

STATE SPOTLIGHT

GEORGIA

DECEMBER 2020

The 2019 Southern LGBTQ Health Survey is a project of the Southern LGBTQ Health Initiative, led by the Campaign for Southern Equality and Western NC Community Health Services.





This report features the voices of 358 LGBTQ people from Georgia

who participated in the 2019 Southern LGBTQ Health Survey, which included responses from 5,617 LGBTQ people across the South and is the largest sample ever of LGBTQ Southerners talking specifically about their health and health care.

The state of Georgia has a checkered past when it comes to its treatment of the approximately 425,000 LGBTQ people residing in the state. Discriminatory legislation is filed in the state legislature almost every year, but advocates and allies have blocked anti-LGBTQ laws for more than a decade. During the 2019-2020 session. unsuccessful bills included one banning medical professionals from providing genderaffirming health care for minors² and one allowing child welfare agencies the ability to block LGBTQ people from adopting or fostering children. In 2016 the state made headlines when lawmakers passed a broad "Religious Freedom Restoration Act," granting businesses a broad license to discriminate against LGBTQ people – but it was vetoed by then-Governor Nathan Deal, a Republican.

While Georgia's state laws leave LGBTQ residents vulnerable to discrimination in core areas of life, momentum for nondiscrimination is building at the local level, with 11 communities enacting municipal-level protections, and several of these passing in 2020 alone.³

The experience of LGTBQ Georgians likely varies

1 https://www.lgbtmap.org/equality-maps/profile_state/CA 2 http://www.legis.ga.gov/Legislation/en-US/display/20192020/HB/1060 3 https://www.freedomforallamericans.org/category/states/ga across the state, as is true across the South. There are cities in Georgia, like Atlanta, that have nondiscrimination protections in place and scored a perfect 100 on the 2019 Human Rights Campaign Municipal Equality Index. However, there are also cities in Georgia like Roswell that received a score of 5 out of 100 in the HRC Equality Index.⁴ We also know that metrics like this tell only part of the story; the daily lived experiences of LGBTQ people in Georgia reflect further layers and nuance and are also shaped by race, gender, class and other aspects of identity and lived experience.

This social, cultural, and political environment impacts the ability of LGBTQ Georgians to access quality and affirming health care in their local communities. The Southern LGBTQ Health Survey is about understanding these specific challenges and then informing tailored strategies to address them and thus ensure that LGBTQ people in the state of Georgia - and across the South - can access the care they need and deserve.

Quality health care is a basic human right, one that every LGBTQ Southerner deserves and should be able to access within their hometowns. Healthcare matters because our health matters - it's a foundational part of all of our lives. It's about how we care for our physical, mental, emotional, and spiritual wellbeing. It's about who we are and who we love.

And it's central to the ultimate vision that drives our work with the Southern LGBTQ Health Initiative: A South where all people have an equal opportunity to thrive.

⁴ https://www.hrc.org/resources/municipal-equality-index

KEY FINDINGS IN GEORGIA

While many of the specific data points from Georgia were consistent with responses from the overall survey data, several state-level findings were notable.

- LGBTQ Georgians are more likely to be **LIVING WITH HIV** than participants from other states in the region, with trans people and people of color disproportionately affected.

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Trans respondents in Georgia report low **QUALITY OF CARE** and negative **PHYSICAL HEALTH** and **MENTAL HEALTH** outcomes including high rates of depression, suicidal ideation, and self harm.

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LGBTQ Georgians fear and experience HARASSMENT AND VIOLENCE due to their LGBTQ identity at alarming rates, especially trans respondents and respondents of color.

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Trans participants in Georgia more often experience **POORER TREATMENT** from providers than cisgender participants in Georgia.

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LGBTQ Georgians are slightly more **POLITICALLY ENGAGED** than participants from other states in the region.

