

HEALTH IMPACT ASSESSMENT

of House Bill 2 and House Bill 142
on LGBTQ+ North Carolinians



2019



NCCADV

North Carolina Coalition
Against Domestic Violence

This publication was supported by the Cooperative Agreement Number, 6 NUS4CE002300-05, funded by the Centers for Disease Control and Prevention.

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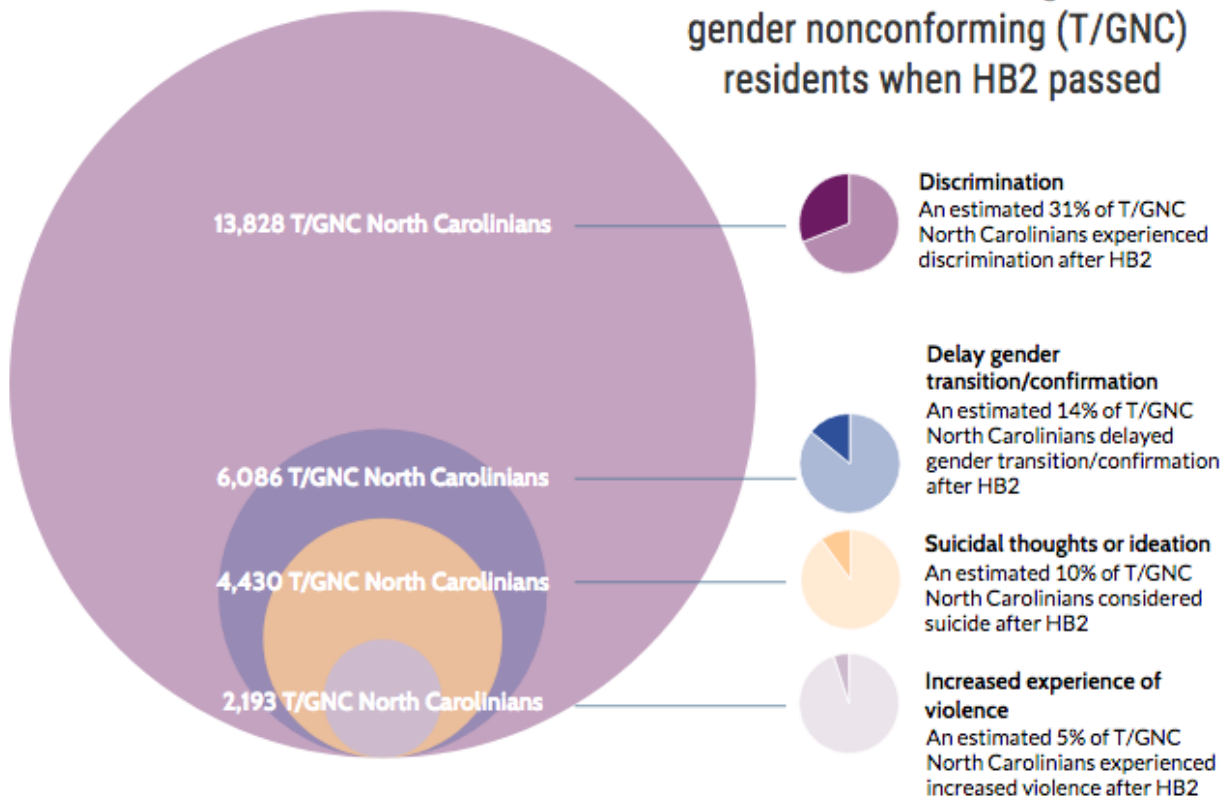
Health Impact Assessment of House Bill 2 and House Bill 142

on Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ+)
 North Carolinians

Executive Summary Spring 2019

This document highlights findings from a two-year long health impact assessment (HIA) of HB2 and HB142 in North Carolina. To better understand the health impacts of HB2 and HB142 on LGBTQ+ communities across the state, the HIA team reviewed relevant literature and available data sets, conducted focus groups with LGBTQ+ residents and service providers, and administered a statewide online survey to document the extent of LGBTQ+ experiences.

Estimated harm to transgender and gender nonconforming (T/GNC) residents when HB2 passed



Key Questions Answered

1

In what ways and to what extent has the physical, mental, and social well-being of LGBTQIA+ North Carolinians changed post-legislation?

