

MOTION BY SUPERVISORS HILDA L. SOLIS

June 14, 2022

AND SHEILA KUEHL

**Care with Pride: Establishing a Gender Health Program in Los Angeles County**

In honor of Pride month, the Los Angeles County Board of Supervisors (the Board) recognizes the resiliency and joy of the LGBTQ+ community. It is also important to acknowledge that the celebration of Pride happens in the context of a long history of discrimination faced by LGBTQ+ people that unfortunately continues to this day. In the past year alone, discourse and legislation specifically targeting LGBTQ+ people have played out on a national platform, as legislation in many other States now specifically limits transgender and nonbinary people’s access to necessary medical services. Los Angeles must stand in sharp contrast to these discriminatory actions and make clear its commitment to supporting the wellbeing of the LGBTQ+ community. The County recognizes the importance of meaningful investment in providing affirming and responsive medical services for transgender and nonbinary people of all ages within the LA County Department of Health Services (DHS) and all of its departments.

In 2017, it was estimated that 5.3% of Californian adults, and an even larger

MOTION

SOLIS \_\_\_\_\_

KUEHL \_\_\_\_\_

HAHN \_\_\_\_\_

BARGER \_\_\_\_\_

MITCHELL \_\_\_\_\_

percentage of youth, identified as LGBTQ+, with more recent data suggesting that LGBTQ+ people currently represent an even larger percentage of our population<sup>1</sup>. The data also suggests that due to inequities and discrimination, LGBTQ+ individuals are overrepresented in certain areas. For example, a 2014 study noted that LGBTQ+ youth make up 19% of youth in Los Angeles County's foster care system and 40% of LA County youth experiencing homelessness<sup>2</sup>.

LGBTQ+ people, particularly transgender women of color, often experience discrimination, exclusion, harassment, and violence, which frequently results in lasting consequences across their lifetimes. Data indicates that due to these experiences, LGBTQ+ people are less likely to have stable housing, employment, and access to private insurance<sup>3</sup>. A U.S. survey of transgender people completed in 2015 found that 39% of transgender respondents experienced significant psychological distress in the past 30 days, compared to 5% of the general population<sup>4</sup>. Specifically, regarding health, the same survey found that 23% of participants shared that they avoided healthcare services, even when needed, due to fear of mistreatment due to gender identity. Of those who did seek healthcare services, 33% reported at least one negative experience in the medical setting that they attributed to their gender identity.

While the impact of trauma and discrimination can be tremendous on LGBTQ+ people,

---

<sup>1</sup> LGBT Demographic Data Interactive. (January 2019). Los Angeles, CA: The Williams Institute, UCLA School of Law.

<sup>2</sup> Wilson, B. D., Cooper, K., Kastanis, A., & Nezhad, S. (2014). Sexual and gender minority youth in foster care: Assessing disproportionality and disparities in Los Angeles

<sup>3</sup> Grant, J. M., Motter, L. A., & Tanis, J. (2011). Injustice at every turn: A report of the national transgender discrimination survey.

<sup>4</sup> James, S., Herman, J., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. A. (2016). The report of the 2015 US transgender survey.

we also understand that affirmation of identity, safety and access to necessary medical services are critical forces in promoting resiliency and wellbeing. A recent study published in 2022 found that, for transgender people, access to gender affirming hormones during adolescence significantly improved mental health and that this carried through adulthood<sup>5</sup> . The Board recognizes that access to gender affirming medical services must not only be preserved but also improved to support the wellbeing of transgender and nonbinary people.

In June of 2021, the Board took significant steps to address existing barriers to care that LGBTQ+ people face when it comes to receiving culturally competent, affirming healthcare, by passing the first “Care with Pride” motion. This motion instructed DHS to work with the Department of Children and Family Services (DCFS) and community-based organizations to expand competent, affirming healthcare models, including the Alexis Project at LAC+USC and those utilized by other community experts. It also directed the assessment of current protocols regarding gender-affirming care and consultation with community experts and community-based organizations to solicit feedback on steps the County should take to improve care coordination.

The Board recognizes that DHS must build upon those efforts and continue to support the resiliency of the LGBTQ+ community through providing gender affirming medical care and other services in a safe and competent setting. In honor of Pride month, the County will continue to build these services and grow a program which will support the wellbeing of LA County LGBTQ+ patients.

---

<sup>5</sup> Turban, J. L., King, D., Kobe, J., Reisner, S. L., & Keuroghlian, A. S. (2022). Access to gender-affirming hormones during adolescence and mental health outcomes among transgender adults. *Plos one*, 17(1), e0261039

**WE THEREFORE MOVE** that the Board of Supervisors instruct the Department of Health Services (DHS), in collaboration with the Department of Children and Family Services (DCFS) and the Department of Mental Health (DMH) to:

1. Unify the recent expansion of LGBTQ+ services prompted by the [Care with Pride motion passed in June 2021](#), to create a DHS-led Gender Health Program that standardizes and strengthens LGBTQ+ services for DHS-empaneled patients, and include DCFS and DMH to ensure mental health and child welfare partners are core components of the Gender Health Program;
2. Ensure that DHS implements expected practices that are consistent with national standards of care regarding access to, and coordination around gender affirming care: medical/hormonal management, pharmaceutical formulary, mental health coordination and access to necessary surgical interventions for transgender and gender nonbinary people;
3. Establish access points to ensure that transgender and nonbinary youth, particularly those in the child welfare system, are connected to gender affirming medical care, in accordance with California law;
4. Partner with key stakeholders to establish a referral process that can be easily accessed by County Departments, community-based organizations, and individuals to ensure coordination of medical, mental health and social services;
5. Create a DHS Gender Health patient advisory board that includes both DHS patients and LGBTQ+ community organizations and LGBTQ+-serving organizations to support DHS in developing and improving services for LGBTQ+ people in DHS hospitals and clinics; and

6. Report back to the Board in 90 days with a plan to implement directives 1-5 and include in the report back scope of services, estimated patient volumes, and budget needs within DHS, DMH, and DCFS to support the DHS Gender Health Program.

# # #

HLS:ac