The Society for the Psychology of Sexual Orientation and Gender Diversity, Division 44 of the American Psychological Association (APA), applauds the May 10, 2021 decision^1 of the U.S. Department of Health and Human Services to enforce federal prohibitions on sex discrimination to include sexual orientation and gender identity. The decision was made in line with the recent Supreme Court decision in *Bostock v. Clayton* and subsequent court decisions. The previous Administration weakened non-discrimination in healthcare protections under Section 1557 of the Affordable Care Act by reverting to a narrow definition of sex that excludes sexual and gender diverse people.

Expanding protections for sexual and gender minorities is essential to secure their access to and utilization of healthcare^2,3^. Many LGBTQ+ (lesbian, gay, bisexual, transgender, and queer or questioning) people experience discrimination in accessing healthcare. A 2018 study by the Center for American Progress^4^ found that 8% of lesbian, gay, and bisexual people and 27% of transgender and gender nonconforming people reported being denied access to healthcare due to their identity. Some healthcare providers have negative attitudes toward LGBTQ+ people^5^ and respond negatively to disclosure of patients’ LGBTQ+ identity^6^.

Non-discrimination policies that include protections for sexual and gender diverse people are important systems-level interventions that lead to better physical and mental health outcomes^3,11^ through improved communication with healthcare providers^7^ and reduced stigma. These protections are even more pertinent for LGBTQ+ people living in rural areas^11,12^ and LGBTQ+ people of color, who face greater levels of discrimination and more barriers to care, particularly as healthcare needs of LGBTQ+ people have been exacerbated by the COVID-19 pandemic^13^.

Division 44 supports expanding protections for sexual and gender diverse people.

References


