noting that this pattern was repeated by law enforcement agencies around the country who had investigated the deaths of transgender people).

⁷ Human Rights Campaign Foundation, *An Epidemic of Violence 2022: Fatal Violence Against Transgender and Gender Non-Conforming People in the United States in 2022* (Dec. 5, 2022), available at <https://reports.hrc.org/an-epidemic-of-violence-2022>.

⁸ See, e.g., Laurel Powell, “2021 Becomes the Deadliest Year on Record for Transgender and Non-Binary People,” *Human Rights Campaign* (Nov. 9, 2021), available at <https://www.hrc.org/press-releases/2021-becomes-deadliest-year-on-record-for-transgender-and-non-binary-people>.

The shootings in Colorado did not happen in a vacuum. This violence was catalyzed by a cultural climate filled with anti-LGBTQ+ legislation and policies, think pieces debating the validity of our humanity under the guise of “just asking questions,” politicians and other public figures encouraging their bases to target and threaten LGBTQ+ events and healthcare facilities that cater to our communities, and unchecked fearmongering both in the press and on social media. The majority of these political attacks—and the misinformation that fuels them—are targeted squarely at transgender people. Far too often, they target transgender youth specifically.

2. Not All Attacks Are Physical

While physical attacks like those mourned on Trans Day of Remembrance are most likely to draw headlines, they represent only one scope of the intense and systemic violence against transgender people in the United States. In addition to physical violence, transgender people live in an environment where we are constantly subjected to degrading, discriminatory, and dehumanizing treatment from those around us, and where our mere right to exist is frequently called into question on the political stage.

Right now, anti-transgender extremists are attempting to restrict the rights of transgender people across all aspects of our lives, from our ability to access identity documents that properly reflect our names and genders, to our right to access public accommodations such as public restrooms, our right to employment and education, and even our right to access healthcare.

Based on an analysis from NPR,⁹ over the past two years there have been over 300 state bills that would restrict or limit the quality of life of transgender people; 86% of these bills targeted transgender youth and young adults. The NPR analysis also found that about 15% of these bills have become law. NCTE tracked 207 of these bills that were either introduced in 2022 or carried over from 2021. Twelve states enacted at least one of these bills, and two more were blocked by gubernatorial veto (see *diagram 1*).

In addition, 2022 saw politicians in several states using administrative rather than legislative processes to attack the rights of transgender people, most notably in Texas, where Governor Greg Abbott directed the Department of Family and Protective Services to investigate families with transgender children for child abuse,¹⁰ and Florida, where the state has eliminated coverage of transgender healthcare under Medicaid plans¹¹ and where the Boards of Medicine and Osteopathic

⁹ Koko Nakajima & Connie Hanzhang Jin, “Bills targeting trans youth are growing more common - and radically reshaping lives,” *NPR* (Nov. 28, 2022), available at <https://www.npr.org/2022/11/28/1138396067/transgender-youth-bills-trans-sports>.

¹⁰ See, e.g., Julian Mark, “Texas Governor Directs State Agencies to Investigate Gender-Affirming Care for Trans Youths as ‘Child Abuse’”, *The Washington Post* (Feb. 23, 2022), available at <https://www.washingtonpost.com/nation/2022/02/23/greg-abbott-gender-affirming-care-child-abuse-directive/>.

¹¹ See, e.g., Kathryn Varn, “Transgender Floridians Scrambling as Medicaid Coverage Ban on Gender-Affirming Care Begins,” *Tallahassee Democrat* (Aug. 21, 2022), available at

Medicine are even now considering rules that would prohibit physicians from providing medically-necessary healthcare to transgender youth.¹²

