COMING OF AGE AS AN LGBTQ SOUTHERNER

Family, Faith, Education & Health

Report of the 2021 Survey of Southern LGBTQ Experiences

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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.

www.southernequality.org

Campus Pride

Campus Pride is the leading national nonprofit organization dedicated to building future leaders and creating safer, more inclusive communities for LGBTQ people and allies at colleges and universities.

www.campuspride.org

Research Inquiries

For inquiries related to this research report or other research projects, contact Austin H. Johnson, Director of the Southern Equality Research & Policy Center at the Campaign for Southern Equality, by phone (828-500-1160) or email (austin@southernequality.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).
We owe a debt of gratitude to the 4,146 LGBTQ people who shared their experiences and time in taking the 2021 Survey of Southern LGBTQ Experiences. We also want to thank our community partners, listed below. This research would not be possible without these organizations and their community leaders, who are building a strong network of LGBTQ people across the South. This project was also made possible by the collaborative efforts of a dedicated team of researchers, project staff and consultants, and Survey Ambassadors.

**Project Leadership**

**Austin H. Johnson, Ph.D.**  
Co-Principal Investigator  
Director, Southern Equality  
Research & Policy Center  
Campaign for Southern Equality  
Assistant Professor of Sociology, Kenyon College

**Abigail Bowen, Ph.D.**  
Co-Principal Investigator  
Data Analyst, Southern Equality  
Research & Policy Center  
Campaign for Southern Equality

**Chase Harless, MSW**  
Program Manager, Southern Equality  
Research & Policy Center  
Campaign for Southern Equality

**Shane Windemeyer**  
Executive Director,  
Campus Pride

**Liz Williams**  
Cover & Graphic Design  
Southern Equality Studios Director,  
Campaign for Southern Equality

**Adam Polaski**  
Layout & Design  
Communications Director,  
Campaign for Southern Equality

**Survey Ambassadors**

- Micaela Zamora
- Kasey Mayfield
- Jennifer Gallienne
- Cookie Woolner
- Robin G. White
- Jaymeson Rivers
- M.A. Rochon

**Community Partners**

- ACLU of Mississippi
- Ban Conversion Therapy Kentucky
- CenterLink
- Equality Florida
- Georgia Equality
- GLAAD
- GLSEN Research Institute
- Mississippi Rising Coalition
- Movement Advancement Project
- National Center for Lesbian Rights
- Prism United
- Tennessee Equality Project
- Southern Fried Queer Pride
- West Virginia Gay & Lesbian Center
- Women’s Rights & Empowerment Network (WREN)
- Youth OUTRight WNC, Inc.
This report highlights the experiences of 4,146 LGBTQ people who participated in the 2021 Southern LGBTQ Experiences Survey.

Population estimates suggest more than one-third of the LGBTQ community in the US resides in the South (Williams Institute 2019), where they are likely to have fewer legal protections and face more anti-LGBTQ policies than their peers in other parts of the country (Harless et al. 2019; Johnson et al. 2020; Movement Advancement Project 2022).

There is a growing trend of conservative lawmakers targeting LGBTQ people with discriminatory legislation that limits their access to vital social resources and institutions, including home and family, faith and spirituality, school and education, recreation and community, and health and well-being. This trend escalated in 2021, with more anti-LGBTQ legislation proposed than in any other year on record (ACLU 2021) and has only continued to increase, with 2022 being marked by some of the most especially cruel anti-transgender attacks in history, including Texas officials classifying trans-affirming care from parents and medical providers as “child abusers.” The US Southeast has been barraged by much higher rates of these discriminatory actions than other regions (Freedom for All Americans 2022).

Lawmakers across the South have attempted to block, and in some cases criminalize, the provision of health care for transgender youth, with some state leaders gesturing toward attempts to limit access to healthcare for transgender adults as well (Ennis 2022; Migdon 2022). Several states have seen proposed legislation intended to block access to public facilities such as restrooms, locker rooms, changing facilities, and accommodations. Nearly every Southern state has grappled with proposed legislation targeting schools that would limit access to educational resources and opportunities for LGBTQ youth, block transgender youth from playing sports with their peers, and outlaw curriculum that includes LGBTQ content, while punishing teachers who discuss it.

Alongside this onslaught of political discrimination, states across the region have renewed efforts to legislate faith-based discrimination, or so-called “religious exemptions.” These exemptions allow individuals working in healthcare institutions, schools and student organizations, adoption

Illustration by Carolyn Rose Grayson
and foster care agencies, and other state-funded entities to deny services to LGBTQ people. A few state legislatures have put forth bills that would block cities and municipalities from creating their own protections for LGBTQ people. In some cases, lawmakers have sought legislation that would prohibit public schools or districts from enacting LGBTQ-inclusive policies, and would punish institutions who provided resources and support to LGBTQ students. A few state legislatures have put forth bills that would block cities and municipalities from creating their own protections for LGBTQ people. In some cases, lawmakers have sought legislation that would prohibit public schools or districts from enacting LGBTQ-inclusive policies, and would punish institutions who provided resources and support to LGBTQ students.

Heroically, Southern LGBTQ organizers defeated much of this onslaught of discrimination in many cases during the 2021 legislative sessions. Local activists and community stakeholders made sure that LGBTQ voices were heard on social media, in public hearings, and on the steps of statehouses across the region. In 2022 advocates again worked on overdrive to defeat these attacks and support community members, although many of the bills were pushed through in 2022, becoming law.

It is vital to note that even when anti-LGBTQ bills are defeated, the mere proposal of such discriminatory policies contributes to internalized stigma, poor mental health, and expectations of poor treatment, thus creating a hostile social climate for LGBTQ people (What We Know Project 2019). An especially cruel and harmful component of the recent string of negative policy proposals, many of these discriminatory legislative actions target LGBTQ youth, as well as the adults in their lives who might offer them support and resources.

In a 2020 article in Journal of Clinical & Adolescent Psychology, Family Scientist Jessica N. Fish writes, “Today’s LGBTQ youth come of age at a time of dynamic social and political change with regard to LGBTQ rights and visibility” (943). The confluence of life course and social climate creates unique challenges for this cohort of young people. In their 2020 National Survey on LGBTQ Youth Mental Health, the Trevor Project found that Southern LGBTQ youth were less likely to report access to LGBTQ acceptance and affirmation at home, school, work, and in the community than their peers in other regions; Southern LGBTQ youth in the study were also more likely to experience suicidal ideation and to attempt suicide than their LGBTQ peers across the country (Trevor Project 2021). In a later online poll, researchers at the Trevor Project found that more than two-thirds of LGBTQ youth nationwide, and especially trans and non-binary youth, experience negative mental health impacts related to debates over anti-LGBTQ legislation (Gonzalez 2021).