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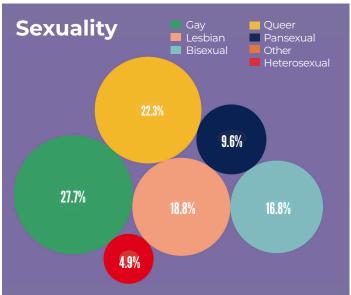
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DEMOGRAPHICS OF CA RESPONDENTS

358 Respondents from Georgia

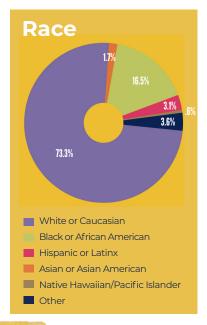












Other Data on LGBTQ Georgians

According to 2019 data from The Williams Institute: Georgia is home to **425,000 LGBTQ people**, 27% of whom are raising children. Georgia's LGBTQ population reflects the state's racial diversity: Black, 28%; Latino/a, 11%; White, 50%; More than one race, 8%; All Other Races, 4%.

LGBTQ adults in Georgia experience disparities in core areas relative to non-LGBTQ adults:



No Access to Health Insurance:

20% – LGBTQ adults 16% – Non-LGBTQ adults



Insufficient Money to Buy Food:

26% – LGBTQ adults 17% – Non-LGBTQ adults



Unemployed:

9% – LGBTQ adults 6% – Non-LGBTQ adults

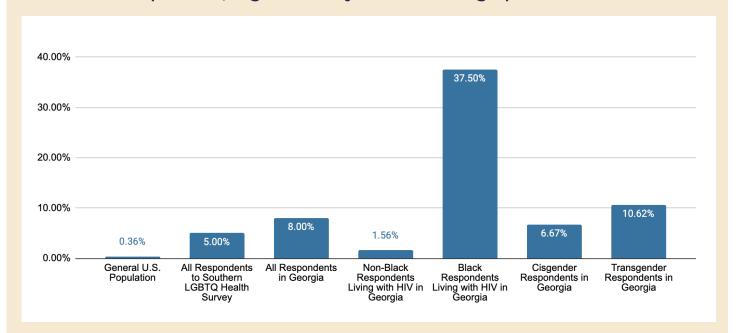
LGBTQ Georgians are more likely to be LIVING WITH HIV than participants from other states in the region, with trans people and people of color disproportionately affected.

This South is the modern-day epicenter of the HIV crisis in the United States. Participants of the Southern LGBTQ Health Survey reported disproportionately high rates of living with HIV. Of our full survey sample, 5% indicated that they were living with HIV, four points higher than the general U.S. population.

In our overall sample, HIV rates were highest among Black or African American respondents (22% are living with HIV); respondents who are 45 years of age or older (9.6%); gay respondents (13.9%); and trans women of color (90.9% of the women in our sample who report living with HIV are trans women of color).

HIV rates were slightly higher in Georgia than the overall sample, with **8% of respondents from Georgia living with HIV**. Trans Georgians and Georgians of color were more likely to be living with HIV than cisgender and white respondents. Georgians also report being less knowledgeable about HIV prevention than our overall sample, with roughly 20% of LGBTQ Georgians reporting *fair* or *poor* knowledge of HIV prevention compared to 16% of the general sample. This was especially true for trans participants from Georgia.

Fig. GA1: Percentage of People Living with HIV in the Survey, in Georgia, and in the General Population, segmented by various demographics



Trans respondents in Georgia report low QUALITY OF CARE and negative PHYSICAL AND MENTAL HEALTH

outcomes, including high rates of depression, suicidal ideation, and self harm.

LGBTQ Georgians report slightly worse health outcomes than LGBTO Southerners overall, with trans respondents from Georgia reporting significantly worse outcomes than cis respondents. While 68% of trans Georgians reported that their mental health was fair or poor, 46% of cisgender respondents from Georgia reported the same. Similarly 37% of trans Georgians reported that their physical health was fair or poor, while 29% of cisgender Georgians reported the same.