- Anger, anxiety, and sadness were the most frequently reported responses to HB2 and HB142.
- Adverse health effects were more frequently reported for periods when HB2 and HB142 received heavy media coverage.
- T/GNC respondents were considerably more vulnerable to adverse health outcomes than others. Stark differences were observed in T/GNC respondents' ability to feel comfortable in public and changes in public restroom usage.

2

In what ways and to what extent have violent outcomes for LGBTQIA+ North Carolinians changed post-legislation?

- T/GNC respondents were over-represented among those who reported increased violence in the wake of HB2 and HB142.
- The most frequently reported forms of violence reported include verbal harassment, physical assault, and sexual violence.

3

In what ways and to what extent has vulnerability to negative health outcomes, including violence, among LGBTQIA+ North Carolinians changed post-legislation?

- During focus groups, T/GNC reported diminished social support in the wake of HB2 and HB142.
- Although evidence suggests that adverse health effects diminished over time for some
- Approximately one third of LGBTQIA+ respondents reported using drugs and/or alcohol to cope in the wake of HB2 and HB142.
- respondents, reports of discrimination and employment discrimination held steady over time.
- Reports of increased violence decreased over time.

4

In what ways and to what extent has resilience among LGBTQIA+ North Carolinians changed post-legislation?

- Talking with friends, partners/significant others, and family were important coping strategies for LGBTQIA+ North Carolinians in the wake of HB2 and HB142.
- Talking with other LGBTQIA+ friends was especially important for T/GNC respondents.

5

What types of new or existing services or resources are needed to promote wellbeing among LGBTQIA+ North Carolinians?

- Additional trainings for teachers, clinicians, medical professionals, and others who provide services to LGBTQIA+ youth and adults to ensure that services and treatments are both appropriate and sensitive to clients' needs.
- Safe, supportive spaces continues to be an important protective mechanism for LGBTQIA+ North Carolinians, particularly transgender and gender nonconforming individuals. In times of stress T/GNC respondents found safety and comfort among other LGBTQIA+ friends in particular, underscoring the health benefits of community-led support groups.

Recommendations



RECOMMENDATIONS

For Health and Wellness among LGBTQ+ North Carolinians



Allocate funding to research, services (such as gender-neutral restrooms), and organizations that promote the health and well-being of LGBTQ+ people.

Include questions on sexual orientation and gender identity in all data collection tools.

Introduce stringent anti-discrimination policies and procedures to protect the health and well-being of LGBTQ+ clients and staff.

Incorporate more training for professionals to serve the needs of LGBTQ+ clients and decrease burden on LGBTQ+ staff members to serve as trainers/navigators for their peer professionals.

Include voices of LGBTQ and T/GNC folks in media coverage of laws that affect those communities.

Increase engagement with LGBTQ+ community members, especially T/GNC community members, when conducting research and designing interventions.

Source: Capstone Team
Gillings School of Global Public Health
UNC-Chapel Hill



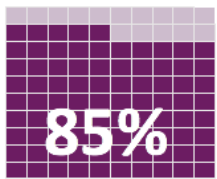
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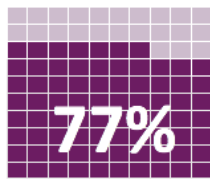
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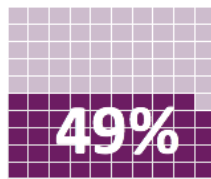
Health Outcomes Among T/GNC North Carolinians During Heavy Media Coverage of HB2



Anxiety



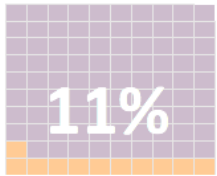
Sadness



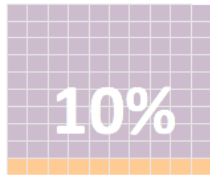
Depression

Mental health

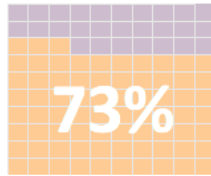
- During the height of media coverage, three out of four T/GNC respondents were struggling with anxiety and sadness. Half of T/GNC respondents reported experiencing depression during this time.



Increased violence



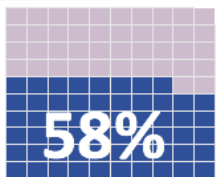
Emotional abuse



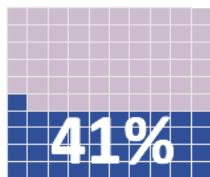
Fear

Violence

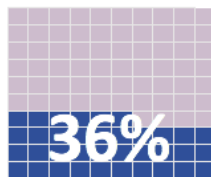
- 82% of all reports of increased violence were reported by T/GNC respondents. One in ten T/GNC respondents also reported emotional abuse.
- Three out of four T/GNC respondents experienced fear in response to HB2.