This report highlights the experiences of LGBTQ Southerners, with a particular eye on the experiences youth and young adults (ages 18-24) as they have come of age in the US Southeast, during a time of historical cultural and social progress paired with heightened and organized aggression aimed at queer and trans people. Our analysis introduces a cohort of LGBTQ adults, noting the comparisons between the youth in our sample (ages 18-24) and their older peers (ages 25 and older), who have experienced rejection, bullying, and violence as a result of their gender identity or sexual orientation; who have sought and been denied resources or support from parents, teachers, coaches, and
faith leaders; who are coping with experiencing pressure from a variety of authority figures to change or suppress their LGBTQ identity; and who are simultaneously experiencing poor physical and mental health, including heightened suicidality.

In addition to coming of age amid a hostile social climate for LGBTQ people, many of our participants reported experiencing compounding stressors due to their intersecting experiences of marginalization. For example, transgender participants were more likely to experience bullying and violence than cisgender participants, and younger participants were more likely to experience negative mental health outcomes than older participants. We highlight statistically significant differences that emerged between groups in each of the findings sections.

**The Research**

The 2021 Survey of Southern LGBTQ Experiences is a project of the Southern Equality Research & Policy Center and Campus Pride. The goal of the project is to better understand the lived experiences of LGBTQ people across social contexts. The better data we have on this segment of the population, the better equipped our community will be to provide for the needs of LGBTQ Southerners. The self-administered online survey, developed in 2021 by a team of sociologists, political scientists, and community organizers, was completed by 4,146 LGBTQ Southerners between August 3 and December 20, 2021. The survey included demographic questions as well as questions related to home and family, faith and spirituality, school and education, and health and well-being. The survey was available in both English and Spanish. Recruitment took place online through targeted social media advertisements. Our team also hired community research ambassadors to promote the survey to LGBTQ people in their networks throughout the region.

**Participant Demographics**

Survey participants represent a variety of experiences and backgrounds. There are at least 100 participants from each of the 13 Southern states. The average age for the sample is 28 years and over half of the sample (56.23%) is 24 years old or younger. Racially, the sample identifies as White (87.19%), Black (6.76%), multiracial (5.52%), Native American or Alaskan Native (1.77%), Middle Eastern or North African (0.56%), Asian or Pacific Islander (1.92%), or elected to self-describe (1.73%), and 10.15% of the sample is Hispanic. Just under 30% of the sample (29.32%) identified as transgender, and 44.36% of respondents indicated a non-binary gender identity (i.e., non-binary, agender, gender queer, gender fluid, or two-spirit). The most commonly reported sexual orientations in the sample are bisexual (32.07%), queer (27.75%), lesbian (22.10%), and gay (20.30%).

For complete demographic information on the sample, see Appendix A.

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1 Many of the demographic percentages will not total 100% because participants were able to select multiple identities that best describe them.
Key Findings

Coming of Age as an LGBTQ Southerner

Home & Family

- On a scale of 0 (Not At All Supportive) to 100 (Incredibly Supportive), our participants gave their parents/caregivers an average score of 56.37 for support related to sexual orientation and an average score of 51.80 for support related to gender identity. Transgender participants gave parents/caregivers a lower average score (44.12) for support related to gender identity than their cisgender peers who participated (72.67).

- Younger participants (ages 18-24) gave their parents/caregivers a lower average score for support related to both sexual orientation (53.97) and gender identity (45.00) than their peers over the age of 24 who participated in the study (59.15; 60.34).

- Only about one-quarter (25.79%) of our respondents reported receiving support or resources related to their LGBTQ identity from a parent/caregiver. Nearly half of all respondents (46.62%) reported being denied support from parents/caregivers related to their LGBTQ identity. Transgender respondents were more likely to be denied support (60.14%) than cisgender respondents (38.48%).

- Over half of all respondents (58.17%) reported experiencing efforts to repress or change their sexual orientation or gender identity by a parent or caregiver. Transgender participants (68.77%), BIPOC participants (67.57%), and participants ages 18-24 (64.39%) were more likely to experience these efforts than their cisgender (50.83%), white (57.39%), and older peers (51.11%) who participated.

Faith & Spirituality

- Less than five percent (4.74%) of our respondents reported receiving support or resources related to their LGBTQ identity from a faith or spiritual leader. Younger participants, ages 18-24, were less likely to receive this support (3.06%) than their peers over the age of 24 who participated (6.68%).

- Nearly one-third (31.51%) of our respondents reported being denied support or resources related to their LGBTQ identity from a faith or spiritual leader, and transgender respondents (31.51%) were denied this support more often than their cisgender peers (29.26%). BIPOC participants (25.38%) were less likely to be denied this support than their White peers who participated in the study (33.06%).

- Of the participants who identified as spiritual or religious, 68.82% reported being alienated or discouraged from participating in their religious or faith community due to their LGBTQ identity.

- More than one-third (33.87%) of all participants report experiencing efforts to repress or change their sexual orientation or gender identity in a religious setting. Participants ages 18-24 (44.12%) were more likely than their older peers (30.70%) to experience these efforts in a religious setting.
Key Findings

Coming of Age as an LGBTQ Southerner

School & Education

► Less than one-quarter (23.58%) of all respondents reported receiving support or resources related to their LGBTQ identity at school. More than one-quarter (28.30%) of all respondents reported being denied support or resources at school.

► Younger (18-24, 28.29%) and transgender participants (31.11%) were more likely than their older (25+, 18.16%) and cisgender participants (19.58%) to report receiving support at school. At the same time, younger (18-24, 32.67%) and transgender participants (39.75%) were more likely than older (25+, 23.30%) and cisgender participants (21.37%) to report being denied support or resources at school.

► Nearly half (47.77%) of all respondents reported missing days of school because they felt unsafe or uncomfortable related to their LGBTQ identity. More than half reported feeling unsafe at school because of their gender identity (58.08%), while near three-quarters reported feeling unsafe at school because of their sexual orientation (73.06%).

► More than half (59.41%) of all respondents reported experiences of school bullying related to gender identity. A large majority (70.93%) of all respondents reported experiences of school bullying related to sexual orientation.

► Nearly a quarter (22.72%) of all participants reported experiencing physical violence and more than three-quarters (77.70%) reported experiencing verbal or emotional violence their LGBTQ identity. Of those who experienced violence, over half experienced that physical (59.65%) and emotional or verbal violence (63.26%) at school.

