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County of Los Angeles Public Health

RESEARCH THAT MATTERS

UNA FUERZA MÁS DE CIEN MIL

LBTQ Latinas in Los Angeles County

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OVERVIEW

BY THE NUMBERS

LBTQ adult Latinas are over 100,000 strong in Los Angeles County.

Among LBTQ Latina adults in Los Angeles County, an estimated:

- 74% are engaged in their community through donating money, volunteering, participating in protests, and contacting elected officials
- 74% of those under age 50 want to have children
- 67% are cisgender bisexual women
- 63% are between the ages of 18 and 34
- 55% are not out to everyone in their immediate family
- 54% live in Supervisorial Districts 4 (29%) and 1 (25%)
- 53% have household incomes below 200% of the federal poverty level
- 53% are living with a disability
- 52% of those who are employed are not out to their supervisor at work
- 49% have experienced intimate partner violence
- 48% are living with obesity
- 47% are struggling with binge drinking
- 45% are experiencing loneliness
- 41% are having difficulty accessing medical care
- 39% are not out to any of their health care providers
- 24% have attempted suicide
- 23% are currently at risk for major depression
- 20% were born outside of the United States
- 16% have been unhoused at some point within the past 5 years

EXECUTIVE SUMMARY

This report focuses on LBTQ Latinas living in Los Angeles County because they are a critical part of LA's past, present, and future. Latinas are the largest group of women in Los Angeles County, comprising almost half of the women and girls who live in LA.[1] Los Angeles County has the largest Latina population of any county in the United States by far,[2] including almost 1.5 million Latina adults aged 18 years and older. LBTQ identification is growing among Latinas in Los Angeles County and California, particularly among those who are younger and identify as bisexual.[3] Latinas, including LBTQ Latinas, are civically engaged and helping to shape the political and cultural direction of Los Angeles.[4] However, Latinas in Los Angeles County also face overlapping barriers based on their sex, sexual orientation, gender identity, race, ethnicity, immigration status, and other characteristics.[5] Understanding and supporting the future of Los Angeles requires a deeper understanding of the challenges that LBTQ Latinas face and the contributions they are making, and will continue to make, to Los Angeles.

An estimated 106,000 LBTQ Latinas aged 18 and older live in Los Angeles County. This report presents information about the experiences of LBTQ Latinas with discrimination and harassment in various areas, including employment, housing, healthcare, public spaces, and law enforcement, as well as findings regarding their health and economic well-being.

This report uses representative data collected from 1,006 LGBTQ Los Angelenos who completed the Los Angeles County Department of Public Health's 2023 Los Angeles County Health Survey (LACHS) and 504 LGBTQ Angelenos who also completed the Lived Experiences in Los Angeles County (LELAC) Survey, which was a call-back study to LACHS developed by the Williams Institute. Overall, respondents were diverse in terms of sexual orientation, gender identity, race, age, income, and other demographic characteristics, reflecting the diversity of Los Angeles County's LGBTQ population. The LACHS survey respondents included 136 LBTQ Latinas, of whom 68 responded to the LELAC follow-up survey.

As described more fully in the Background section below, to contextualize their experiences, we primarily compare LBTQ Latinas to the following six groups in Los Angeles County: non-LBTQ Latinas, GBTQ Latinos, LBTQ White women, GBTQ White men, non-GBTQ White men, and all adults in Los Angeles County. In a few instances, comparisons are made to all LGBTQ adults in Los Angeles County. While data for all of these groups are presented in the Appendix tables, in the text of the report, we focus on presenting findings that are statistically significant, unless otherwise noted.

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[1] 2023 Report on the Status of Women in Los Angeles County, L.A. Cnty. Comm'n Women & Mount Saint Mary's Univ. (2023), https://file.lacounty.gov/SDSInter/bos/commissionpublications/report/1137865_MSMUCommissionReport23R5.pdf.

[2] Jeffrey S. Passel, Mark Hugo Lopez & D'Vera Cohn, *U.S. Hispanic Population Continued Its Geographic Spread in the 2010s*, Pew Rsch. Ctr. (Feb. 3, 2022), https://www.pewresearch.org/short-reads/2022/02/03/u-s-hispanic-population-continued-its-geographic-spread-in-the-2010s/.

[3] Analysis of California Health Interview Survey (CHIS) data on file with authors. For example, based on pooled CHIS data from 2015-17 for Latina adults in Los Angeles County, 4.5% identified as lesbian, gay, or bisexual, compared with 7.4% based on pooled data from 2020-22. When just considering bisexual identification, 7.2% of Latinas aged 18 to 34 in Los Angeles County identified as bisexual based on pooled CHIS data from 2015-17, compared with 14.0% based on pooled CHIS data from 2020-22. For Latinas 35 years of age and older, the change in bisexual identification between the two time periods (0.8% v. 1.5%) was not statistically significant.