Trans respondents in Georgia were more likely than cisgender respondents in Georgia to experience poor mental health outcomes. These disparities were most visible relative to depression – Transgender Respondents (T): 82%, Cisgender Respondents (C): 61%; suicidal ideation (T:53%, C:26%); and self harm (T:40%; C:20%).

Among respondents in Georgia, only 49% of trans respondents report that their experience with mental health care providers has often or always been positive compared to 67% of cisgender

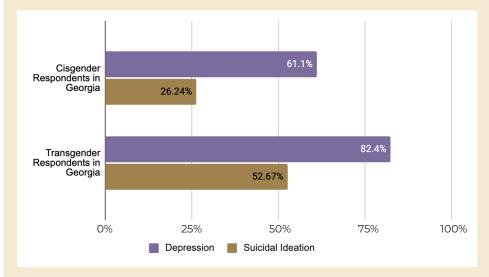
respondents. When asked about their experience of physical health care providers, only 49% of trans respondents report that their experience has often or always been positive while 74% of cisgender respondents report the same.

Overall, 49% of trans Georgians rated their overall quality of care as fair of poor while 24% of cisgender Georgians reported the same.

Many of the LGBTQ people from Georgia who participated in our survey report worrying about losing their health insurance coverage. Trans participants (68%) were more likely than cis participants (55%) from Georgia to report this worry.

These findings merit significant attention and focused efforts to increase access to quality. affirming, and affordable physical and mental health services.

Fig. GA2: Suicidal ideation and depression rates among GA respondents, segmented by trans/cis identity



If you are in need of immediate help, use these resources from anywhere.

- If you are thinking about hurting yourself, call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).
- If you are a LGBTQ youth who is thinking about hurting yourself or is in crisis, call The Trevor Project's 24-Hour Suicide Prevention Hotline at 866-488-7386.
- If you are a transgender person in crisis or needing support, call Trans Lifeline at 877-565-8860.

E LGBTQ Georgians fear and experience HARASSMENT AND VIOLENCE due to their LGBTQ identity at alarming rates, especially trans respondents and respondents of color.



Nearly three-quarters of respondents in Georgia (73%) reported experiencing emotional abuse or harassment due to their LGBTO identity.

Nearly one-quarter of respondents in Georgia (24%) report experiencing physical violence or abuse to their LGBTQ identity. Experiences of both physical (Transgender Respondents (T): 34%; Cisgender Respondents (C): 19%) and emotional (T:80%; C:69%) violence or abuse was higher for trans respondents in Georgia.

Experiences of physical violence were higher for Black respondents from Georgia (37%) than for non-Black Georgians (20%).

Cisgender respondents to the survey report often or always being afraid of physical (17%) and emotional (31%) violence, abuse, or harassment due to their identity. These numbers are alarming and point to a need for increased education and awareness in the region.

Trans respondents from Georgia report an even more pronounced fear of abuse: 42% of trans respondents from the state reported often or always being afraid of physical violence or abuse due to their LGBTQ identity and 60% fear emotional abuse or harassment for the same reason.

Fig. GA3: "I am afraid of experiencing physical violence/abuse due to my LGBTQ identity," segmented by cis/trans identity

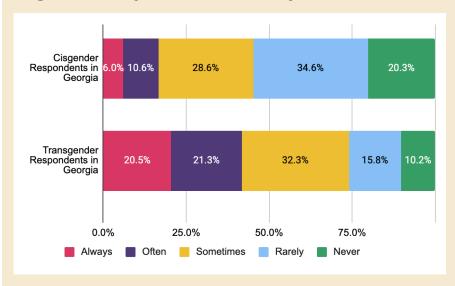
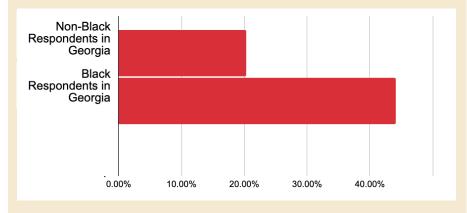


Fig. GA4: "Have you ever experienced violence or abuse due to your LGBTO identity?" segmented by Black and non-Black respondents