► Younger participants were more likely to report experiencing physical (18-24, 70.14%) and emotional or verbal violence (72.23%) at school than their peers ages 25 or older (physical, 51.29%; emotional/verbal, 53.21%).

Health & Well-Being

► On a 1-4 scale, most participants rated their physical health as Fair (43.42%) or Good (37.48%), with an average score of 2.39; and most participants rated their mental health as Poor (28.72%) or Fair (40.17%)

► Younger participants (18-24, 2.37) reported slightly lower physical health than their older peers who participated (25+, 2.42); similarly, younger participants (18-24, 2.02) reported slightly lower mental health than their older peers who participated (25+, 2.14).

► More than half of all respondents reported experiencing suicidal ideation (56.21%), and 13.52% reported attempting suicide at least once. White participants (14.42%) were more likely to report a suicide attempt than BIPOC participants (9.58%)
Demographics

Coming of Age as an LGBTQ Southerner

4,146 Total Respondents

Gender
(Select All That Apply)
Non-binary 26.07%
Agender 15.1%
Woman 44.58%
Man 20.22%
Two-spirit 0.42%
Prefer not to say 0.04%
Gender queer 0.7%
Prefer to self-describe 1.9%

30.2% identify as transgender
(Transgender, Gender Nonconforming, or Non-Binary)

Race
(Select All That Apply)
White or Caucasian 87.19%
Black or African American 6.76%
Native American or Alaska Native 1.77%
Middle Eastern or North African (MENA) 0.56%
Asian or Pacific Islander 1.92%
Multiracial 5.52%
Prefer to Self-Describe 1.73%

Are you Hispanic?
Yes 10.15%
No 89.85%

Sexuality
(Select All That Apply)
Heterosexual 20.30%
Gay 6.83%
Lesbian 7.87%
Bisexual 32.07%
Pansexual 2.74%
Demisexual 3.13%
Queer 22.10%
Asexual 16.53%
Prefer to Self-Describe 27.75%

Finances
56.5% of the sample is 18-24 years old

Faith Background
Previously a part of a faith community. 17.7%
Currently a part of a faith community. 17.8%
Never been a part of a faith community 64.5%

Respondents Live in 13 Southern States
PERCEIVED SUPPORT

Like all diverse populations, LGBTQ people come from a wide range of homes and family dynamics. There are those who experience support in their homes and their neighborhoods, and there are those who do not.

Participants rated their parents’ or caregivers’ support for their sexual orientation and gender identity, from 0 (Not At All Supportive) to 100 (Incredibly Supportive). The average score for parents’ or caregivers’ support of the respondent’s sexual orientation is 56.37. While no statistically significant differences exist across transgender identity or racial identity, we find differences in age groups (P<0.05). Younger participants (18-24, 53.97) rated their parents’ or caregivers’ support of their sexual orientation lower than older respondents (59.15).

Participants gave their parents’ or caregivers’ support of their gender identity an average score of 51.80. Statistically significant differences exist for this measure across transgender identity, race, and age groups. Transgender participants rated this support at 44.12, while cisgender participants rated this support at 72.67. The data suggest that transgender individuals receive less support from their caregivers than cisgender individuals.

Black participants rated parental or caregiver support for gender identity (64.41) higher than participants of other races (50.96). Younger participants (18-24, 45.00) provided lower parental or caregiver support scores for their gender identity than their older peers (60.34).
RECEIVED SUPPORT

Just over twenty-five percent (25.79%) of respondents reported receiving support or resources related to their LGBTQ+ identity from a parent. We find statistically significant differences related to age (P<0.05) and race (P<0.10). Younger participants (18-24, 27.95%) were more likely than older participants (25+, 23.30%), and nonhispanic White respondents (26.53%) were more likely than respondents of another race (23.05%), to report receiving resources or support from a parent. Although BIPOC respondents indicated a higher level of perceived support from their caregivers, they were less likely than nonhispanic White respondents to report receiving actual resource support. This suggests a possible lack of resources or knowledge of resources available to BIPOC families of LGBTQ people.

While a quarter reported receiving support and resources from their caregivers, nearly half (46.62%) of all respondents reported being denied support or resources related to their LGBTQ identity from a parent. We find statistically significant differences across transgender identity, race, and age groups. Transgender respondents (60.14%) were more likely than cisgender respondents (38.48%) to report being denied parental support (P<0.001). Nonhispanic white respondents (45.75%) were less likely than people of another race (50.46%) to report being denied parental support (P<0.05). Younger respondents (18-24, 50.41%) were more likely than their older peers (42.29%) to report being denied parental support (P<0.001).

The discrepancy between the lower levels of perceived support by young nonhispanic White respondents, versus their higher levels of actual resources received, could be a reflection of the heightened needs of young LGBTQ individuals in the face of increased political and social discrimination (Gonzalez 2021). Although they may be receiving support, it may not be precisely in the form that they need.

**Fig 1C. Did this authority figure in your life provide you or deny you support or resources regarding your LGBTQ+ identity?, segmented by age**

<table>
<thead>
<tr>
<th>Segment</th>
<th>Provided Support</th>
<th>Denied Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Sample</td>
<td>25.79%</td>
<td>46.62%</td>
</tr>
<tr>
<td>Respondents Ages 18-24</td>
<td>27.95%</td>
<td>50.41%</td>
</tr>
<tr>
<td>Respondents Ages 25+</td>
<td>23.30%</td>
<td>42.29%</td>
</tr>
</tbody>
</table>
PRESSURE TO CHANGE

Pressure to change one’s sexual orientation and/or gender identity can be detrimental to mental and physical health. For LGBTQ youth, such pressure from caregivers negatively affects crucial adolescent identity development and increases the risk of suicidality, depression, anxiety, and substance use (Fish, 2020).

Over half (58.17%) of all respondents reported experiencing efforts to repress or change their sexual orientation or gender identity by a parent or caregiver.

Transgender participants (68.77%) were more likely than cisgender participants (50.83%) to report experiencing these efforts (P<0.001). Nonhispanic white participants (57.39%) were less likely than participants of another race (67.57%) to report experiencing these efforts (P<0.10). Younger participants (18-24, 64.39%) were more likely than older participants (25+, 51.11%) to report experiencing these efforts (P<0.001).

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Fig. 1D. Have you ever experienced any efforts to repress or change your sexual orientation or gender identity?

Fig. 1D. Experienced efforts to repress or change sexual orientation or gender identity, segmented by age.