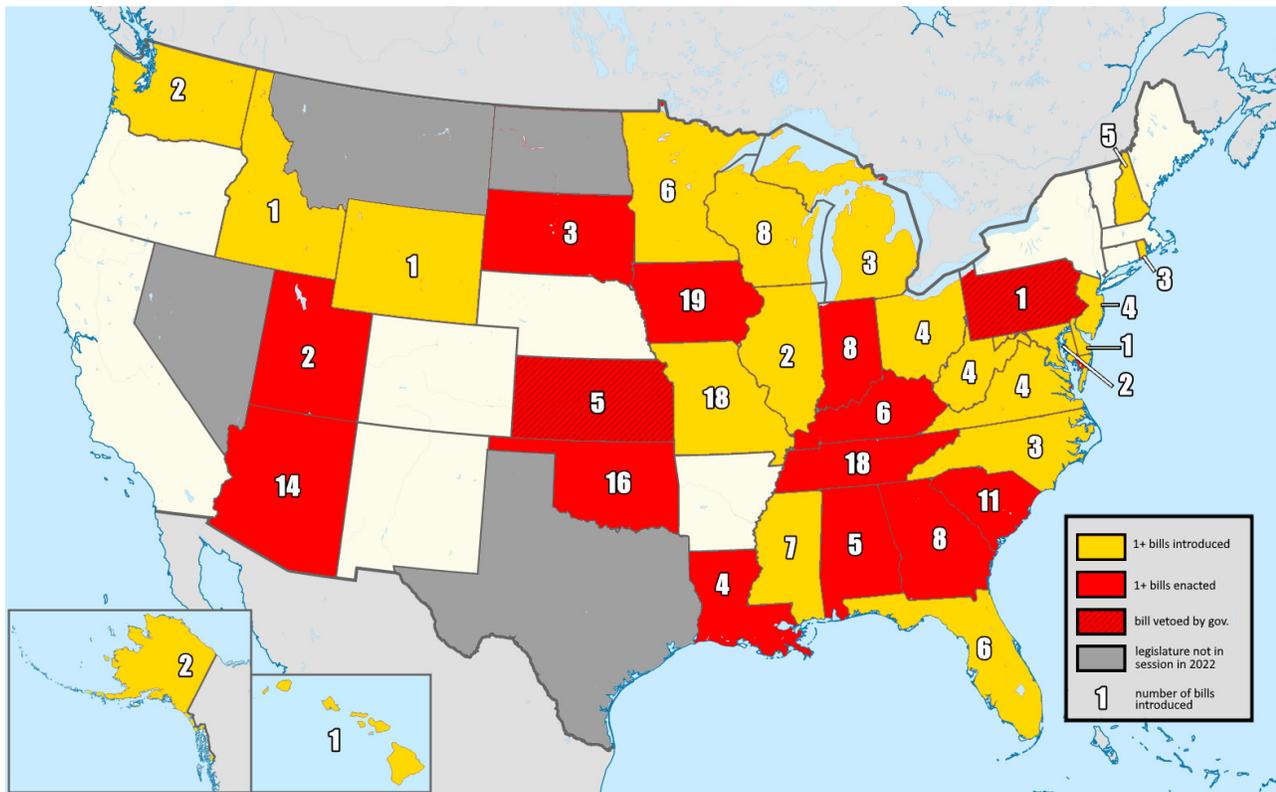


Diagram 1: Anti-Transgender Bills in 2022 State Legislative Sessions¹³

When politicians and pundits treat transgender people’s lives as a matter for public debate, the media responds in kind, giving anti-transgender advocates a larger platform to perpetuate their hateful rhetoric. Sensationalist headlines lead stories that care more about attracting clicks and advertising impressions than reporting the facts. A favorite topic is gender-affirming medical care, especially for transgender youth. For example, just days before the Club Q shootings in Colorado Springs, the *New York Times* published an article that perpetuated misinformation on gender-affirming care for

<https://www.tallahassee.com/story/news/local/state/2022/08/21/transgender-floridians-scrambling-medicaid-coverage-ban/10310412002/>.

¹² See, e.g., Zachary Schermele, “Two Florida Medical Boards Advance Ban on Gender-Affirming Care for Minors,” *NBC News* (Nov. 4, 2022), available at <https://www.nbcnews.com/nbc-out/out-news/two-florida-medical-boards-advance-ban-gender-affirming-care-minors-rcna55725>.

¹³ Map image from Wikipedia Commons, CC BY-SA 3.0, July 30, 2011, modified by NCTE staff to reflect state legislative data.

minors.¹⁴ This article, “They Paused Puberty, But Is There A Cost?”, caused an uproar among medical experts and activists alike. The World Professional Association for Transgender Health (WPATH) and the United States Professional Association for Transgender Health (USPATH) took the unusual step of publicly addressing and debunking the misinformation published by the *New York Times*.¹⁵

¹⁴ Kaiyti Duffy, “Recent Anti-Trans articles miss the point of gender-affirming care,” *Teen Vogue* (Nov. 29, 2022), available at <https://www.teenvogue.com/story/recent-anti-trans-articles-miss-the-point-of-gender-affirming-care>.

¹⁵ USPATH Board & WPATH Executive Committee, “USPATH and WPATH Respond to NY Times Article ‘They Paused Puberty, But Is There a Cost?’” (Nov. 22, 2022), available at <https://www.wpath.org/media/cms/Documents/Public%20Policies/2022/USPATHWPATH%20Statement%20re%20Nov%2014%202022%20NYT%20Article%20Nov%2022%202022.pdf?t=1669173834>.