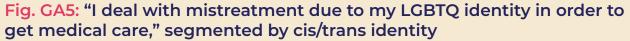


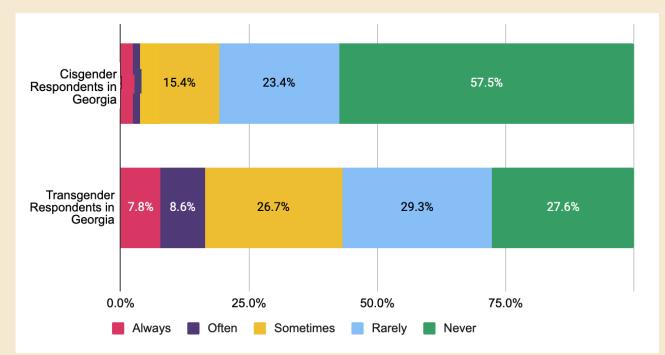
Trans participants in Georgia more often experience POORER TREATMENT from providers than cisgender participants in Georgia.

Transgender respondents in Georgia reported alarming rates of discomfort seeking care in their local communities. Among trans respondents from Georgia, 60% are sometimes, rarely, or never comfortable seeking care. Cisgender participants reported feeling the same way at a rate of 35%.

When they do seek care, trans Georgians also report having to sometimes, often, or always deal with mistreatment in order to get their needs met (44%) at higher rates than cisgender respondents (20%).

Transgender participants in Georgia (30%) were also less likely than cisgender respondents in Georgia (62%) to report affirmatively with Yes when asked if they felt their healthcare needs were being met by their providers.





E LGBTQ Georgians are slightly more POLITICALLY ENGAGED than participants from other states in the region.

Nearly 92% of the people who participated in the 2019 Southern LGBTQ Health Survey are registered to vote. Further, 80% of people surveyed believe that their vote has a positive impact.

Respondents from Georgia reported being registered to vote (93%) at a slightly higher rate than the rate of the overall sample (92%). LGBTO Georgians who participated in the survey were also more likely to report feeling that their vote has a positive impact (84%) than the overall survey sample (79%).

Cis participants in Georgia were slightly more likely to be registered to vote (94%) than cisqender participants (91%), and were more likely to feel like their vote had a positive impact (Cisgender Respondents: 87%; Transgender Respondents: 80%).

Non-Black participants in Georgia (94%) were more likely to be registered to vote than Black respondents from the state (89%). However, Black respondents (87%) were more likely to report feeling that their vote has a positive impact than non-Black participants (83%).

Fig. GA6: 'Yes' responses to "When you vote, do you feel it has a positive impact?" among Georgia respondents and in the total sample

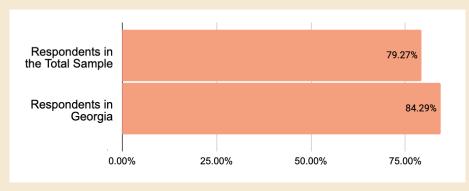
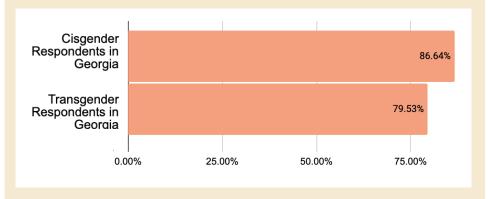


Fig. GA7: 'Yes' responses to "When you vote, do you feel it has a positive impact?" segmented by trans/cis identity

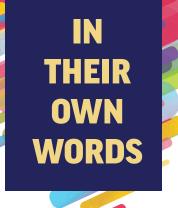


GEORGIA VOTERS, ARE YOU READY FOR JANUARY 5?

There's a critical runoff election in Georgia for two United States Senate seats on January 5, 2021. LGBTQ voters can make a huge impact in these races. Check your voter registration at https://registertovote.sos.ga.gov/GAOLVR.