Fig. 1E. Have you ever experienced any efforts to repress or change your sexual orientation or gender identity in any of the following contexts?

15.32
Average age at which respondents said they first experienced any efforts to repress or change their sexual orientation or gender identity. The most common age reported was 13 (10.92%). 51.95% of responses fall between 12 and 16 years.
**In Their Own Words**

**Home + Family**

“My parents weren’t supportive at first. Mom sobbed, and Dad said I was going to hell. Then they didn’t talk to me for a couple of weeks. They’ve become more accepting as time has gone on, but my mom still struggles with it. I’ve also been told I was going to hell at 13 years old by a family friend. My whole family gossiped about my orientation when I came out because my mom told everyone without my permission. When I was 15 and holding hands with my girlfriend we were verbally harnessed for being ‘f****ts.'”

“I did not come out as bisexual publicly until I was in my 40s. I myself repressed my sexual orientation and never felt comfortable telling my family. I believe it is crucial to allow young people to grow and evolve at their own rate, in the ways they desire and support them as they reach adulthood.”

“My family is extremely religious, which I found incredibly isolating, judgmental, and detrimental to my mental health and well-being.”

“I was often told that people in the LGBTQ+ [community] will go to hell and all. They even [refer to] LGBTQ+ [people as] propaganda currently at church. I’m obligated to go due to my family. My dad often brags about how he ‘saved a woman from lesbianism.’ I know I will never come out to my parents because of that.”

“I quickly started having suicidal ideation, after having parents and peers try to repress my sexual orientation. LGBT youth are extremely vulnerable in their home/school life.”

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“I quickly started having suicidal ideation, after having parents and peers try to repress my sexual orientation. LGBT youth are extremely vulnerable in their home/school life.”
Faith or spiritual leaders can be important actors in the lives of LGBTQ young people. Their influence can be a positive or negative force depending on whether or not they choose to include LGBTQ people in the communities they serve. As other researchers have found, for many LGBTQ individuals, their parents, caregivers, and communities use religion to justify their negative beliefs about LGBTQ identities (Green et al. 2020).

Not even five percent (4.74%) of our respondents reported receiving support or resources for their LGBTQ identity from a spiritual or faith leader. We did not find statistically significant differences in this variable related to race or transgender identity. We did, however, note that younger participants (18-24, 3.06%) were less likely than their older peers (25+, 6.68%) to report receiving support from a spiritual or faith leader (P<0.001).

A much higher percentage (31.51%) of all respondents reported that a spiritual or faith leader denied them support or resources related to their LGBTQ identity. We find statistically significant differences in this variable related to gender and racial identity, but unrelated to age. Transgender respondents (33.99%) were more likely than cisgender respondents (29.26%) to report this denial of resources and support (P<0.05). Nonhispanic White respondents (33.06%) were more likely than respondents of any other racial group (25.38%) to report this denial (P<0.05); and fewer Black respondents (25.91%) than non-Black respondents (32.08%) reported this denial (P<0.10). Previous research suggests that an LGBTQ person’s experiences of support and denial within faith-based settings are primarily influenced by the level of acceptance within that specific faith community or congregation, not necessarily the religion, denomination, or sect as a whole (Wilkinson & Johnson, 2021). In the context of our survey, this factor may have played a role in the differences we found among race, age, and gender.
EXCLUSION

Being excluded from one’s faith community causes internalized feelings of shame, guilt, and limited self-acceptance among young LGBTQ individuals that may provide a detrimental impact to their long term mental and spiritual well-being (Barringer, 2020). Of the participants who identified themselves as spiritual or religious in our survey, 68.82% reported being alienated or discouraged from participating in their religious or faith community due to their actual or perceived LGBTQ+ identity. We do not find statistically significant differences related to age, gender identity, or racial identity.

PRESSURE TO CHANGE

Faith-based conversion therapy efforts dramatically increase the risk for suicidality among young LGBTQ individuals (Green et al., 2020). Over one-third (33.87%) of all respondents reported experiencing efforts to repress or change their sexual orientation or gender identity in a religious setting. There are no statistically significant differences related to gender or racial identity, but we find that younger participants (18-24, 44.12%) were more likely than their older peers (25+, 30.70%) to experience efforts to repress or change their LGBTQ+ identity in a religious setting (P<0.001).
In Their Own Words

Faith + Spirituality

“Religious leaders are culture leaders. They have the ability to preach acceptance of our community. If they don’t, they’re doing all of us a disservice. We need support on all fronts.”

“I was part of a welcoming and affirming congregation. But arguments in the wider church made me feel sad and unwelcome, and my mom gave an onscreen interview that felt not affirming.”

“Religious experiences growing up (I was raised in a Christian cult) are the reason I did not know or understand my sexual orientation until I was 26 years old. It was never an option for me. I resent the entire institution for what it did to me and my friends.”

“You can be queer and part of a religious group. You can be a part of a religious group and be an ally. There is no reason for bigotry based on religion.”

“I just do not reveal anything about my sexual orientation to anyone I perceive to be religious. Not worth the possible backlash, bewilderment, questions or threat of endangerment.”

“It is often extremely hard and isolating to be part of a faith community and LGBTQ+. There is a lot of shame surrounding it. Efforts need to be made to make the church community and LGBTQ+ community less estranged from each other.”
School authority figures include teachers, administrators, coaches, club advisors, counselors, librarians, resource officers, or nurses. These individuals spend a significant amount of time with students and have the opportunity to be either a source of comfort or a source of apprehension for LGBTQ youth.

Almost a quarter (23.58%) of all respondents reported receiving support or resources related to their gender identity or sexual orientation from an authority figure at school. There are no statistically significant differences related to race. Yet, younger participants (18-24, 28.29%) were more likely than their older peers (25+, 18.16%) to report receiving support at school (P<0.001). Similarly, transgender respondents (31.11%) were more likely than cisgender respondents (19.58%) to report receiving support at school (P<0.001).

A higher percentage of respondents (28.30%), however, reported being denied support or resources related to their gender identity or sexual orientation from an authority figure at school. When examining differences across groups in our data, we find statistically significant differences related to gender, age, and race. Transgender students (39.75%) were more likely than cisgender students (21.37%) to report being denied support or resources (P<0.001). Younger respondents (18-24, 32.67%) were more likely than their older peers (25+, 23.30%) to report being denied support or resources (P<0.001). Black respondents (19.09) were less likely than respondents of other races (29.04%) to report this denial (P<0.05).