Contrary to the misinformed arguments of anti-transgender activists, gender-affirming and transition-related healthcare is established, safe, effective, scientifically supported, and medically necessary. See Kellan E. Baker et al., *Hormone Therapy, Mental Health, and Quality of Life Among Transgender People: A Systematic Review*, 5 J. ENDOCR. SOC. bvab011 (2021); Jeremy A. Wernick et al., *A Systematic Review of the Psychological Benefits of Gender-Affirming Surgery*, 46 UROL. CLIN. NORTH AM. 475 (2019); Taciana Silveira Passos, Marina Sá Teixeira & Marcos Antonio Almeida-Santos, *Quality of Life After Gender Affirmation Surgery: a Systematic Review and Network Meta-analysis*, 17 SEX RES. SOC. POLICY 252 (2020). See also Ivy H. Gardner, Joshua D. Safer, *Progress on the Road to Better Medical Care for Transgender Patients*, 20(6) CURRENT OPIN. ENDOCRINOLOGY DIABETES & OBES. 553 (2013), available at https://journals.lww.com/co-endocrinology/Abstract/2013/12000/Progress_on_the_road_to_better_medical_care_for.9.aspx; Sari L. Reisner, Asa Radix & Madeline B. Deutsch, *Integrated and Gender-Affirming Transgender Clinical Care and Research*, 72 Suppl 3 J. ACQUIR. IMMUNE DEFIC. SYNDR. S235 (2016).

Gender-affirming care, which encompasses a broad range of safe and scientifically-supported treatments and resources, such as counseling, laser hair removal, voice training, puberty suppression, hormone replacement therapy, and more, are critical to transgender and nonbinary people’s physical, mental, and social health needs and well-being. See, e.g., University of California San Francisco, *Voice and Speech Therapy | Gender Affirming Health Program*, available at <https://transcare.ucsf.edu/voice-and-speech-therapy%09>; Eli Coleman et al., *Standards of Care for the Health of Transgender and Gender Diverse People, Version 8*, 23 INT’L J. OF TRANSGENDER HEALTH S1 (2022).

Over the last twenty years, there have been vast improvements in research on gender-affirming care. Currently, there is a well-established body of evidence and medical consensus demonstrating that comprehensive, affirming care is safe and should be made accessible to all transgender and nonbinary people. See Asa Radix and Andrew M. Davis, *Endocrine Treatment of Gender-Dysphoric/Gender-Incongruent Persons*, JAMA 318 (15): 1491 (2017). <https://doi.org/10.1001/jama.2017.13540>. See also David A. Klein et al, *Caring for Transgender and Gender-Diverse Persons: What Clinicians Should Know*, 98 AM. FAM. PHYSICIAN 645 (2018).

Moreover, medical associations such as the American Academy of Pediatrics (AAP), Endocrine Society, Pediatric Endocrine Society (PES), American Medical Association (AMA), American Psychiatric Association (APA), American Academy of Child and Adolescent Psychiatry (AACAP), the American College of Osteopathic Pediatricians (ACOP), the National Association of Pediatric Nurse Practitioners (NAPNAP), the American College of Obstetricians and Gynecologists (ACOG), and the World Professional Association for Transgender Health (WPATH) have all stated unambiguously and unequivocally that age-appropriate transition-related medical care is safe, effective, and medically necessary. See Jason Rafferty, *Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents*, PEDIATRICS (2018) 142 14; Endocrine Society, *Transgender Health: An Endocrine Society Position Statement* (Dec. 16, 2020), available at: <https://www.endocrine.org/advocacy/position-statements/transgender-health>; Pediatric Endocrine Society, *Transgender Care: Introduction to Health for Transgender Youth* (July 17, 2020), available at: <https://pedsendo.org/patient-resource/transgender-care/>; American Medical Association, *Issue brief: Health insurance coverage for gender-affirming care of transgender patients* at 5 (2019), available at <https://www.ama->

Similar sensationalized reporting, and associated anti-transgender legislation, is also seen around the subjects of transgender youth participation in sports and access by transgender people to public restrooms and other public accommodations. In all these cases, anti-LGBTQ+ politicians invent a false “controversy” that is not supported by any reliable data¹⁶ that is then repeated credulously by the media, giving the public at large an impression of transgender people that is founded on misunderstandings and misinformation. This rhetoric, and the portrayal of transgender people as a threatening or deceitful “other” to be feared and hated, is profoundly dehumanizing, and has tragic consequences, both immediate and long-lasting.

3. Two Audiences

Regardless of whether it actually passes—or ever goes into effect, anti-transgender legislation has a dramatic impact on both transgender people and the broader public.