[4] *See, e.g.*, Susana Bonis et. al., All. Better Cmty., The Latino/a Scorecard Report: A Policy Roadmap for Transforming Los Angeles (2023), https://afabc.org/wp-content/uploads/2021/08/ABC_2021_Latino-Scorecard_081621.pdf.

[5] *See, e.g.*, *id*.

LBTQ Latinas make up at least 16% of Los Angeles County's LGBTQ adult population, and over 7% of all Latinas in Los Angeles County identify as LBTQ. The majority are under the age of 34, cisgender, bisexual, and live in Supervisorial Districts 1 and 4. Over one in 10 are not U.S. citizens. Several main themes emerged from the analyses presented in this report:

- **Affording life in Los Angeles.** Los Angeles County's historic promise of equality and freedom for LGBTQ adults is being undermined by the rapidly escalating cost of living. More than half (53%) of LBTQ Latinas live in households with incomes below 200% of the federal poverty level (FPL), 51% experienced food insecurity in the past year, and 72% were housing cost burdened. Being able to afford living in Los Angeles County was the most common worry among LBTQ Latinas, and it was the primary issue they would like elected officials to address. As the county's leaders work to address the housing crisis and other economic issues, they must consider the specific challenges faced by LBTQ Latinas.
- **Challenges in building families and receiving social support.** Like all LGBTQ people, most LBTQ Latinas are not born into LGBTQ families and communities that pass on LGBTQ community networks, culture, support, and coping mechanisms. Instead, many LBTQ Latinas in Los Angeles County were not out to all their friends and families, faced unique challenges in having children, faced racial discrimination within LGBTQ communities, and were isolated from their religious and spiritual communities. LBTQ Latinas over the age of 50 were twice as likely to feel lonely as all adults in Los Angeles County. Almost three-fourths of LBTQ Latinas under the age of 50 said they wanted to have children, although they identified many barriers to doing so, including economic vulnerability. Policy solutions for LBTQ Latinas must address these unique challenges to building families and communities.
- **Safety concerns.** Many LBTQ Latinas in Los Angeles County shaped their daily lives around protecting their safety. Only half of the respondents reported feeling safe in their neighborhood either all or most of the time. Furthermore, over one in four reported being verbally harassed by strangers on the street, and one in five reported having been verbally harassed by strangers while visiting an LGBTQ event or organization. In an effort to protect themselves, many chose to avoid public transportation, parks, and beaches; refrained from frequenting LGBTQ-related businesses; and did not attend or participate in Pride festivals or similar events. Additionally, many LBTQ Latinas expressed the need for policies that protect the safety of themselves and their families.
- **Ongoing discrimination and harassment.** Even with supportive state and local laws in place, many LBTQ Latinas in Los Angeles County continued to experience discrimination and harassment in employment, housing, and health care. Over half were not out to their supervisors at work; one in five reported that a landlord or realtor in Los Angeles County had refused to sell or rent to them because of their LBTQ identity; and over one in seven reported receiving inferior services when accessing health care because of their LBTQ identity. These findings confirm that equality "on the books" does not always translate to equality in lived experience, highlighting the limits of legal protections without active enforcement and cultural change. Local protections need to be strengthened and backed with consistent enforcement, training, and monitoring for compliance.
- **Resultant health disparities**. As a result of their lived experiences, LBTQ Latinas in Los Angeles County had higher rates of mental health issues, substance use issues, intimate partner violence, and disabilities than non-LBTQ Latinas and adults overall in Los Angeles

County. These health conditions were exacerbated by discriminatory treatment from health care providers, leading many LBTQ Latinas to avoid care or not to disclose their LBTQ identity to their providers, resulting in poorer health. Improving the health of LBTQ Latinas will require initiatives specifically tailored to their unique health concerns, ongoing training for providers, effective civil rights enforcement, and targeted community education.

- **Communities of resilience.** Despite the challenges, most LBTQ Latinas agreed that Los Angeles County was a good place for LGBTQ people to live. They celebrated the many ways that LGBTQ people contributed to the unique identity of Los Angeles, including by serving as models for others to be strong, love, and live their lives authentically; enriching the county's diversity; and engaging in advocacy and volunteer work on behalf of many communities. While facing numerous challenges, many LBTQ Latinas are already working alongside elected officials and others to make Los Angeles County a better place not only for LBTQ Latinas but for everyone. Their main message to local elected officials is to accept them, seek and include their input in policy discussions, and to work with them as strong and visible allies.