Uncomfortable in public



Inability to use restroom

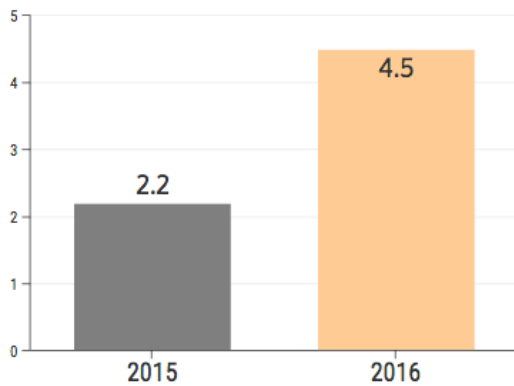


Restricted activities

Restrooms

- 58% of T/GNC respondents reported an inability to feel comfortable in public in the wake of HB2.
- 41% felt unable to use public restroom facilities and 36% restricted activities to ensure bathroom accessibility.

Murders per 100,000 trans-identified residents in North Carolina



NC murder rate in 2015: 5.7 per 100,000 people in population
 NC murder rate in 2016: 6.9 per 100,000 people in population

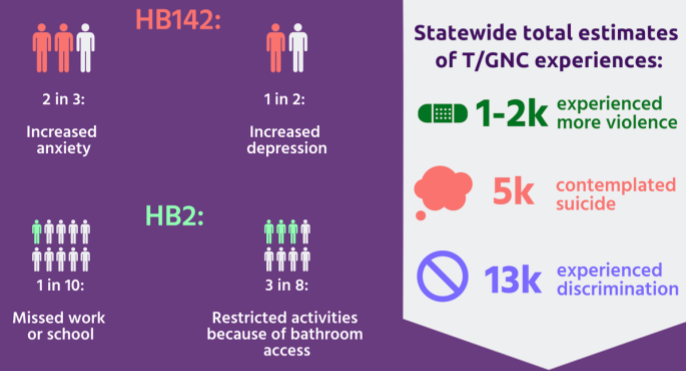
Gender identity-motivated* hate crimes in North Carolina

2013: 0
 2014: 0
 2015: 0
 2016: 2
 2017: 0

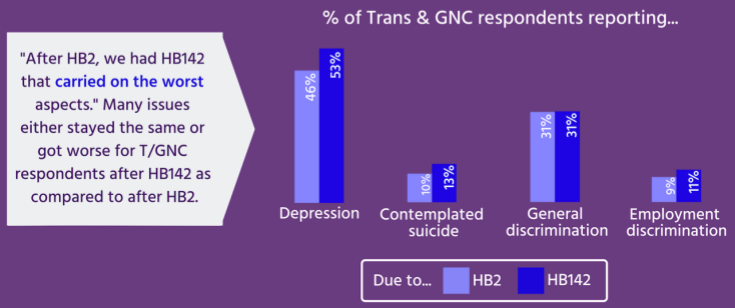
*includes transgender and gender nonconforming; 2013 was the first year the FBI UCR began recording this information

Health Impacts of HB2 & HB142 on LGBTQ+ North Carolinians

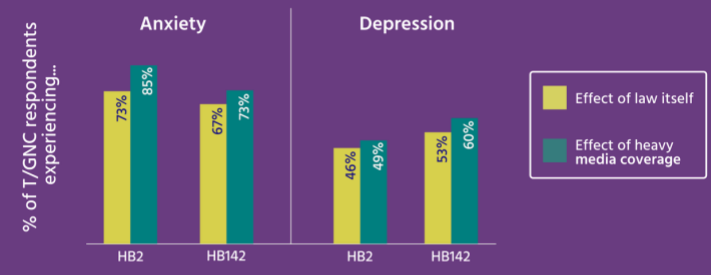
Transgender and gender non-conforming (T/GNC) North Carolinians experienced the most negative health impacts of HB2 & HB142, including:



"I think people feel that they have a **license to be hateful.** These laws have given people the right to feel that their personal beliefs and values can result in violence and that they'll be protected by it."