Transgender people, and transgender youth in particular, experience immediate negative impacts as a result of having key aspects of our lives treated as a matter for public debate. In a 2021 study, The Trevor Project found that 66% of LGBTQ+ youth, and 85% of transgender and nonbinary youth, reported that the debates around state laws that year negatively impacted their mental health. When asked about specific types of legislation, including sports bans, gender-affirming care bans, and school

[assn.org/system/files/2019-03/transgender-coverage-issue-brief.pdf](https://www.psychiatry.org/system/files/2019-03/transgender-coverage-issue-brief.pdf); Jack Drescher & Eric Yarbrough, American Psychiatric Association, *Position Statement on Discrimination Against Transgender and Gender Diverse Individuals* at 2 (2018), available at: <https://www.psychiatry.org/File%20Library/About-APA/Organization-Documents-Policies/Position-2018-Discrimination-Against-Transgender-and-Gender-Diverse-Individuals.pdf>; AACAP, *Transgender and Gender Diverse Youth* (2020), available at: https://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/transgender-and-gender-diverse-youth-122.aspx; American College of Osteopathic Pediatricians, *ACOP Statement Against Anti-Transgender Health Laws in State Legislation* (Apr. 27, 2021), available at: <https://acoped.org/acop-statement-against-anti-transgender-health-laws-in-state-legislation/>; National Association of Pediatric Nurse Practitioners et al., *NAPNAP Position Statement on Health Risks and Needs of Lesbian, Gay, Bisexual, Transgender, and Questioning Youth*, 33 J. PED. HEALTH CARE A12 (2019); American College of Obstetricians and Gynecologists Committee on Gynecologic Practice and Committee on Health Care for Underserved Women, *Committee Opinion Number 823: Health Care for Transgender and Gender Diverse Individuals* (2021), available at <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2021/03/health-care-for-transgender-and-gender-diverse-individuals>; Eli Coleman et al., *Standards of Care for the Health of Transgender and Gender Diverse People, Version 8*, 23 INT’L J. OF TRANSGENDER HEALTH S1 (2022).
¹⁶ See The Canadian Centre for Ethics in Sport, “Transgender Women Athletes and Elite Sport: A Scientific Review,” (2022), available at: <https://www.cces.ca/sites/default/files/content/docs/pdf/transgenderwomenathletesand elitesport-ascientificreview-e-final.pdf> (finding that there is no firm basis available in evidence to indicate that trans women have a disproportionate advantage in athletic performance); see also Hasenbush, A., Flores, A.R., & Herman, J.L., “Gender Identity Nondiscrimination Laws in Public Accommodations: a Review of Evidence Regarding Safety and Privacy in Public Restrooms, Locker Rooms, and Changing Rooms,” 16 SEXUALITY RESEARCH & SOC. POL. 70 (2019) (finding that nondiscrimination laws affording transgender people access to gender-appropriate restrooms are not associated with any change in the number of criminal incidents in restrooms).

policies that would require they be outed to unsupportive parents, transgender youth reported feeling disproportionately scared, stressed, hopeless, and angry compared to their cisgender peers.¹⁷

Even more concerning is the way that this same dehumanizing rhetoric that is so harmful to transgender youth can inflame anti-LGBTQ+ sentiment among the general public. When politicians and the media paint transgender people as something to be feared, treated with disgust, and mistrusted, people who are already receptive to that message take it to heart, which reinforces their prejudices. In their minds, transgender people either become victims to be saved (e.g. from the supposedly dangerous effects of medical transition) or villains to be punished (e.g. for somehow posing a threat to “normal” people, particularly cisgender women). All-too-often, they view us as both at the same time.

Over the past several years, many people have made names for themselves on social media by amplifying these anti-trans talking points, which has helped to keep these manufactured controversies alive. In turn, talking points that originate in social media circulate back into the conversations about trans lives in the political and media spheres. One of the best examples of this is the recent appropriation by anti-LGBTQ activists of the term “groomer”—a term otherwise used to describe perpetrators of childhood sexual abuse—to slander LGBTQ+ people and our allies as predatory and harmful toward children.¹⁸ LGBTQ+ and especially transgender people are in fact significantly more likely to be victims of sexual abuse than perpetrators of it.¹⁹ And yet, this misused terminology has now become part of the political discourse around LGBTQ+ people, and, like the long-discredited homophobic tropes from the 1970s from which it descends, is being invoked as a reason to further restrict our rights in the name of “protecting children.”

This same rhetoric has also been used as justification for violence and threats of violence against LGBTQ+ people. Numerous attacks or attempts at intimidation have been made by heavily armed protesters against family-friendly Pride events and drag performances, including in Texas,²⁰ Idaho,²¹

¹⁷ The Trevor Project, “Issues Impacting LGBTQ Youth” (Jan. 2022), available at: https://www.thetrevorproject.org/wp-content/uploads/2022/01/TrevorProject_Public1.pdf.

¹⁸ See “The Right Is Misusing the Word ‘Grooming,’ and It Can Have Serious Consequences,” *Teen Vogue* (Aug. 9, 2022), available at: <https://www.teenvogue.com/story/the-right-is-misusing-the-word-grooming-and-it-can-have-serious-consequences>.

