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**Williams**  
INSTITUTE

# AT THE INTERSECTION OF HEALTH EQUITY AND THE LAW

TRANSGENDER ANGELENAS LIVING WITH HIV

AYAKO MIYASHITA, AMIRA HASENBUSH, BIANCA D.M. WILSON, ILAN H. MEYER, SHEILA NEZHAD & BRAD SEARS, THE WILLIAMS INST. UNIV. OF CAL. L.A. SCH. OF LA W, HIV LEGAL ASSESSMENT OF NEEDS STUDY: A COMPREHENSIVE SURVEY OF PEOPLE LIVING WITH HIV/AIDS IN LOS ANGELES (2015), <http://williamsinstitute.Law.Ucla.Edu/wp-content/uploads/legal-needs-people-living-with-hiv-los-angeles-county-april-2015.Pdf>.

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# HEALTH EQUITY

Healthy People 2020 defines *health equity* as...

**“attainment of the highest level of health for all people. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities.”**

Healthy People 2020, <http://www.healthypeople.gov/2020/about/foundation-health-measures/Disparities> (citing U.S. Department of Health and Human Services, Office of Minority Health. National Partnership for Action to End Health Disparities. The National Plan for Action Draft as of February 17, 2010 [Internet]. Chapter 1: Introduction. Available from: <http://www.minorityhealth.hhs.gov/npa/templates/browse.aspx?&lvl=2&lvid=34>).

# HEALTH DISPARITIES

Healthy People 2020 defines a *health disparity* as...

**“a particular type of health difference that is closely linked with **social, economic, and/or environmental disadvantage.**”**

Healthy People 2020, <http://www.healthypeople.gov/2020/about/foundation-health-measures/Disparities> (citing U.S. Department of Health and Human Services, Office of Minority Health. National Partnership for Action to End Health Disparities. The National Plan for Action Draft as of February 17, 2010 [Internet]. Chapter 1: Introduction. Available from: <http://www.minorityhealth.hhs.gov/npa/templates/browse.aspx?&lvl=2&lvlid=34>).

# SOCIAL DETERMINANTS OF HEALTH

**Social determinants of health** include, but are not limited to the following:

- Socioeconomic status
- Transportation
- Housing
- Access to services
- Discrimination by social grouping (e.g., race, gender, or class)
- Social or environmental stressors

# EXISTING RESEARCH

**What do we know about **life conditions** for transgender-identified and gender non-conforming individuals?**

Studies suggest the following:

1. Stigma;
2. Prejudice;
3. Violence; and
4. Institutionalized discrimination (health care, housing, employment, education, and legal recognition of their gender).

# EXISTING RESEARCH

**What do we know about **health disparities** among transgender-identified and gender non-conforming individuals?**

Studies suggest the following:

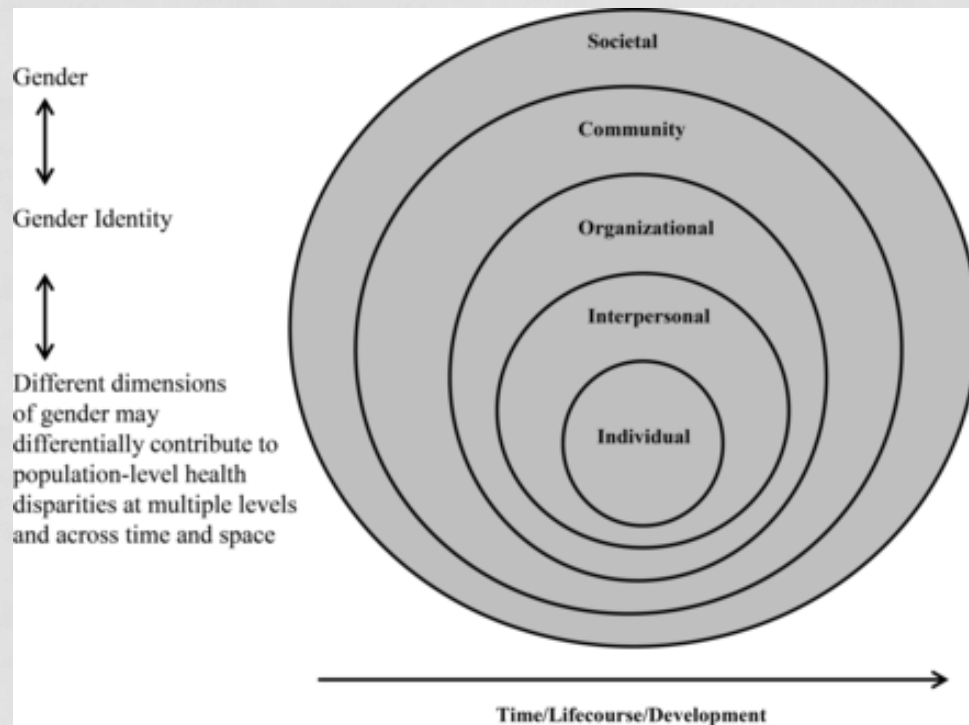
1. Psychological distress;
2. Suicidality;
3. Substance use and abuse;
4. Tobacco use; and
5. HIV and other STIs.