The higher levels of denied support than received support suggest that many LGBTQ students may not have allied staff members who are affirming and supportive in their identities, or that they may not have access to affirming and supportive school clubs like Gay-Straight-Alliances (GSAs). Having access to safe and supportive school staff members, as well as affirming school organizations, increases LGBTQ students’ feelings of social belonging and acceptance, while also promoting an inclusive school climate for all students (ACLU, 2011; Project Thrive, 2020).
SAFETY

Every school is expected to keep all of its students safe. This requires actively constructing a culture of respect where diversity is appreciated in all its forms. School systems that lack proactive harassment policies, and/or neglect to enforce them, are putting their LGBTQ students at risk every day (GLSEN, 2020).

Nearly half (47.77%) of all respondents reported missing days of school because they felt unsafe or uncomfortable there due to their actual or perceived LGBTQ+ identity. There are no statistically significant differences based on transgender identity, racial identity, or age. Compared to national estimates of LGBTQ+ school absenteeism, the rates of absenteeism found in our survey of Southern students are substantially higher—in 2019, GLSEN reported that 30%-40% of their LGBTQ+ survey respondents missed school because they felt unsafe due to their actual or perceived LGBTQ+ identity. This discrepancy could be due to traditional Southern norms like conservative Christianity and its hesitancy toward non-heteronormative and non-cisnormative lifestyles (Mann, 2014), as well as the heightened political and cultural discrimination of LGBTQ+ students after GLSEN’s survey in 2019.

More than half (58.08%) of all respondents reported feeling unsafe at school due to their actual or perceived gender identity. There are no statistically significant differences in this experience related to transgender identity, racial identity, or age. Nearly three-quarters (73.06%) of all respondents reported feeling unsafe at school due to their actual or perceived sexual orientation. There are no statistically significant differences in this experience related to gender identity, racial identity, or age.

More than half (59.41%) of all respondents reported being bullied at school or online in a way related to their actual or perceived gender identity. Black respondents (49.49%) were less likely than peers of other racial identities (60.09%) to report gender-based bullying (P<0.05). A large majority (70.93%) of all respondents reported being bullied at school or online in a way related to their actual or perceived sexual orientation. There are no statistically significant differences in orientation based bullying related to age or transgender identity. A smaller percentage of Black respondents (63.43%) than respondents of a different race (71.47%) reported experiencing bullying related to their actual or perceived sexual orientation (P<0.05). This is consistent with previous school bullying research (Fisher et al., 2015), which found that white students are three times more likely to experience bullying at school than students of color.

![Fig. 3C. During your time in school, did you experience any of the following due to your actual or perceived LGBTQ+ identity?](image-url)
VIOLENCE

Nearly a quarter (22.72%) of all respondents reported experiencing physical violence due to their LGBTQ identity. Of the respondents who reported experiencing physical violence, 59.65% reported experiencing that violence at school. There are no statistically significant differences in this experience between cisgender and transgender respondents. We do, however, note differences related to race and age. Fewer Black respondents (44.00%) reported violent incidents at school relative to respondents of non-Black (61.04%) racial identities (P<0.05). Further, younger respondents (18-24, 70.14%) were more likely to report violence at school than their peers (25+, 51.29%) in older age groups (P<0.05).

More than three quarters (77.70%) of all respondents reported experiencing verbal or emotional violence due to their LGBTQ identity. Of those who reported experiencing verbal or emotional violence, 63.26% reported that the violent incident happened at school. Transgender participants (69.01%) were more likely than their cisgender peers (58.63%) to report experiencing verbal or emotional violence at school (P<0.001). Similarly, younger respondents (18-24, 72.23%) were more likely than older respondents (25+, 53.21%) to report experiencing this type of violence at school (P<0.001). There are no statistically significant differences related to race in terms of experiencing verbal or emotional violence at school among our participants.
In Their Own Words

School + Education

“School sports are very important when learning to create relationships and know your abilities. Taking that away from kids that want to play is very harmful to one’s self esteem and self worth. Keeping them from sports will lead to depression and possible suicide. Their blood will be on those legislators’ hands.”

“I took forever to identify [as LGBT] to myself because of what school and church and friends said about LGBT people, and when I finally deconstructed everything I had been told, I finally was able to understand myself.”

“Schools here do not care about trans people at all. If your parents don’t approve then they just treat you like a ‘problem kid.’”

“My public school was allowed to list my “homosexual behavior” as a disciplinary issue on my records. My teachers told parents not to let their children befriend me because I was a bad influence. This was allowed by the school system.”

“Growing up as a child in central Georgia, I was identified by my peers as queer before I figured it out for myself, and it led to daily harassment, bullying, and physical abuse by other students that was explicitly permitted by school staff and educators.”

“I was fortunate to have as my English teacher sophomore year of high school, the first openly gay teacher in the state of Kentucky. He introduced me to both the concept of being gay (with understandably a very positive valence) and told our class about a transgender student he had had some years ago. From what I recall of the telling of the story of this student, it was very matter of fact; that they left for summer break one year as having been a boy student, and came back a girl student, with a new name and using the new, correct bathrooms. It was perhaps, with hindsight, not the most progressive way to talk about queer issues, but it was importantly not negatively valenced at all, it was just, something that Could Happen. The normalcy of it really stuck with me.”
Social stigmatization and exclusivity can significantly increase young LGBTQ individuals’ emotional and physical health risks (Gonzalez 2021). Discriminatory harassment legislation and homophobia from school boards in states across the South increases those risks.

**PHYSICAL HEALTH**

Most participants rated their physical health as “Fair” (43.42%) or “Good” (37.48%), with an average score of 2.39 on a 1-4 scale. There are no statistically significant differences between transgender and cisgender Southerners or between BIPOC and white Southerners, which contrasts with prior research that reports substantially lower ratings of physical health from transgender and nonbinary individuals (Dinger et al., 2020). There was a slight difference, that was statistically significant (P<0.10), between LGBTQ young adults in the region (18-24, 2.37) and the higher self-reported physical health scores of their older peers (25+, 2.42).
MENTAL HEALTH

Most participants rated their mental health as “Poor” (28.72%) or “Fair” (40.17%), with an average score of 2.08 on a 1-4 scale. These poor mental health ratings are most likely related to the relative lack of support received at home, in faith-based communities, and at school. There are no statistically significant differences between transgender and cisgender Southerners or between BIPOC and white Southerners. Again, there was slight difference, that was statistically significant (P<0.05), between LGBTQ young adults in the region (18-24, 2.02), and the higher self-reported mental health scores of older respondents (25+, 2.14)

SUICIDALITY

More than half of our participants (56.21%) reported experiencing suicidal ideation, and 13.52% reported attempting suicide at least once. With regard to suicidal ideation, we found no statistically significant differences related to gender, race, or age. However, our data show a statistically significant (P<0.05) difference between white participants' suicide attempt rate (14.42%) and BIPOC participants' suicide attempt rate (9.58%). As LGBTQ people, especially LGBTQ youth, who receive affirming support from caregivers were less likely to experience suicidality (Trevor Project, 2021), this racial differential in suicidality could reflect the higher level of perceived support reported by BIPOC participants.