¹⁹ See Rothman, E.F., Exner, D. & Baughman, A.L., “The Prevalence of Sexual Assault Against People Who Identify as Gay, Lesbian, or Bisexual in the United States: A Systematic Review,” *TRAUMA, VIOLENCE, & ABUSE* Vol. 12, Issue 2, 55 (April 2011), available at: <https://doi.org/10.1177/1524838010390707>; see also Sandy E. James et al, *Executive Summary of the Report of the 2015 U.S. Transgender Survey* (2016).

²⁰ James Factora, “Armed Protesters Showed Up to a Texas Church’s Drag Bingo Event,” *them* (Sept. 27, 2022), available at <https://www.them.us/story/texas-drag-bingo-armed-protesters>.

²¹ James Factora, “A White Nationalist Group Was Headed to an Idaho Pride Event with Riot Gear,” *them* (June 13, 2022), available at <https://www.them.us/story/a-white-nationalist-group-was-headed-to-an-idaho-pride-event-with-riot-gear>.

and the San Francisco Bay Area.²² According to the advocacy group GLAAD, there were at least 124 attacks and threats on drag performances across 47 states recorded this year.²³

Hospitals around the country have been subjected to bomb threats and other intimidation tactics after anti-LGBTQ social media figures began spreading baseless stories that providers at these hospitals are “mutilating children.” Boston Children’s Hospital has been the highest profile of these, having experienced at least three bomb threats this year.²⁴ This strategy has now moved back from social media to traditional media outlets such as Fox News, where host Tucker Carlson went so far as to display the names and photos of Vanderbilt University Medical Center’s board of directors during a segment attacking hospitals providing gender-affirming care to minors.²⁵ Such tactics draw to mind the “Wanted” posters used by anti-abortion activists to target physicians, at least four of whom were subsequently murdered as a result of this dangerous discourse.²⁶

This harmful and inflammatory rhetoric is unquestionably an attack against LGBTQ+ people—particularly transgender people—and the spaces we inhabit and congregate. According to GLAAD President Kate Ellis, “you can draw a straight line from the false and vile rhetoric about LGBTQ people spread by extremists and amplified across social media, to the nearly 300 anti-LGBTQ bills introduced this year, to the dozens of attacks on our community like this one.”²⁷

This “straight line” is the demonstrable impact of multiple efforts to strip transgender people of their human rights while simultaneously positioning transgender people as a whole as a threat to society. The perpetrators of it, from the politicians and media figures who normalize the dehumanization and vilification of transgender people to the people brandishing firearms outside libraries all bear culpability for the violence that ensues. The blood of the 49 transgender people murdered since November 1, 2021, stains all of their hands.

²² Samantha Riedel, “Proud Boys Stormed a Drag Queen Story Hour at a Public Library,” *them* (June 13, 2022), available at <https://www.them.us/story/proud-boys-stormed-a-drag-queen-story-hour-at-a-public-library>.

²³ Samantha Riedel, “There Have Been At Least 124 Attacks on Drag Events this Year,” *them* (Nov. 23, 2022), available at <https://www.them.us/story/anti-drag-attacks-2022-glaad>.

²⁴ Greg Owen, “Children’s hospital faces third bomb threat due to anti-trans conspiracy theories,” *LGBTQ Nation* (Nov. 17, 2022), available at <https://www.lgbtqnation.com/2022/11/childrens-hospital-faces-third-bomb-threat-due-anti-trans-conspiracy-theories/>.

²⁵ John Russell, “Tucker Carlson Put Out a Potential Hit List of Hospital Directors,” *LGBTQ Nation* (Sept. 23, 2022), available at <https://www.lgbtqnation.com/2022/09/tucker-carlson-put-potential-hit-list-hospital-directors/>.

²⁶ See, “Wanted Style Posters,” *Feminist Majority Foundation* (2019), available at <https://feminist.org/anti-abortion-violence/wanted-posters.html>.

²⁷ “GLAAD Responds to Tragic Mass Shooting at Colorado Springs LGBTQ Nightclub,” *GLAAD* (Nov. 20, 2022), available at <https://www.glaad.org/releases/glaad-responds-tragic-mass-shooting-colorado-springs-lgbtq-nightclub>.

4. The Impact of Violence and Violent Rhetoric on the Lives of Transgender People

Unfortunately, transphobic violence and violent rhetoric has an effect that lasts long past the immediate physical or emotional harm, and extends well beyond those directly targeted. Due to systemic violence and discrimination, transgender people often fear participating in public life. According to a 2021 report by the Williams Institute at UCLA, four out of five (80%) of trans adults reported being treated with less respect than their cisgender peers when in public.²⁸ As a direct result of this pervasive and sometimes daily violence, discrimination, and harmful societal narratives about them, transgender people experience depression, anxiety, and other PTSD symptoms at significantly elevated rates.²⁹

Because of this, transgender people are significantly less likely than their cisgender peers to participate in public life, whether because of the lasting effects of personal trauma or attempts to avoid being victimized themselves. This extends to all walks of life, including family life, access to healthcare, school attendance and participation in education, ability to obtain gainful employment, or even the ability to find stable housing.