# DATA COLLECTION

- Sex vs. Gender
- Identifying individuals of gender minority status
- Asking individuals to self-identify in US population health research
- Best practices for asking about gender identity
- Identifying practices and policies so as not to assume gender identity status



# A USEFUL FRAMEWORK



Gender pathways are...

- multilevel;
- sociohistorically and culturally dependent; and
- dynamically change over time.

“Counting” Transgender and Gender-Nonconforming Adults in Health Research: Recommendations from the Gender Identity in US Surveillance Group By Sari L. Reisner, Kerith J. Conron, Scout, Kellan Baker, Jody L. Herman, Emilia Lombardi, Emily A. Greytak, Alison M. Gill, and Alicia K. Matthews

See <http://williamsinstitute.law.ucla.edu/research/transgender-issues/making-transgender-count/#sthash.b0PLxEDy.dpuf>



# HIV CRIMINALIZATION

- Use of HIV-specific and general criminal laws to **specifically target** PLWH.
- Prosecution of PLWH based on **outdated and erroneous** beliefs or understanding about HIV.
- Used in **addition** to public health laws.
- Laws **do not require** transmission of HIV.
- Provides **harsher penalties** for PLWH.

# CAL. HEALTH AND SAFETY CODE

## § 120291

- **Unprotected** sexual activity by one who **knows** self to be infected by HIV; **non-disclosure** of HIV-positive status; **specific intent** to infect the other person with HIV.
- Enacted in 1998 with no published criminal cases. Traditional legal research and FOIA requests indicate there have been 2 convictions under this statute.
- Punishment: **Felony** punishable by imprisonment in the state prison for **three, five, or eight** years

# CAL. PENAL CODE § 647f

- Sentence enhancement for previous conviction for **solicitation** and **positive HIV test** result.
- Enacted in 1988 and 2 published criminal cases.
- Punishment: **Felony (16 months, 2 or 3 years)**

# THE LEGAL NEEDS OF PEOPLE LIVING WITH HIV: EVALUATING ACCESS TO JUSTICE IN LOS ANGELES

## Core research questions:

1. Do PLWH in Los Angeles County have legal needs?
2. If PLWH in Los Angeles County have legal needs, are they being met?
3. What are the barriers to addressing the identified legal needs?
4. What is the link between the identified legal needs and health/health care access?

# WHO WE SURVEYED

	LeAN Survey	PLWH in LAC
<b>Sex</b>		
Cis-Male	69%	89%
Cis-Female	21%	10%
Transgender	9%	1%
<b>Age</b>		
40-49	29%	32%
40 or older	82%	75%
<b>Race/ethnicity</b>		
Latino	44%	41%
Black	37%	20%
White	17%	33%
AI/AN	6%	<1%
A/PI	1.6%	3%
<b>Sexual Orientation/Mode of Transmission</b>		
Straight/Heterosexual	35%	10%
GBM/MSM	55%	77%
<b>Living with AIDS diagnosis</b>		
	48%	58%

The study sample focused on particularly vulnerable populations of people living with HIV (“PLWH”).