Media representation & narratives matter



Most Common Coping Strategies

Strength in Community

- Talking to friends
- Talking to family
- Seeing a therapist

Self-care

- Sleep
- Exercise

"After HB2, I felt I had no place here. It's devastating to think that people don't agree with your existence."



HEALTH IMPACTS OF TRANS-DISCRIMINATORY LEGISLATION NC HB2 AND HB142

**Apr
2014**

The US Dept. of Education's Office for Civil Rights offers "guidance" on sexual assault for schools with Title IX funding. For the first time, the federal government states explicitly that transgender Americans are protected from discrimination under the law.



**Mar
2015**

The Charlotte City Council holds a public hearing to discuss and vote on adding local protections for LGBTQ+ residents. The proposed ordinance is voted down, 6-5.



**Feb
2016**

Charlotte City Council votes 7-4 to add gay and transgender people to the list of classes protected against discrimination in Charlotte, effective April 1.



**Mar
2016**

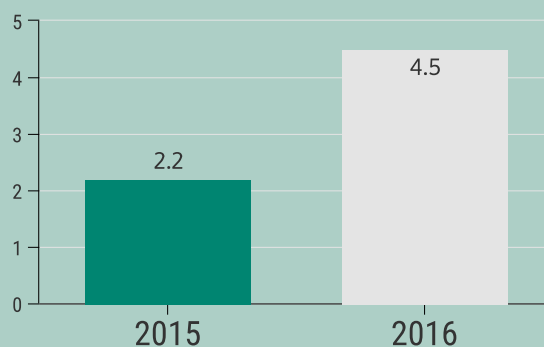
The NC General Assembly votes to pass HB2 and Governor McCrory signs it into law within hours of its passage.



**Mar
2017**

N.C. House and Senate vote to repeal HB2 and replace it with House Bill 142.

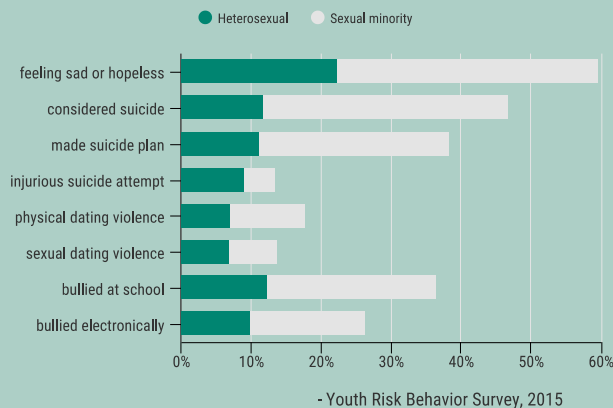
Murders per 100,000 trans-identified residents in North Carolina



105%

Increase in murders among trans-identified North Carolinians from 2015 to 2016.

Adverse Health and Violence Outcomes More Prevalent Among NC LGBTQ+ Youth



Health Impact Assessment of House Bill 2 and House Bill 142

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Suggested Citation:

North Carolina Coalition Against Domestic Violence. April 2019. Health Impact Assessment of House Bill 2 and House Bill 142 on Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ+) North Carolinians. Durham, NC.

For more information, please contact:

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919-956-9124

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¹ The Capstone project team would like to thank the following individuals and organizations: **Elizabeth Chen**, MPH, Department of Health Behavior, Gillings School of Global Public Health, The University of North Carolina at Chapel Hill (UNC-CH); **Lili Farhang**, MPH, Human Impact Partners; **Dr. Geni Eng**, DrPH, Department of Health Behavior, Gillings School of Global Public Health, UNC-CH; **Meg Landfried**, MPH, Department of Health Behavior, Gillings School of Global Public Health, UNC-CH.

² **Authors' Positionality Statement:** The student members of the Capstone Team wish to acknowledge the role of our personal and collective identities and backgrounds in the development of the content that is presented and analyzed in the report below. The student team is comprised of four members who are white and straight-identified and one member who is a person of color and queer identified. Our collective identity as five cisgender women precluded us from fully understanding the lived experiences of transgender and gender nonconforming people. Additionally, our training in the graduate program at the school of public health influences the way we approach and address problems. Throughout the report and data collection, we attempted to be cognizant of these identities and sought the feedback of community members to ensure that our content reflects the complexities and realities of LGBTQ+ North Carolinians.

³ Sexual Violence Lead, North Carolina Campus Consortium