A. Family Life

In far too many cases, transphobic violence and discrimination begins in the home. According to the 2015 US Transgender Survey conducted by NCTE, 10% of respondents reported that an immediate family member had been violent towards them because they were transgender,³⁰ while more than one-quarter (26%) reported that an immediate family member had stopped speaking to them after they came out as trans.³¹ Eight percent of respondents said they had been kicked out their house as a result of coming out; these individuals then reported experiencing living in poverty, homelessness, engaging in sex work, and attempting suicide at rates significantly higher than other respondents.³² Even when violence and harassment from family members have ended, they have effects that can last a lifetime.

Lack of family support can also exacerbate the effects of third-party violence such as that described above and in NCTE's *Remembrance Report*. When an individual is attacked, family are often the first

²⁸ Ilan H. Meyer, *TransPop, United States, 2016-2018* (Jun 23, 2021), available at <https://www.icpsr.umich.edu/web/ICPSR/studies/37938/summary>.

²⁹ Sari L. Reisner et al, *Discriminatory Experiences Associated with Posttraumatic Stress Disorder Symptoms Among Transgender Adults*, 63 J. COUNSELING PSYCH. 509 (2016), available at <https://doi.org/10.1037/cou0000143>.

³⁰ SANDY E. JAMES ET AL., THE REPORT OF THE 2015 U.S. TRANSGENDER SURVEY (2016) [hereinaft JAMES, USTS] at 71, available at <https://transequality.org/sites/default/files/docs/usts/USTS-Full-Report-Dec17.pdf>.

³¹ JAMES, USTS, *supra* note 30 at 70.

³² JAMES, USTS, *supra* note 30 at 72-73.

people they turn to. But when family is unsupportive—or in too many cases has also been a source of transphobic violence—transgender people are denied a vital escape hatch and support structure.

While anti-trans activists level harmful accusations that being transgender causes people to reject their family, isolate from friends, and harm themselves, its clear from the research that the opposite is true, and that a trans young person’s family acceptance or rejection is a major influencing factor in a trans person’s mental health and well-being.³³ LGBT youth who feel supported by their families are 62.5% less likely to attempt suicide than those whose families are unsupportive.³⁴

B. Health and Healthcare

Pervasive discrimination and violence against transgender people also impose significant barriers to accessing healthcare, resulting in negative health outcomes. According to a 2020 national survey conducted by the Center for American Progress and the University of Chicago, nearly half (47%) of transgender respondents reported having experienced at least one form of discrimination from healthcare providers due to their gender identity; for transgender people of color, the rate jumped to over two-thirds (68%).³⁵ Discriminatory treatment included physically rough or abusive treatment (20% of all transgender respondents; 38% of transgender people of color respondents); using harsh or abusive language while treating the transgender patient (19%; 29%); or even refusing to provide any care to the patient at all (18%; 28%).³⁶ As a result, 28% of transgender respondents reported delaying or not receiving necessary medical care in the prior year due to the fear of discrimination, with 40% (54% of transgender respondents of color) avoiding preventative screenings.³⁷ According to a 2022 survey, just under half (49%) of transgender or nonbinary respondents reported that they feared being denied medical care if they revealed their gender identity to a healthcare provider.³⁸ Sadly, this fear

³³ Caitlin Ryan & Robert A. Rees, “Supportive Families, Healthy Children: Helping Families with Lesbian, Gay, Bisexual and Transgender Children,” *The Family Acceptance Project at San Francisco State University* (2009), available at <https://familyproject.sfsu.edu/sites/default/files/documents/FAP%20LDS%20Booklet%20pst.pdf>; Caitlin Ryan et al, *Family Rejection as a Predictor of Negative Health Outcomes in White and Latino Lesbian, Gay and Bisexual Young Adults*, 123 PEDIATRICS 346 (2009).

³⁴ The Trevor Project, *2022 National Survey on LGBTQ Youth Mental Health* (2022), available at <https://www.thetrevorproject.org/survey-2022/>.

³⁵ Caroline Medina et al., “Protecting and Advancing Health Care for Transgender Adult Communities,” *Center for American Progress* (2021), available at <https://www.americanprogress.org/article/protecting-advancing-health-care-transgender-adult-communities/>.