Respondents were **low-income** and included a greater number of cisgender women, **transgender women, Black-identified** and heterosexual or straight-identified individuals.

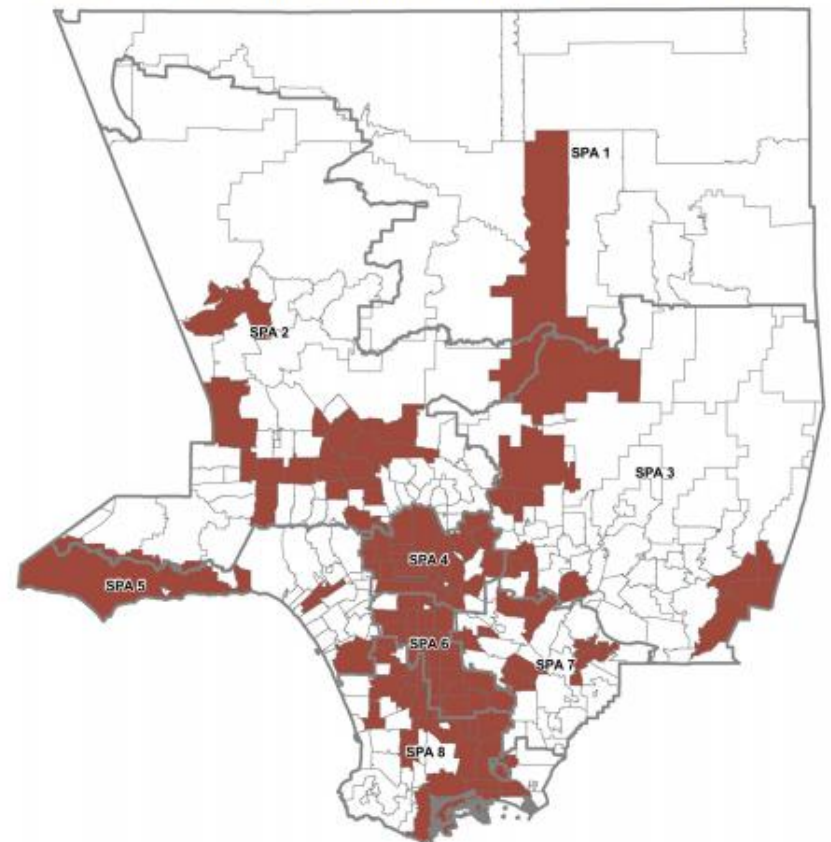
# GEOGRAPHY

Respondents reported residing in **111** unique zip codes spread across L.A. County.

Most represented areas were:

- **Metro** (43%);
- **South** (20%);
- **South Bay** (16%); and
- **San Fernando** (11%).

