

Stanford SOCIAL INNOVATION^{Review}

Sponsored Supplement
Ending LGBT Health Inequities
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Ending LGBT Health Inequities

Philanthropy can pursue several effective approaches to improve LGBT health.

BY SAMANTHA FRANKLIN & ANDREW LANE

Despite recent advances in civil rights protections for lesbian, gay, bisexual, and transgender (LGBT) people, these communities still face significant health disparities. Continued marginalization and bias put LGBT individuals at increased risk for negative health outcomes related to mental health disorders, substance abuse, homelessness, HIV and other sexually transmitted infections, and suicide.¹ LGBT youths are particularly at risk for homelessness, and elders are particularly at risk for isolation. LGBT individuals are also more likely to lack health insurance, delay medical care, visit emergency rooms for treatment, and encounter prejudice from health-care providers.²

These disparities are challenging. But they can be overcome. Our experiences at the Johnson Family Foundation (JFF) indicate that philanthropy can—and should—play a leading role in improving the health of LGBT people.

Founded in 1990, JFF promotes the development of healthy, vibrant, and just communities by improving the health of the environment, promoting equality and social progress, and supporting education and youth. Growing out of our interest in improving the everyday experiences of LGBT people who may be most at risk, we began funding LGBT mental health in 2006 through a donor-advised fund at the North Star Fund. Since then, JFF has contributed more than \$2 million to these issues. Today, between 20 and 25 percent of our grantmaking is

focused on LGBT issues, with about a third of that dedicated to mental health. Overall, we take a holistic approach to promoting LGBT health equity by supporting efforts in three areas: health-related services (and access to those services); research on anti-LGBT discrimination and its repercussions for LGBT health; and advocacy and grassroots organizing for social and political change.

SUPPORTING HEALTH-RELATED SERVICES AND ACCESS

JFF supports LGBT-affirming and LGBT-specific services through our LGBT Mental Health Initiative (MHI), which provides capacity-building and technical assistance funding to LGBT community centers across the United States that want to improve the mental health services they offer. Our partner in this initiative, CenterLink, helped us develop our plan. CenterLink also helps with implementation by providing training and coaching to community center leaders and training for program evaluation.

MHI grantees use funding for hiring personnel, fundraising and development, coordinating interns, and marketing their services. They use technical assistance funds

to support professional development for staff, purchase computers and other equipment, and invest in office renovations and construction.

Three years after we launched MHI, our first cohort of grantees had served 2,000 more people than they had previously been able to, at an average cost per additional client of around \$340.³ Those cost levels bode well for these organizations' ability to sustain programming over the long term. What's more, it's likely that the programming is reaching many more low-income LGBT individuals than before, given that many centers report that most of their visitors have incomes of less than \$30,000 per year.⁴

But these centers still face significant challenges. One is the lack of control they have over the length of time it takes to obtain certain government certifications, such as licensure to provide outpatient addiction and recovery services or certification to accept Medicare or Medicaid. In addition, of the centers that have chosen to implement client-tracking systems, a handful have found that the price of such systems is higher than anticipated and inappropriate for the number of clients maintained.

The MHI continued this year with support for a new cohort of seven centers in California, Washington, Pennsylvania, and Michigan, and we are always trying to improve it. For example, JFF has collaborated with CenterLink to refine the program model so as to offer a range of "right-sized" grants that allow centers to focus more intentionally on their most pressing capacity needs rather than divide their attention among several capacity-building activities that yield varying returns on their investments.

Opportunities for Philanthropy

The Johnson Family Foundation suggests the following potential strategies to other funders concerned about LGBT health disparities:

- Funding targeted outreach efforts to enroll LGBT people in affordable insurance options.
- Providing capacity-building support for organizations that deliver LGBT wellness and HIV/AIDS-related programming to build their leadership and develop new revenue-generation strategies.
- Providing grants to health-care providers and medical education programs to include LGBT competency standards in their practice.
- Funding advocacy and policy efforts to combat discrimination and promote the availability of affordable health care.
- Providing flexible, multi-year support to LGBT organizations that address the social determinants of health, including stigma, economic opportunity, family acceptance, and safe schools.⁶

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We're proud of the progress our grantees have made, and we're excited about the new cohort. Nonetheless, we're also keenly aware that LGBT centers alone cannot meet the demand for care that is LGBT responsive and affirming, and not every LGBT person has convenient, consistent access to these organizations. For that reason, we're also working to ensure that mainstream service providers and institutions know how to provide the best and most affirming care to LGBT clients.