³⁶ *Id.*

³⁷ *Id.*

³⁸ Caroline Medina et al., “Advancing Health Care Nondiscrimination Protections for LGBTQI+ Communities,” *Center for American Progress* (2022), available at <https://www.americanprogress.org/article/advancing-health-care-nondiscrimination-protections-for-lgbtqi-communities/>.

was not groundless, as nearly one-third (32%) of transgender or nonbinary respondents reported having experienced at least one denial of healthcare due to their gender identity.³⁹

The situation is worse for transgender people who experience violent attacks or are trying to deal with the psychological trauma caused by discrimination and harassment. Many of the 28% of transgender people who delayed or did not seek medical care were victims of the very sorts of violence described above, who rightly feared that their trauma would be exacerbated by institutional transphobia in the medical system. Whether they avoid care for physical injuries or the PTSD that results from attacks, the lack of care is directly attributable to the original violence.

The recent attacks against institutions providing transgender healthcare discussed above are also likely to have a significant effect on the access to care. Transgender people now need to fear not only harassment and discrimination from healthcare providers, but also harassment and violence from protesters. Just imagine being one of the kids who had to evacuate Boston Children's Hospital (potentially multiple times!) as a result of the recent bomb threats:⁴⁰ the trauma and fear of that violence could last years, if not entire lives.

To be clear, the effects of this violence and discrimination are not merely theoretical; they have been demonstrated through scientific surveys of transgender people. According to the 2015 US Transgender Survey, respondents were more likely to report their physical health as fair or poor than their cisgender peers (22% vs. 18%), while rates of psychological distress were eight times higher among respondents than among the general population (39% vs. 5%).⁴¹ Rates of serious psychological distress were significantly higher for individuals who had been physically attacked in the prior year (59% vs. 36%).⁴²

C. Education

Transphobic harassment and violence also have a significant detrimental impact on the ability of transgender people to attend school and receive an education. According to the 2015 US Transgender Survey, 54% of students in K-12 institutions who were out or perceived to be transgender reported experiencing verbal harassment due to their transgender status and 24% reported being physically attacked because people thought they were transgender. A shocking 13% reported being sexually assaulted in school because they were transgender.⁴³ Unfortunately, this harassment does not only come from other students, and can come from teachers and school administrators as well: one in five students (20%) reported being disciplined more harshly because they were transgender, more than

³⁹ *Id.*

⁴⁰ See Christopher Wiggins, "Children's Hospital Target of Third Bomb Threat Over Trans Care," *The Advocate* (Nov. 18, 2022), available at <https://www.advocate.com/news/2022/11/18/childrens-hospital-target-3rd-bomb-threat-over-trans-care>.

⁴¹ JAMES, USTS, *supra* note 30 at 104-105.

⁴² JAMES, USTS, *supra* note 30 at 107.

⁴³ JAMES, USTS, *supra* note 30 at 132.

one-third (36%) reported being disciplined for fighting back against bullies, 17% reported leaving school because mistreatment was so bad, and 6% reported having been expelled.⁴⁴

According to one respondent, “I was constantly bullied and physically assaulted by my classmates. Teachers would often see it happen and make no move to intervene. The harassment continued, and I eventually had to change high schools three times, each time just as bad as the last, until I finally gave up on public schools.”⁴⁵

Discrimination, however, does not only happen in schools. Students who face harassment and violence in the classroom are also subjected to violence and hateful transphobic rhetoric elsewhere. This ever-present violence and hate can make it incredibly difficult for students to succeed academically, even under the best of circumstances.

The effects of this discrimination are likely to last a lifetime. Surveys have demonstrated a significantly lower lifetime income for high school dropouts versus peers with greater education, as well as heightened reliance on social service programs like Medicaid.⁴⁶ Even for students who do not leave school entirely, harassment and violence is likely to have a sustained effect. According to a UCLA study of 2,300 middle school students in Los Angeles, students who experienced bullying performed significantly worse when compared to their academic peers.⁴⁷ Continued over years, and exacerbated by broader harassment and violence from family members, healthcare providers, and society at large, transgender students face overwhelming opposition to performing highly in school, and they literally pay the price for that harassment through their future earnings and employment prospects.

D. Employment

Violence, harassment, and discrimination also severely impact the transgender people’s employment in a variety of ways. Transgender Americans experience unemployment at a rate three times higher than the national average.⁴⁸ When they are employed, transgender workers are significantly underpaid, with their cisgender counterparts making 32% more money per year, even when accounting for education levels.⁴⁹ This discrepancy in pay and employment status leads to economic instability, and the resulting impact on educational opportunities, housing security, healthcare access, and more creates a cycle of oppression and compounding disadvantages, ultimately leading to incredibly high rates of poverty among transgender people. According to the 2015 US Transgender Survey, 29% of

⁴⁴ JAMES, USTS, *supra* note 30 at 132.

⁴⁵ JAMES, USTS, *supra* note 30 at 134.

⁴⁶ See National Center for Education Statistics, *Trends in High School Dropout and Completion Rates in the United States* (2020), available at <https://nces.ed.gov/programs/dropout/index.asp>.

⁴⁷ See Jaana Juvonen, *Bullying Experiences and Compromised Academic Performance Across Middle School Grades*, J. EARLY ADOLESCENCE 152 (2011).