Fig. 4C. Please rate your overall mental health.

Fig. 4D. I have people I can talk to about issues I have as an LGBTQ person.

Fig. 4E. I feel socially isolated because of my LGBTQ identity.

Fig. 4F. Did you have any of these mental health experiences in that past 12 months?
In Their Own Words

Health + Wellbeing

“Not being able to receive possibly life-saving care because of my gender or sexuality is one of my greatest fears. The possibility of being discriminated against at the doctor has also kept me from pursuing care for years now.”

“I don’t feel that doctors or any medical professional have the right to refuse treatment of any individual for any reason, especially personal beliefs; that’s why they call them personal beliefs – they’re personal and can’t be imposed on others.”

“Health + Wellbeing

“I was discriminated against [while seeking] healthcare when I was about 23. I never went to the doctor again for at least 10 years because I didn’t want to experience that again.”

“I have never been fully honest with a doctor – a person I should be able to trust – because of my sexuality and identity. If I tell them everything, I’m scared that they’ll refuse to treat me, or that they’ll dismiss my symptoms.”

“For many members of the LGBTQ+ community, access to medical treatment is literally lifesaving. Whether it’s gender-affirmative treatment for transgender people, treatment or prevention for HIV/AIDs, reproductive or sexual organ health, medical care is critical for the community. Yet doctors across the country are told they don’t have to service LGBTQ+ people if it “goes against their moral or religious beliefs,” and the ability for trans people to get affirmative care is always being tried and tested. On top of that, we are always fighting against conversion therapy and other practices that contribute to mental health issues in the LGBTQ+ community.”

“I already don’t get taken seriously for my chronic pain/fatigue and mental health issues by most doctors (for a combination of being AFAB [assigned female at birth] and transgender). This makes it easier to discriminate openly, whereas currently they do it more covertly.”

“I don’t feel that doctors or any medical professional have the right to refuse treatment of any individual for any reason, especially personal beliefs; that’s why they call them personal beliefs – they’re personal and can’t be imposed on others.”
The 2021 Southern LGBTQ Experiences Survey revealed the mental and physical health struggles, social isolation, and marginalization experienced by community members across the LGBTQ South. Thousands of individuals throughout the region are not getting the social support they need and deserve at home, in schools, and in their communities. Especially for LGBTQ individuals with intersecting marginalized identities, this lack of support and inclusion is disempowering, and may cause detrimental harm to their mental and physical wellbeing.

Further, this report uncovered a troubling trend of younger members perceiving and receiving less support (emotional, mental, physical) than older respondents. As the social climate rapidly changes in the South for the LGBTQ community – a result of a barrage of disturbing legislative attacks on youth, the passing of policies that allow various institutions to skirt around civil rights laws, and attempts by schools to erase non-heteronormative, non-cisnormative, and non-white identities – it is apparent that many young LGBTQ individuals are reporting worse experiences. In taking note of this general decline in wellbeing of an entire social group, it is important to ponder the real intentions and outcomes of such political strategies that attack vulnerable populations. Who wins? Who loses? How?

Considering both the findings of this report and the anti-LGBTQ sentiment among many school boards and decision makers across the South, it is clear that much of the harm experienced by younger LGBTQ individuals is in school. Not only do all students deserve to feel safe and supported at school, but it is also their civil right under Title IX of the Educational Amendments of 1972. It is the professional duty of school boards, administrators, faculty, and staff to advocate for the the physical and emotional safety of each and every student, regardless of their gender identity and sexual orientation. It is time for schools across the South to protect the rights and wellbeing of the young students they agreed to serve.

Regardless of the political and cultural attacks in the South, and the lack of protections from the institutions we rely on as Southerners, the LGBTQ community in the South is truly that – a community, one with an overwhelming amount of love, acceptance, joy, and beauty. Our strength, as LGBTQ Southerners and our allies, is and has always been found in the support we show for one another. In these times of uncertainty and varying amounts of hostility, our community will continue to rely on each other’s love and support. Until then, we ask the world to do the same.

Illustrations by Carolyn Rose Grayson
School policies should take a proactive approach to inclusion by setting the stage with a mission statement against discrimination of LGBTQ students. Explicitly including LGBTQ identities in school policies will help maintain an affirming culture for students and staff, as well as provide a foundation upon which to create future anti-discrimination policies.

**Example:** “Maryland schools have a history of commitment to educating all students to reach their highest potential. School safety is a vital component of that commitment. Safety and prevention efforts, long the hallmark of Maryland’s success, have provided students with safe, respectful, engaging, and welcoming environments in which to grow and learn. In growing numbers transgender and gender non-conforming students are becoming more comfortable with who they are and are more visible in schools. Providing schools with information, support, and best practices is an important step in assuring welcoming, caring, respectful and affirming environments for all students.” (Maryland State Dept. of Education, 2015, pg. 5)

School staff should be skilled at working in culturally diverse classrooms, including working with LGBTQ students. School policies should be committed to the continuing education of their staff in order to best serve the needs of their students.

**Example:** “The board believes a strong relationship exists between the quality of education provided to students and the competency and training of all personnel employed by the school system. The board places a high priority on securing the most competent personnel available and, once they are employed, providing them with opportunities for professional growth and development throughout their careers. The goal of professional and staff development programs and opportunities for licensed professional employees and support staff is to improve the instructional program and create a safe learning environment for all students by improving and expanding the skills of the professional staff and support personnel.” (Buncombe County Schools NC, 2018, pg. 1)
Recommendations

School privacy policies should express the school’s obligation to uphold FERPA, as well the right of students to disclose information about their gender identity and sexual orientation when/if it feels right to them. Decisions about how ‘out’ to be are among the most personal and sensitive choices that an LGBTQ individual can make. If a school discloses that information without the student’s consent, they have taken away the student’s power of self-determination and could expose them to unwanted attention and violence.

**Example:** “Except as set forth herein, school personnel should not disclose information that may reveal a student’s transgender status. As provided in FERPA, only school employees with a legitimate educational need should have access to a student’s records or the information contained within those records. Transgender students are permitted, as are all students, to discuss and express their gender identity and expression openly and decide when, with whom, and how much of their private information to share with others.” (Charlotte-Mecklenburg Schools, NC, 2013, Section JICK-R, (C.))

