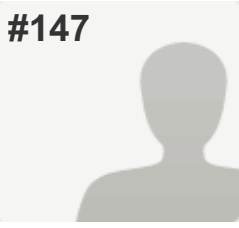


# Ending the Epidemic Task Force Recommendation Form

#147



**COMPLETE**

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**Q1: OPTIONAL: This recommendation was submitted by (please provide your first and last name, affiliation, and email address)**

First Name	Eòghann
Last Name	Renfroe
Affiliation	Empire State Pride Agenda
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**Q2: Title of your recommendation**

Addition of the category "gender identity and expression" to the protected classes of the existing NYS Human Rights Law

## Ending the Epidemic Task Force Recommendation Form

### Q3: Please provide a description of your proposed recommendation

Addition of the category “gender identity and expression” to the protected classes of the existing NYS Human Rights Law.

#### 3. Please provide a description of your proposed recommendation

The Empire State Pride Agenda recommends the addition of the category “gender identity and expression” to the existing NYS Human Rights Law. The addition of “gender identity and expression” would protect transgender and gender non-conforming New Yorkers from discrimination in the areas of employment, housing, education, public accommodations, and credit. Transgender New Yorkers face routine, debilitating discrimination in all of these areas:

- 20% have been fired for being transgender, and 37% have been passed over for a job.
- 75% of transgender students have experienced severe harassment, and 35% have experienced physical assault, which leads 14% to drop out of school altogether.
- 19% of transgender New Yorkers have been denied a home or apartment because of their gender identity, 18% have become homeless solely because of their gender identity, and 25% have had periods of being precariously housed – having to find temporary spaces to sleep or live.
- 17% of transgender New Yorkers have been outright refused medical care because of their gender identity. [statistics from the New York findings of “Injustice At Every Turn: The National Transgender Survey” by the National Center for Transgender Equality and the National LGBTQ Taskforce, which can be found at: [http://www.thetaskforce.org/static\\_html/downloads/reports/reports/ntds\\_state/ntds\\_state\\_ny.pdf](http://www.thetaskforce.org/static_html/downloads/reports/reports/ntds_state/ntds_state_ny.pdf) ]

Because of these interlocking forms of discrimination, transgender New Yorkers face staggering amounts of unemployment, income instability, and access to competent healthcare, and because of this are uniquely vulnerable to HIV infection. In fact the rate of HIV infection in the transgender population is 50 times that of the general population. [World Health Organization press release: <http://www.who.int/mediacentre/news/releases/2014/key-populations-to-hiv/en/> ]

Making discrimination against transgender people illegal would do much to alleviate the burdens upon transgender people in their attempts to access steady employment, stable housing, and competent healthcare – both through greater availability of employer-based health insurance, and the legal requirement to offer the same level of access to medical care to transgender people as to non-transgender people. All of these outcomes would in turn lower the risks of HIV infection in the transgender population and their partners.

### Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply)

Identifying persons with HIV who remain undiagnosed and linking them to health care  
,

Linking and retaining persons diagnosed with HIV to health care and getting them on anti-HIV therapy to maximize HIV virus suppression so they remain healthy and prevent further transmission  
,

Facilitating access to Pre-Exposure Prophylaxis (PrEP) for high-risk persons to keep them HIV negative

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**Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply)**

Housing and Supportive Services Committee: Develop recommendations that strengthen proven interventions enabling optimal engagement and linkage and retention in care for those most in need. This Committee will recommend interventions that effectively address complex and intersecting health and social conditions and reduce health disparities, particularly among New York's low-income and most vulnerable and marginalized residents. These interventions will diminish barriers to care and enhance access to care and treatment leaving no subpopulation behind.

Data Committee: Develop recommendations for metrics and identify data sources to assess the comprehensive statewide HIV strategy. The Committee will determine metrics that will measure effective community engagement/ ownership, political leadership, and supportive services. It will also determine metrics that will measure quality of care, impact of interventions and outcomes across all populations, particularly identified sub populations such as transgender men and women, women of color, men who have sex with men and youth. In addition, the Committee will evaluate to determine optimal strategies for using data to identify infected persons who have not achieved viral suppression and address their support service, behavioral health, and adherence needs.

**Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?**

Other (please specify)  
This recommendation will require change to existing policy and creation of new policy, in order to facilitate non-discrimination in areas that will impact health/ vulnerability to infection/access to treatment for transgender individuals.

**Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?**

Statutory change required

**Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?**

Within the next year

**Q9: What are the perceived benefits of implementing this recommendation?**

This recommendation would help alleviate many of the burdens on the transgender population of New York State which place them at high risk of HIV infection, and will also help alleviate costs associated with programs serving transgender people with HIV or who are at high risk of HIV infection.

Greater access to employment would provide transgender New Yorkers with greater financial stability and access to employer-based health insurance, as well as greater access to affordable private health insurance, and better health outcomes overall. This will also decrease costs associated with Medicaid and other healthcare services for low-income New Yorkers. Greater access to safe and affordable housing will improve health and alleviate the financial burdens of transgender New Yorkers, and will lead to decreased costs for shelters and other temporary housing programs. Decreased discrimination in education will allow transgender students a greater chance to forge stable lives and careers, which in turn leads to higher incomes and greater health. Greater access to competent healthcare will lead directly to better health outcomes for the transgender population, including lower risk of HIV infection and transmission, greater access to preventative measures, and better care for those who are HIV positive.

**Q10: Are there any concerns with implementing this recommendation that should be considered?**

This recommendation requires a change in statutory law. There is already model legislation available [Squadron, S. 195/Gottfried, A.4226], known as the Gender Expression Non-Discrimination Act. This Legislation has passed the Assembly seven times but has not yet been voted on by the Senate.

Following the change to statutory law, there would be a need for the creation and dissemination of implementation guidelines. This is an area in which the Empire State Pride Agenda could be of service.

**Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?**

The cost of the implementation of the recommendation would be negligible, and would consist mainly in education of the public and the dissemination of implementation guidelines. Any cost incurred would likely be offset by the savings to the state in decreased need for access to public assistance programs and increased tax revenue from stably employed transgender New Yorkers.

**Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?**

The Williams Institute issued a report in April of 2013, "The Cost of Employment and Housing Discrimination against Transgender Residents of New York" [<http://williamsinstitute.law.ucla.edu/wp-content/uploads/Herman-NY-Cost-of-Discrimination-April-2013.pdf> ], which estimated that the implementation of a statewide non-discrimination statute protecting transgender New Yorkers, such as is the subject of this recommendation, would save the State of New York considerable revenue:

- New York State would save more than \$1 million dollars annually in Medicaid expenditures alone.
- By ending housing discrimination the State of New York could save between \$475,000 to \$5.9 million a year in federal and state housing expenditures and other costs related to homelessness.
- Stably employed transgender workers could generate millions more dollars in income tax revenues for the State with the reduction or elimination of employment discrimination.

**Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?**

Transgender New Yorkers, who currently face almost overwhelming amounts of discrimination in every facet of life, and who are uniquely at risk to HIV infection; their partners; and their families.

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**Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?**

Data collection of transgender individuals is necessary at every level of state government and healthcare provision; not only in order to monitor its impact, but also to more effectively target the population in question, which suffers from a historical lack of data collection by state and federal agencies.

**Q15: This recommendation was submitted by one of the following** Advocate