Here are key dates about the election in Georgia:

- December 31, 2020: Last day of early voting in Georgia
- January 1, 2021: Deadline for request mail-in ballot
- January 5, 2021: Election day; deadline for mail-in ballot



Qualitative Responses from Survey Respondents in

GEORGIA

It is important to hear about LGBTQ Georgians healthcare experiences in their own words. The following quotes are from individuals describing health care experiences in which they did not receive the care that they deserved:

"I had nurses refuse to care for me when I was diagnosed with HIV. I've had specialists refuse to see me because of my status."

"I had a psychiatrist recommend conversion therapy to me. Another doctor suggested I get tested for HIV even though I was a virgin at the time."

"I have had to explain to a doctor that my symptoms were not related to HRT for my transition. Most doctors don't believe that a patient may know more than they do as far as LGBTQ related care."

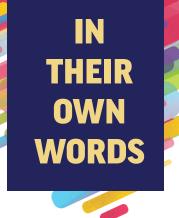
> "I once had a doctor tell me, "you likely have HIV because you are gay", and then proceed to treat me like I was a disease. I was so anxious that I passed out when they were drawing my blood..."

"When
taking blood,
unnecessary
concerns have
been voiced
about my STI
status due to my
bisexuality."

constantly
misgendered
which is
dangerous
and makes
me not want
to go to the
doctor."

"I have had doctors say they would not be willing to work with me because they did not know about transgender medical care."

For more qualitative responses from respondents, read the full report at www.southernequality.org/Survey



Qualitative Responses from Survey Respondents in

GEORGIA

Respondents also shared experiences where they felt supported or affirmed by their provider. Often, these experiences included being addressed with empathy and an understanding of LGBTQ health, while not feeling stigmatized due to their sexual orientation or gender identity.

"The doctor I get my hormones from for HRT...
everyone in his office is very respectful and they
struck a good balance of respecting the fact that
I know about the transition process...but also not
assuming that I knew everything."

"My primary care doctor happily accepted the fact that I was a lesbian and treats me with respect every time I see him."

"The entire experience with working with an LGBTQ affirming health-care provider is worlds above anything I would ever find where I live in middle Georgia. There is no explaining or educating that needs to happen, she is already familiar and experienced with any health care issue I may have."

"My current therapist does not bat an eye when I discuss my sexuality. At 46, it's the first one that hasn't." "I appreciated the understanding given when I first met with the doctor to start my HRT."

For more qualitative responses from respondents, read the full report at www.southernequality.org/Survey

CECRCIA'S LCBTQ LANDSCAPE

Legal Landscape for LGBTQ People in Georgia

- Georgia is one of 29 states where LGBTQ people are not fully protected from discrimination.
- Locally, eleven communities across the state have passed measures protecting LGBTQ people from discrimination in housing, employment, and/or public accommodations, providing protections to a very small portion of the state's population.
- A 2018 PRRI poll shows that 68% of Georgians support nondiscrimination laws related to housing, employment and public accommodations.

LGBTQ Impact of Voting in the Senate Runoff on January 5, 2021

On January 5, 2021 Georgians will vote in a run-off election for two U.S. Senate seats. These seats will determine partisan control of the Senate.

Most squarely and specifically related to LGBTQ dignity and equality is the question of federal legislation like the Equality Act, which would establish comprehensive nondiscrimination protections for LGBTQ Americans.

Republican candidates Sens. Loeffler and Perdue have been vocal opponents of LGBTQ equality, whereas Democratic candidates Jon Ossoff and Rev. Raphael Warnock have been vocal champions for the LGBTQ community.

Need help voting? Visit **www.vote.org/georgia**

Other Campaign for Southern Equality Resources



2018 Southern Trans Health Focus Group Project: A series of focus groups with trans and non-binary Southerners, this project identified widespread barriers to care.

www.southernequality.org/FocusGroup



Trans in the South: A
Guide to Resources
and Services is a
directory of 400+
Southern health and
legal service providers,
coordinated by the
Campaign for Southern
Equality.

www.transinthesouth.org

RECOMMENDATIONS FOR GEORGIA

In closing, we offer recommendations for best practices for combatting the health disparities that LGBTQ Southerners face, with a particular emphasis on key recommendations to address specific challenges in Georgia. We can all do something to ensure that all LGBTQ people can access quality, affirming health care and experience positive health outcomes.