As every family is different, school policies should not assume that all families are supportive of their child’s gender identity and should instead allow the student to determine what level of family involvement is right for them.

**Example:** “In deciding whether to involve a student’s parents or guardian in developing a plan, school staff should work closely with the student to assess the degree to which, if any, the parent or guardian will be involved in the process and must consider the health, wellbeing and safety of the student.” (Charlotte-Mecklenburg Schools, NC, 2013, Section JICK-R, (C.))

Schools should respect the affirmed names, gender markers and pronouns of all students. (Also referred to as ‘chosen name’ or ‘preferred name’.) Policies should explicitly state the school’s commitment to respecting the affirmed names and pronouns of every student. If a student’s legal name is different from their affirmed or chosen name, the legal name should only be used when it is legally required. All other lists, records and documents should use the affirmed name, in order to respect the student’s identity and protect their privacy.

**Example:** “Notwithstanding the name and/or sex in a student’s permanent education record, school staff shall address students by the name and pronoun corresponding to their gender identity. Students are not required to obtain a court ordered name change or to change their permanent education records as a prerequisite to being addressed by the name and pronouns that correspond to their gender identity.” (Charlotte-Mecklenburg Schools, NC, 2013, Section JICK-R, (D.))
Anti-bullying school policies should explicitly include how to report bullying and harassment, as well as what steps the school will take to address the report. LGBTQ students feel safe at school when they know the perpetrators will be held accountable, and that the school will take steps to prevent retaliation.

Example: “Any staff member who witnesses student-to-student discrimination, harassment, intimidation and/or bullying or who has knowledge or information or receives notice that a student may have been the victim of such behavior by another student is required to promptly verbally report the alleged act to the RFA liaison(s) or to the principal/designee within one (1) school day and submit the Complaint Reporting Form describing the incident to the RFA liaison or the principal/designee no later than two (2) school days after making the verbal report. The principal/designee must ensure that hard copies of the Complaint Reporting Forms are readily available... Students, parents, and individuals other than staff may report allegations of student-to-student discrimination, harassment, intimidation and/or bullying verbally or in writing, including by submitting the Complaint Reporting Form to the principal/designee, RFA liaison, or any other school staff member, for gender-based conduct notifying the Title IX Coordinator (by phone, email, or in person via the information listed in Section IX below), or via the online portal (available at https://www.nycenet.edu/bullyingreporting).” (NYC Department of Education, 2021, pg. 4)

All students have a First Amendment right to dress in a manner that is consistent with their gender identity, as long as it complies with the school’s dress code. Schools should have blanket dress code policies that are not organized by gender.

Example: “Permit all students to wear any clothing that is appropriate for students under the school dress code, regardless of the student’s gender or gender identity.” (Maryland Department of Education, 2015, pg. 9)
School athletic policies should ensure that every student be allowed to play sports with groups that match their gender identity. With several states taking action against transgender students playing sports that align with their gender identity, it is imperative that schools explicitly outline how they plan to affirm gender identities during athletic eligibility and registration processes.

Example: “Should the [state athletic association] receive a timely petition from a member institution challenging a student’s participation in a sex-segregated activity consistent with his or her gender identity, or, although not required, a student seeks to preemptively confirm his or her eligibility, it will review that student’s eligibility for participation by working through the procedure set forth below:

a. The [state athletic association] will convene an eligibility committee specifically established to hear gender identity appeals. The Gender Identity Eligibility Committee will be comprised of a minimum of three of the following persons one of whom must be from the physician or mental health profession category:

i. Physician with experience working with youth whose gender identity different than the sex they were assigned at birth, and familiar with the World Professional Association for Transgender Health (WPATH) Standards of Care and other standard-setting documents.

ii. Licensed mental health provider with experience working with youth whose gender identity different than the sex they were assigned at birth, and familiar with the World Professional Association for Transgender Health (WPATH) Standards of Care and other standard-setting documents.

iii. School administrator from a non-appealing school.

iv. [State athletic association] staff member.

v. A gender-affirming advocate familiar with issues affecting youth whose gender identity different than the sex they were assigned at birth.” (National Center for Lesbian Rights, 2016, pg. 3)

Culturally diverse and inclusive school curriculums are play a critical role in shaping the culture of the school and emotionally supporting students who are LGTBQ, transitioning, or questioning their sexual orientation or gender identity. As always, school policies should explicitly state their goals of creating an inclusive school culture, including what they teach in class.

Example: “Instruction in social sciences shall include the early history of California and a study of the role and contributions of both men and women, Native Americans, African Americans, Mexican Americans, Asian Americans, Pacific Islanders, European Americans, lesbian, gay, bisexual, and transgender Americans, persons with disabilities, and members of other ethnic and cultural groups, to the economic, political, and social development of California and the United States of America, with particular emphasis on portraying the role of these groups in contemporary society.” (California Department of Education, 2011)


### Appendix A

#### Sample Demographic Information

<table>
<thead>
<tr>
<th>State</th>
<th>Freq.</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alabama</td>
<td>235</td>
<td>5.67%</td>
</tr>
<tr>
<td>Arkansas</td>
<td>149</td>
<td>3.59%</td>
</tr>
<tr>
<td>Florida</td>
<td>566</td>
<td>13.65%</td>
</tr>
<tr>
<td>Georgia</td>
<td>491</td>
<td>11.84%</td>
</tr>
<tr>
<td>Kentucky</td>
<td>297</td>
<td>7.16%</td>
</tr>
<tr>
<td>Louisiana</td>
<td>131</td>
<td>3.16%</td>
</tr>
<tr>
<td>Mississippi</td>
<td>170</td>
<td>4.10%</td>
</tr>
<tr>
<td>North Carolina</td>
<td>539</td>
<td>13.00%</td>
</tr>
<tr>
<td>South Carolina</td>
<td>279</td>
<td>6.73%</td>
</tr>
<tr>
<td>Tennessee</td>
<td>381</td>
<td>9.19%</td>
</tr>
<tr>
<td>Texas</td>
<td>621</td>
<td>14.98%</td>
</tr>
<tr>
<td>Virginia</td>
<td>151</td>
<td>3.64%</td>
</tr>
<tr>
<td>West Virginia</td>
<td>136</td>
<td>3.28%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>4146</strong></td>
<td></td>
</tr>
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</table>