To that end, as a complement to the MHI, we work in partnership with Rainbow Heights Club to promote LGBT cultural competency. This organization works with hospitals and health-care providers to promote settings in which clients can disclose their identities safely and receive appropriate care that is sensitive to LGBT issues. In addition, JFF is working with the National Center for Lesbian Rights to enact bans on harmful conversion therapy practices targeted at LGBT minors by mental health practitioners, thus making service settings safer for LGBT youth.

THE BENEFITS OF SUPPORTING RESEARCH

In 2007, the American Foundation for Suicide Prevention (AFSP) launched a national effort to better understand and

address suicidal behavior and suicide risk in LGBT populations. In 2008, JFF began supporting AFSP in its work to determine whether LGBT people die by suicide more frequently than the general population and which subgroups within the overall LGBT population are most at risk. Through a sexual orientation and gender identity data collection project begun in 2014, AFSP is collaborating with a working group of death investigators, medical examiners, and coroners to design and implement a protocol whereby investigators would collect and report on the sexual orientation and gender identity of people who die by suicide. Post-mortem data could provide crucial information to service providers about how successful targeted interventions are at reducing LGBT suicides.

JFF also serves as a funding partner to a number of other organizations that collect, analyze, and report data on LGBT issues. These data increase the ability of advocacy and policy organizations in the LGBT equality movement to advance protections in areas such as school safety, relationship recognition, parenting, housing, public accommodations, and employment discrimination. They also provide messaging tools to build the communications capacity of advocacy organizations and organiza-

tions that work to foster movements. These groups include the Center for American Progress, the Movement Advancement Project, and the Williams Institute. We also support Funders for LGBTQ Issues to provide the philanthropic sector with timely information about the state of LGBT funding and to identify areas of need so that grant-makers can maintain ongoing awareness of health disparities.

SOCIAL JUSTICE

In addition, JFF works to create a social and political context that is conducive to positive health outcomes for LGBT people. Through our support of advocacy groups, we have focused on changing laws and policies—including marriage equality—that have implications for health equity and health-care access for LGBT individuals.⁵ Through our partnerships with community foundations such as the North Star Fund and the Samara Fund, we support leadership development and organizing. Our goal is to help LGBT people increase their political power and also increase their general safety; LGBT individuals are at a disproportionately high risk for criminalization and physical violence, and they often suffer from additional factors that put their health at risk as well, such as racial and economic inequity, discrimination based on immigration status, and transphobia.

We believe that this approach will prove more effective than dictating a “solution.” It empowers people who live at the intersections of multiple marginalized identities to take leadership in designing and implementing their own innovative solutions to the problems their communities face while advocating for bold, systemic change. ❖

Notes

- 1 Institute of Medicine, *The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding*, Washington, D.C.: The National Academies Press, 2011.
- 2 Laura E. Durso, Kellan Baker, and Andrew Cray, *LGBT Communities and the Affordable Care Act: Findings from a National Survey*, Washington, D.C.: Center for American Progress, 2014. Jeff Krehely, *How to Close the LGBT Health Disparities Gap*, Washington, D.C.: Center for American Progress, 2009.
- 3 Amanda Winters, Johnson Family Foundation LGBTQ Mental Health Initiative Interim Grant Program Evaluation, 2013.
- 4 Centerlink & Movement Advancement Project, “2014 LGBT Community Center Survey Report,” 2014.
- 5 Angela K. Perone, “Health Implications of the Supreme Court’s Obergefell vs. Hodges Marriage Equality Decision,” *LGBT Health*, September 2015, pp. 196–199.
- 6 Funders for LGBTQ Issues, “Vital Funding Part Two: Grant-making Strategies for Improving LGBTQ Health,” 2015.