Figure 4.1: Respondents' Reported Residence by Zip Code and SPA





# INCOME AND EDUCATION



**50%** of respondents reported household incomes of **less than \$10,000** per year.

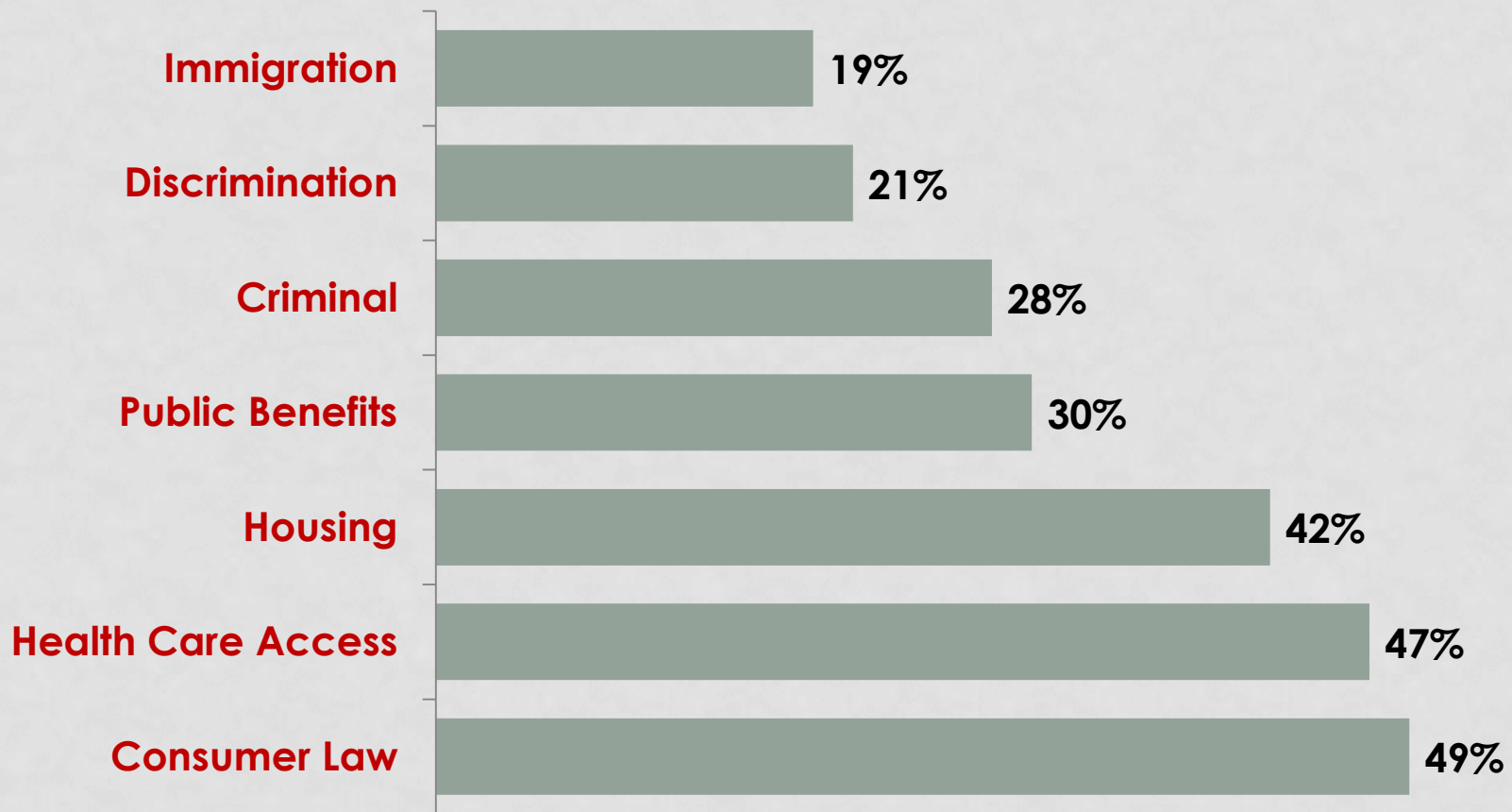
**78%** reported household incomes **under \$20,000** per year.

**57%** of respondents reported a **high school diploma** or less.



# IDENTIFIED LEGAL NEEDS

Figure 1.1: Most Prevalent Legal Issue Areas Reported



# HEALTHCARE ACCESS

Of the 47% of respondents who experienced **challenges accessing health care**...

- 55% reported not getting medical care when needed in the year prior to the survey
- 62% reported not getting medication when needed in the year prior to the survey
- 16% reported not having health insurance or health coverage at the time of the survey
- 32% experienced a lapse in health insurance/health coverage in the five-year period prior to the survey