- Everyone can advocate for local, state, and federal policies that guarantee access to LGBTQ-affirming health care and that protect LGBTQ people from discrimination in public accommodations, employment, housing, and healthcare/health care settings.
- Everyone can get tested for HIV and encourage friends, family members, and community members to get tested regularly.
- HIV screening, testing, and treatment (including offering PrEP and PEP) should be integrated into primary care settings.
- Medical institutions should offer telemedicine or teletherapy to patients who are unable to access mental health services in their local communities.

- We should all talk about mental health issues and help reduce the stigma around seeking support and help around mental health needs.
- Everyone can advocate for local, state, and federal policies that promote racial justice and racial equity, including in health care settings.
- Providers should seek out trainings and resources related to anti-racism practices in health care, as well as the intersectional needs of Black transgender people, including primary care and transition-related care.

GET MORE RECOMMENDATIONS IN THE FULL REPORT

The full report includes recommendations that can be led by different community groups, including:

- ◆ Health Care Facilities and Institutions
- Health Care Providers, Medical Support Staff, and Administrative Staff
- Medical Training Institutions
- Mental Health Providers
- LGBTQ Advocacy Organizations and Funders
- ♦ Researchers
- ◆ Government Officials
- Businesses



As we work each day to build a Georgia where LGBTQ people survive and thrive, we also honor those we have lost. In the past four years our community has mourned the deaths of at least seven transgender or gender non-conforming people murdered in Georgia:

Scott/Scottlynn Devore

Felycya Harris

Nino Fortson

Ava Le'Ray Barrin

TeeTee Dangerfield

Scout Schultz

Candace Towns

The community also mourns the passing of LGBTQ Georgians, including youth, who have completed suicide.



Recommended Citation

Bowen, A., A.H. Johnson, C. Harless, M. Nanney, A. Polaski, and J. Beach-Ferrara. 2020. "The Report of the 2019 Southern LGBTQ Health Survey: Georgia State Spotlight." Campaign for Southern Equality: Asheville, NC.

Campaign for Southern Equality

The Campaign for Southern Equality (CSE) is based in Asheville, North Carolina, and works across the South to promote full LGBTQ equality – both legal and lived. Our work is rooted in commitments to empathy and to equity in race, class, and gender.

Western North Carolina Community Health Services

Western North Carolina Community Health Services, Inc. (WNCCHS) is a federally-qualified health center that provides primary healthcare, HIV/AIDS care, and transgender healthcare to residents of Western North Carolina.

Southern LGBTQ Health Initative

The Southern LGBTQ Health Initiative is a collaboration between CSE and WNCCHS that works to achieve health equity for LGBTQ Southerners by increasing access to LGBTQ-friendly primary care, HIV prevention and treatment, transgender health care and support services. Learn about the initiative at: www.southernlgbtqhealthinitiative.org.

Press Inquiries

For media and other inquiries, contact Adam Polaski, Communications Director at the Campaign for Southern Equality, by phone (610-306-7956) or email (adam@southernequality.org).

Don't Miss the Full Report of the 2019 Southern LGBTQ Health Survey

A complete analysis is available in the full 150+ page Report of the 2019 Southern LGBTQ Health Survey, which includes:

- In-depth discussion of respondents' physical health, mental health, health insurance, healthcare behaviors and experiences, experiences with HIV, experiences with gender-affirming hormone therapy, and regionality.
- Detailed description on participant demographics, methodology, and limitations.
- More qualitative responses from participants on their individual experiences with health and healthcare.
- Glossary of terms.
- ◆ Full text of the Survey instrument.
- Appendix with tables of all responses, including demographic cross-tabs.

www.southernequality.org/Survey