**Age**

<table>
<thead>
<tr>
<th>Age</th>
<th>Freq.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average</td>
<td>28.22</td>
</tr>
<tr>
<td>Min</td>
<td>18</td>
</tr>
<tr>
<td>Max</td>
<td>100</td>
</tr>
</tbody>
</table>

56.23% of the sample is 24 or younger

<table>
<thead>
<tr>
<th>Race</th>
<th>Freq.</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>3587</td>
<td>87.19%</td>
</tr>
<tr>
<td>Black</td>
<td>278</td>
<td>6.76%</td>
</tr>
<tr>
<td>Native American or Alaska Native</td>
<td>73</td>
<td>1.77%</td>
</tr>
<tr>
<td>MENA</td>
<td>23</td>
<td>0.56%</td>
</tr>
<tr>
<td>API</td>
<td>79</td>
<td>1.92%</td>
</tr>
<tr>
<td>Multiracial</td>
<td>227</td>
<td>5.52%</td>
</tr>
<tr>
<td>Self Describe</td>
<td>71</td>
<td>1.73%</td>
</tr>
</tbody>
</table>
# Appendix A

## Sample Demographic Information

### Hispanic

<table>
<thead>
<tr>
<th></th>
<th>Freq.</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>419</td>
<td>10.15%</td>
</tr>
<tr>
<td>No</td>
<td>3710</td>
<td>89.85%</td>
</tr>
</tbody>
</table>

### Trans Identified

<table>
<thead>
<tr>
<th></th>
<th>Freq.</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, Trans</td>
<td>1166</td>
<td>29.32%</td>
</tr>
<tr>
<td>No, Cis</td>
<td>2207</td>
<td>55.49%</td>
</tr>
<tr>
<td>No, Prefer to self describe</td>
<td>217</td>
<td>5.46%</td>
</tr>
<tr>
<td>Not sure</td>
<td>387</td>
<td>9.73%</td>
</tr>
</tbody>
</table>

### Current level of financial independence

<table>
<thead>
<tr>
<th></th>
<th>Freq.</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completely independent from parents/other caregivers</td>
<td>1985</td>
<td>48.69%</td>
</tr>
<tr>
<td>Partially dependent on parents/caregivers</td>
<td>1380</td>
<td>33.85%</td>
</tr>
<tr>
<td>Completely dependent from parents/other caregivers</td>
<td>712</td>
<td>17.46%</td>
</tr>
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</table>

### What is your current level of individual income?

<table>
<thead>
<tr>
<th></th>
<th>Freq.</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 10k</td>
<td>1501</td>
<td>37.30%</td>
</tr>
<tr>
<td>10k-19k</td>
<td>598</td>
<td>14.86%</td>
</tr>
<tr>
<td>20k-29k</td>
<td>464</td>
<td>11.53%</td>
</tr>
<tr>
<td>30k-39k</td>
<td>393</td>
<td>9.77%</td>
</tr>
<tr>
<td>40k</td>
<td>280</td>
<td>6.96%</td>
</tr>
<tr>
<td>50k</td>
<td>224</td>
<td>5.57%</td>
</tr>
<tr>
<td>60k</td>
<td>170</td>
<td>4.22%</td>
</tr>
<tr>
<td>70k</td>
<td>126</td>
<td>3.13%</td>
</tr>
<tr>
<td>80k</td>
<td>63</td>
<td>1.57%</td>
</tr>
<tr>
<td>90k</td>
<td>49</td>
<td>1.22%</td>
</tr>
<tr>
<td>100k</td>
<td>94</td>
<td>2.34%</td>
</tr>
<tr>
<td>More than 150k</td>
<td>62</td>
<td>1.54%</td>
</tr>
</tbody>
</table>
### Appendix A

**Sample Demographic Information**

<table>
<thead>
<tr>
<th>Education</th>
<th>Freq.</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did not graduate high school</td>
<td>112</td>
<td>2.75%</td>
</tr>
<tr>
<td>High school diploma or GED</td>
<td>777</td>
<td>19.11%</td>
</tr>
<tr>
<td>Some college</td>
<td>1329</td>
<td>32.69%</td>
</tr>
<tr>
<td>Associate or trade degree</td>
<td>288</td>
<td>7.08%</td>
</tr>
<tr>
<td>Bachelor's degree</td>
<td>933</td>
<td>22.95%</td>
</tr>
<tr>
<td>Master's degree</td>
<td>473</td>
<td>11.63%</td>
</tr>
<tr>
<td>Ph.D.</td>
<td>85</td>
<td>2.09%</td>
</tr>
<tr>
<td>J.D., M.D., or other professional degree</td>
<td>69</td>
<td>1.70%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender Identity</th>
<th>Freq.</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Man</td>
<td>1064</td>
<td>26.27%</td>
</tr>
<tr>
<td>Woman</td>
<td>1806</td>
<td>44.58%</td>
</tr>
<tr>
<td>Non-binary</td>
<td>1056</td>
<td>26.07%</td>
</tr>
<tr>
<td>Agender</td>
<td>126</td>
<td>3.11%</td>
</tr>
<tr>
<td>Gender queer</td>
<td>331</td>
<td>8.17%</td>
</tr>
<tr>
<td>Gender fluid</td>
<td>267</td>
<td>6.59%</td>
</tr>
<tr>
<td>Two-spirit</td>
<td>17</td>
<td>0.42%</td>
</tr>
<tr>
<td>Prefer to self-describe</td>
<td>158</td>
<td>3.90%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>26</td>
<td>0.64%</td>
</tr>
</tbody>
</table>

**Which of the following best describes your sexual orientation? Select all that apply**

<table>
<thead>
<tr>
<th>Sexual Orientation</th>
<th>Freq.</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asexual</td>
<td>319</td>
<td>7.87%</td>
</tr>
<tr>
<td>Bisexual</td>
<td>1300</td>
<td>32.07%</td>
</tr>
<tr>
<td>Demisexual</td>
<td>277</td>
<td>6.83%</td>
</tr>
<tr>
<td>Gay</td>
<td>823</td>
<td>20.30%</td>
</tr>
<tr>
<td>Lesbian</td>
<td>896</td>
<td>22.10%</td>
</tr>
<tr>
<td>Pansexual</td>
<td>670</td>
<td>16.53%</td>
</tr>
<tr>
<td>Queer</td>
<td>1125</td>
<td>27.75%</td>
</tr>
<tr>
<td>Straight or heterosexual</td>
<td>127</td>
<td>3.13%</td>
</tr>
<tr>
<td>Prefer to self-describe</td>
<td>111</td>
<td>2.74%</td>
</tr>
</tbody>
</table>