# HIV-BASED DISCRIMINATION

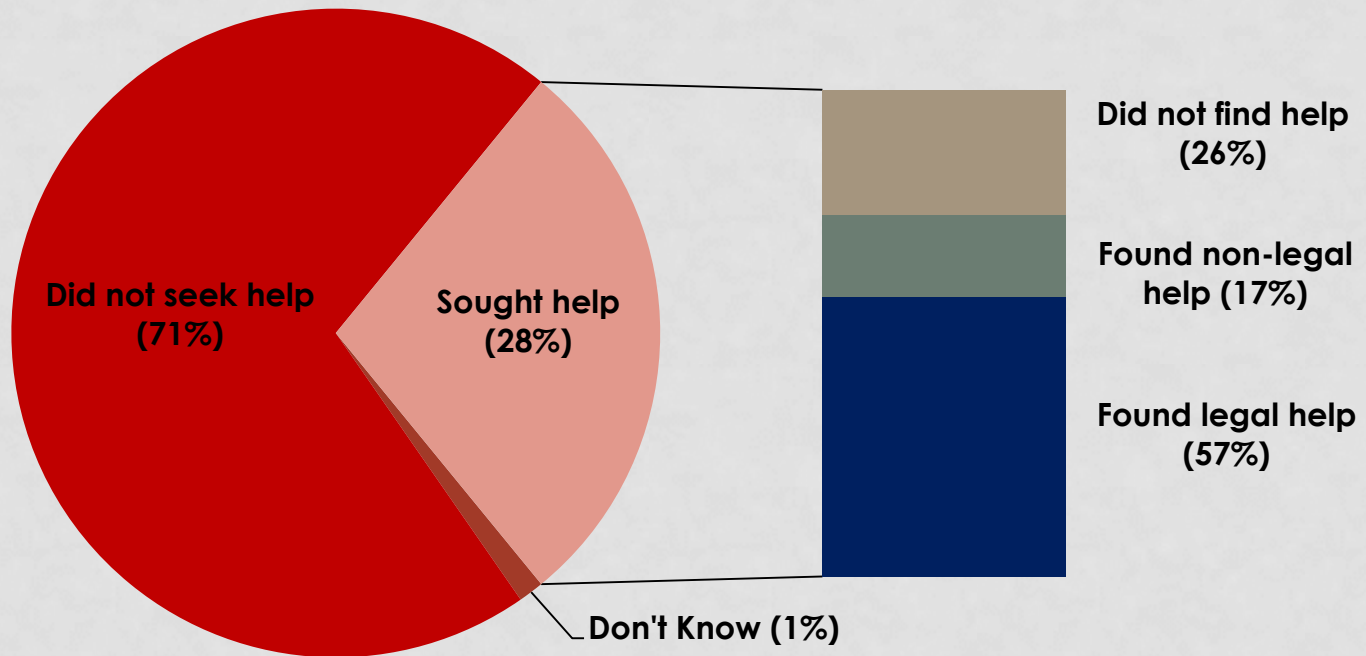
Table 5.2: Experiences of [HIV-Related Discrimination](#) in Housing, Employment and Health Care Settings

		<b>GBM</b>	<b>Cisgender Women</b>	<b>Transgender Women</b>	<b>All Respondents</b>
<b>Housing</b>	<b>One year</b>	10%	11%	3%	10%
	<b>Five Years</b>	12%	12%	9%	12%
<b>Health Care</b>	<b>One Year</b>	5%	4%	<b>9%</b>	5%
	<b>Five Years</b>	11%	6%	<b>12%</b>	10%
<b>Employment</b>	<b>One Year</b>	9%	6%	9%	8%
	<b>Five Years</b>	17%	12%	15%	16%

**31%** of respondents reported experiencing HIV-related discrimination in housing, employment and/or health care settings in the 5-year period prior to the survey.

