



May 8, 2020

Senator Scott Wiener  
State Capitol, Room 5100  
Sacramento, CA  
95814

Dear Senator Wiener:

We are scholars at the Williams Institute, an academic research center at UCLA School of Law dedicated to conducting rigorous and independent research on sexual orientation and gender identity, including on disparities and discrimination facing lesbian, gay, bisexual, and transgender (LGBT) people. We collect and analyze original data as well as analyze governmental and private data. In addition, Williams Institute scholars have long worked with state and federal governments to improve data collection on the U.S. population and have produced widely cited best practices for the collection of sexual orientation and gender identity information on population-based surveys.<sup>1</sup>

We are writing to express our support for SB 932, requiring California Department of Public Health and each local health officer to collect data related to the sexual orientation and gender identity of individuals who are diagnosed with COVID-19.

We appreciate that California has been a leader on sexual orientation and gender identity data collection for many years, and SB 932 would mark another first. Currently, no federal or state agencies are collecting data on LGBT-status in COVID-19 monitoring systems, though many, including California, are collecting other demographic data, such as race and ethnicity. We believe that California's COVID-19 data would be enhanced by the collection and timely reporting of data on the sexual orientation and gender identity of those impacted. Such data would help the public health system respond to the crisis and would help policymakers address the needs of and distribute resources to those who are most vulnerable.

Recent Williams Institute research highlights increased susceptibility to serious illness related to COVID-19 infection among the LGBT people in California. Among all LGBT adults in California, 361,000 are in fair or poor health overall, and many LGBT adults have underlying health conditions that put them at increased risk of serious illness related to COVID-19, such as

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<sup>1</sup> SEXUAL MINORITY ASSESSMENT RESEARCH TEAM (SMART), WILLIAMS INSTITUTE, BEST PRACTICES FOR ASKING QUESTIONS ABOUT SEXUAL ORIENTATION ON SURVEYS (2009), <https://williamsinstitute.law.ucla.edu/wp-content/uploads/Best-Practices-SO-Surveys-Nov-2009.pdf>; GENDER IDENTITY IN U.S. SURVEILLANCE (GENIUSS), WILLIAMS INSTITUTE, BEST PRACTICES FOR ASKING QUESTIONS TO IDENTIFY TRANSGENDER AND OTHER GENDER MINORITY RESPONDENTS ON POPULATION-BASED SURVEYS (2014), <https://williamsinstitute.law.ucla.edu/wp-content/uploads/Survey-Measures-Trans-GenIUSS-Sep-2014.pdf>.

asthma (216,000), diabetes (114,000), and heart disease (81,000).<sup>2</sup> A significant number of LGBT people in California are age 65 and older—an estimated 162,000 LGB and 9,000 transgender people—many of whom also suffer from asthma, heart disease, and diabetes.<sup>3</sup>

Other research indicates that LGBT people nationwide face elevated risk of infection and serious illness. For example, a recent report released by the Human Rights Campaign found that 21% of LGBQ adults have asthma compared to 14% of non-LGBTQ adults and 37% of LGBTQ people smoke compared to 27% of non-LGBTQ people.<sup>4</sup> In addition, the analysis found that 1.4 million LGBTQ adults have diabetes, including one in five LGBTQ people over the age of 50.<sup>5</sup>

A recent Williams Institute report looking specifically at the transgender population found that 319,800 transgender adults in the U.S. have one or more medical conditions that put them at increased risk of serious illness related to COVID-19, including asthma (208,500), diabetes (81,100), heart disease (72,700), and HIV (74,800), and approximately 217,000 transgender adults in the U.S. are age 65 or older.<sup>6</sup> In addition, 137,600 transgender people lack health insurance and 450,000 have not gone to a doctor in the past year because they could not afford it.<sup>7</sup>

Given what is known so far about increased risks and vulnerabilities facing LGBT people, we support the passage of SB 932.

We note our concern with potential harm to respondents of COVID-19 monitoring systems due to breach of confidentiality. We request that the California legislature and state agencies ensure that the data are collected and reported using all appropriate privacy standards. All entities responsible for data collection ought to ensure confidentiality of respondents' medical and demographic information.

Finally, we note that the need to include questions to identify LGBT people impacted by COVID-19 highlights a broader need to ensure that all data collection systems related to health status and mortality are also modified to include questions about sexual orientation and gender identity.

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<sup>2</sup> Kathryn O'Neill, Williams Institute, Health Vulnerabilities to COVID-19 among LGBT Adults in California (forthcoming).

<sup>3</sup> ILAN H. MEYER & SOON KYU CHOI, WILLIAMS INSTITUTE, VULNERABILITIES TO COVID-19 AMONG OLDER LGBT ADULTS IN CALIFORNIA 1-2 (2020), <https://williamsinstitute.law.ucla.edu/wp-content/uploads/Older-LGB-COVID-CA-Apr-2020.pdf>.

<sup>4</sup> CHARLIE WHITTINGTON ET AL., HUMAN RIGHTS CAMPAIGN FOUNDATION, THE LIVES & LIVELIHOODS OF MANY IN THE LGBTQ COMMUNITY ARE AT-RISK AMIDST THE COVID-19 CRISIS 5 (2020), [https://assets2.hrc.org/files/assets/resources/COVID19-IssueBrief-032020-FINAL.pdf?\\_ga=2.94294430.205881203.1588012193-590966580.1588012193](https://assets2.hrc.org/files/assets/resources/COVID19-IssueBrief-032020-FINAL.pdf?_ga=2.94294430.205881203.1588012193-590966580.1588012193).

<sup>5</sup> *Id.*

<sup>6</sup> Jody L. Herman & Kathryn O'Neill, Williams Institute, Vulnerabilities to COVID-19 among Transgender Adults in the U.S. 1 (2020), <https://williamsinstitute.law.ucla.edu/wp-content/uploads/Trans-COVID19-Apr-2020.pdf>.

<sup>7</sup> *Id.* at 2.

Sincerely,

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