⁴⁸ JAMES, USTS, *supra* note 30 at 141.

⁴⁹ David Baboolall et al, “Being Transgender at Work,” *McKinsey Quarterly* (Nov. 10, 2021), available at <https://www.mckinsey.com/featured-insights/diversity-and-inclusion/being-transgender-at-work>.

respondents were living in poverty, more than twice the rate of the US population, and 1 in 8 respondents reported a household annual income between \$1 and \$10k.⁵⁰

This discrimination is seen most acutely in the personal stories shared by survey participants. According to one respondent, “The day I came out as transgender at work, I was let go. Since transitioning, employment has been difficult, with a 95% reduction in my earnings.” Another respondent reported, “I have over 20 years of experience in my field, yet I cannot even land a part-time retail position.”⁵¹

Over three-quarters of respondents (77%) who had a job in the year prior to the survey said they took steps to avoid mistreatment in the workplace.⁵² And yet, despite this, 30% of those respondents were fired, denied a promotion, or experienced workplace violence related to their gender identity, while 23% experienced other forms of mistreatment such as being told to present as the wrong gender in order to keep their job. Trans employees do not feel safe in their jobs or jobsites.

When trans employees face this discrimination, they overwhelmingly do nothing, with 69% reporting they took no action in response to discriminatory firing. Why? They can't afford a lawyer, they don't believe a lawsuit would fall in their favor, and they don't believe anyone will help or believe them. The resulting job losses and career instability places them at higher risk of exploitation, physical violence, negative mental and physical health outcomes, and police abuse.

As with other types of systemic discrimination against transgender people, this is made worse by the rash of violence and hateful rhetoric directed at the transgender community. Transgender people who miss work due to injury from violence, ongoing effects of PTSD, or other consequences of trauma, we are rarely given the benefit of the doubt by our employers. Violence, whether targeted against an individual or the broader transgender community, can all-too-easily lead to employment actions and firings by unsympathetic employers.

E. Housing

Finally, violence and harassment also have a sustained, long-term effect on the ability of transgender people to find stable housing. According to the 2015 US Transgender Survey, 30% of respondents reported experiencing homelessness at some point in their lives, with 12% having experienced homelessness in the year prior to taking the survey.⁵³ Of respondents who had experienced homelessness in the prior year, more than one-quarter (26%) stated they did not seek housing in a homeless shelter because of fear of being mistreated because they were transgender,⁵⁴ while 52% of

⁵⁰ JAMES, USTS, *supra* note 30 at 140.

⁵¹ JAMES, USTS, *supra* note 30 at 143.

⁵² JAMES, USTS, *supra* note 30 at 154.

⁵³ JAMES, USTS, *supra* note 30 at 177-78.

⁵⁴ JAMES, USTS, *supra* note 30 at 180.

those who had stayed in a shelter reported being victims of verbal harassments (49%), physical violence (19%), sexual assault (17%), or a combination of the three.⁵⁵ As a result, transgender people who find themselves without stable housing find themselves part of a cycle of violence that makes it increasingly difficult to live a normal life. This can be seen perhaps most clearly in the statistics for home ownership among respondents; whereas 63% of adults in the United States reported owning their own homes, only 16% of US Trans Survey respondents lived in a home, apartment, or condo that they owned, with rates of home ownership significantly lower for every single age group.⁵⁶

Conclusion

According to the Williams Institute, there are an estimated 1.6 million Americans aged 13 and up who are transgender.⁵⁷ We live in every state in the nation. We are your child's best friend at school, your barista, your postal workers, your IT department. We are your children, your doctors and nurses, and your ministers. We are human beings who deserve to live in safety. To participate in public life within our communities, the same as every other person. Transgender people are also your constituents.

The members of this committee represent states home to approximately 1.2 million transgender people. It is the responsibility of this committee and all of Congress to create a world where those 1.2 million transgender people, and especially the 300,000 transgender youth, are safe. And that should be true, whether going to the doctor's office or going out to brunch.

Transgender people are part of the fabric of American society. We belong, and we matter.

⁵⁵ JAMES, USTS, *supra* note 30 at 182.

⁵⁶ JAMES, USTS, *supra* note 30 at 177.

⁵⁷ Williams Institute, UCLA School of Law, "Subpopulations: Transgender People," available at <https://williamsinstitute.law.ucla.edu/subpopulations/transgender-people/>

ATTACHMENTS

Attachment 1: National Center for Transgender Equality, *Remembrance Report* (2022).

Attachment 2: Sandy E. James et al., *The Report of the 2015 U.S. Transgender Survey* (2016).

Attachment 3: Biography of Olivia Hunt, Policy Director, National Center for Transgender Equality

Attachment 4: Truth in Testimony Disclosure for Olivia Hunt