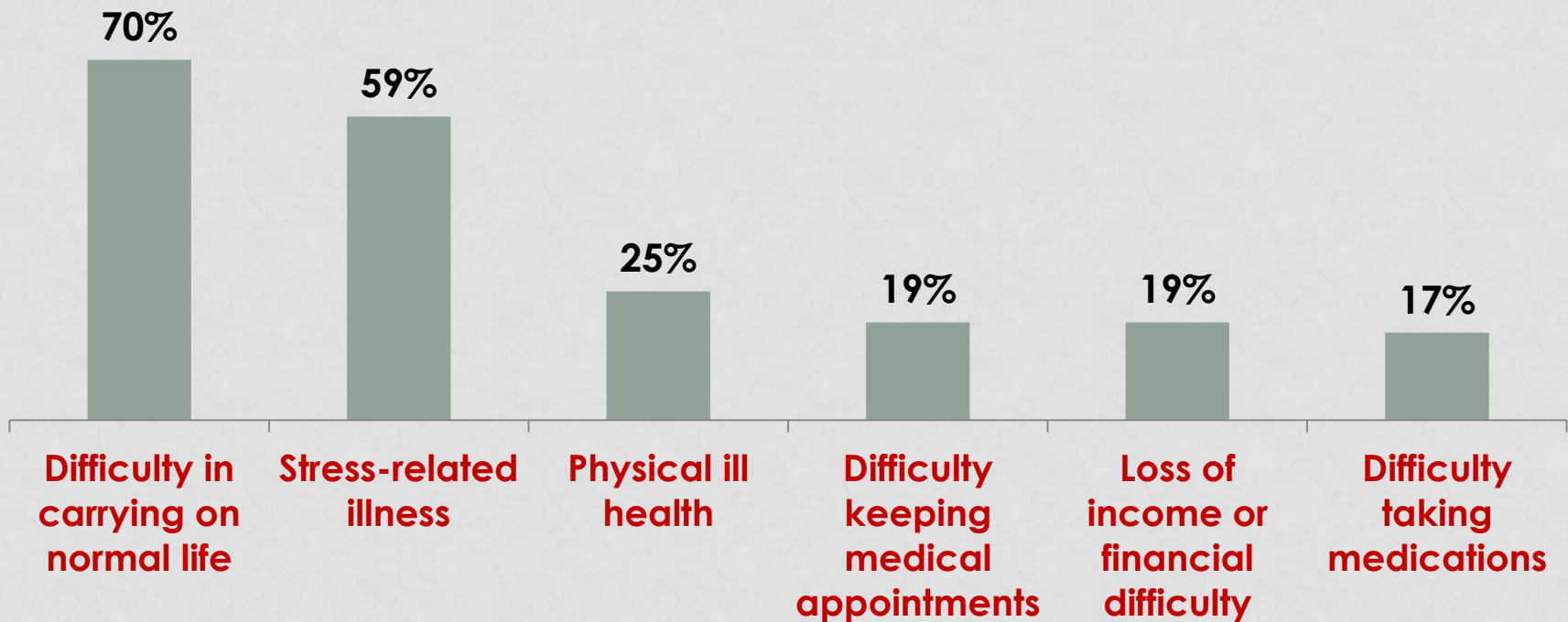
# ACCESSING JUSTICE

**Figure 8.1: Assistance Received Among Those who Sought Help**  
How many looked for a lawyer or legal advisor to help with their most recent legal issue?



# SELF-REPORTED HEALTH IMPACT

Respondents reported experiencing impacts on their health related to their most recent legal need.



# ATTACKED, HARASSED AND SUBJECTED TO CRIME



**Transgender women** were particularly vulnerable to **violent attacks (29%)** and were significantly **more** likely to report being violently attacked than **straight cis\*-men (7%)**.

\*Note: "Cisgender" or "Cis" refers to a person who identifies as the opposite of transgender. This is someone whose current gender identity is the same gender as was assigned to them at birth.

# INTERACTION WITH THE CRIMINAL JUSTICE SYSTEM



**41%** of **transgender women** reported an interaction with the criminal justice system, which was **significantly higher** than cis-women (23%).

16% of respondents reported being incarcerated for 1 week or more in the 5-year period prior to the survey.

Among those respondents, 56% reported experiencing problems associated with their HIV-status during confinement.



# LEGAL INTERVENTIONS

Addressing disparities in HIV treatment and prevention **require** addressing social determinants of health.

**Legal services** can address barriers to the following:

- Access to health care
- Access to medication
- Access to safe and stable housing
- Access to sustained employment
- Access to income and other government benefits
- Access to life supports such as in-home care and other services

**Policy advocacy** requires continued visibility of the transgender community.

# STRATEGIES MOVING FORWARD

- What **strategies** have you learned today that can address health disparities for transgender-identified and gender non-conforming individuals?
- How can your work (direct service, policy and research) **address barriers** resulting from social determinants of health?
- What would it take to implement **lasting change** that addresses impacts at **all levels** (individual, interpersonal, organizational, community and societal) ?
- Who is **missing** from this discussion?

# THANK YOU!

For more **information**, please feel free to contact:

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