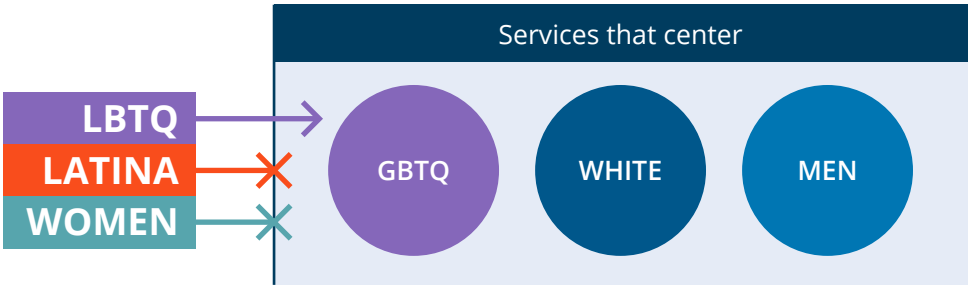
CONSIDERATIONS FOR PROGRAMS AND SERVICES PROVIDERS

The findings of this report indicate that in order to effectively address the needs of LBTQ Latinas, services and programs in Los Angeles County must center around LBTQ Latinas. One of the clearest themes that emerged from this analysis is that the multiple forms of marginalization faced by LBTQ Latinas create unique needs that will not be addressed in programs that center around other parts of the LGBTQ community. For example:

- **Location matters.** Attention should be paid to the location of programs and services for LBTQ Latinas. LBTQ Latinas were concentrated in Supervisorial Districts 4 (29%) and 1 (25%). While 32% of LGBTQ adults in Los Angeles County lived in District 3, which includes West Hollywood and other historic LGBTQ neighborhoods, only 21% of LBTQ Latinas lived in District 3. Notably, GBTQ White men were twice as likely to live in District 3 as LBTQ Latinas (44% vs. 21%). On the other hand, LBTQ Latinas might face challenges in the placement of services in their neighborhoods. While just over half of LBTQ Latinas (53%) felt safe all or most of the time in their neighborhoods, 89% of GBTQ White men felt that way.
- **Programs must be accessible to those who are younger and who identify as bisexual.** Services for LBTQ Latinas need to be geared towards those who are younger, and they must address biphobia and bisexual erasure. More than six in 10 LBTQ Latinas (63%) were between the ages of 18 and 34 years compared with 36% of non-LBTQ Latinas and 22% of GBTQ White men. Two-thirds of LBTQ Latinas in Los Angeles County identified as cisgender bisexual women (67%) compared with 33% of GBTQ Latinos and 18% of GBTQ White men who identified as cisgender bisexual men.
- **Faith-based providers should be welcoming.** LBTQ Latinas were twice as likely as GBTQ White men to indicate that they were part of a religious or spiritual community (68% vs. 34%) and were over twice as likely to not be out to anyone in their community of faith (65% vs. 28%). Many LBTQ Latinas avoided religious services out of fear of unfair treatment, which could create complexities for services provided by faith-based organizations. Faith-based service providers must be open and affirming to LBTQ Latinas. Government contracts with these providers should include requirements to ensure effective services for LBTQ Latinas.

- **Intracommunity bias and discrimination should be addressed.** Effective services for LBTQ Latinas should address racism within LGBTQ communities; homophobia in Latinx communities; and sexism, transphobia, and biphobia that exist in both communities.

Services that center GBTQ White men will be incomplete.



Historically, better-resourced LGBTQ services and organizations have centered White GBTQ men in the United States and Los Angeles, often to the exclusion of people of color and women, including LBTQ Latinas.[6] Nationally, in 2023, only 37% of all U.S. foundation funding for domestic LGBTQ communities and causes supported LGBTQ communities of color, and only 6% supported Latinx LGBTQ communities.[7]

Services and programs that center the experiences of GBTQ White men in Los Angeles County may not fully account for the economic, health, and other challenges faced by many LBTQ Latinas. Here are some key examples:

- In terms of having a college degree or more, only 35% of LBTQ Latinas had a degree, compared with 62% of GBTQ White men.
- LBTQ Latinas had higher rates of living in households with incomes of 200% or below the FPL (53% vs. 21%), that are housing cost-burdened (72% vs. 50%), and that have experienced food insecurity in the past year (51% vs. 16%) than GBTQ White men.
- LBTQ Latinas were also over five times as likely to have been unhoused at some time in the past five years (16% vs. 3%) and were less likely to be homeowners (29% vs. 49%) than GBTQ White men.

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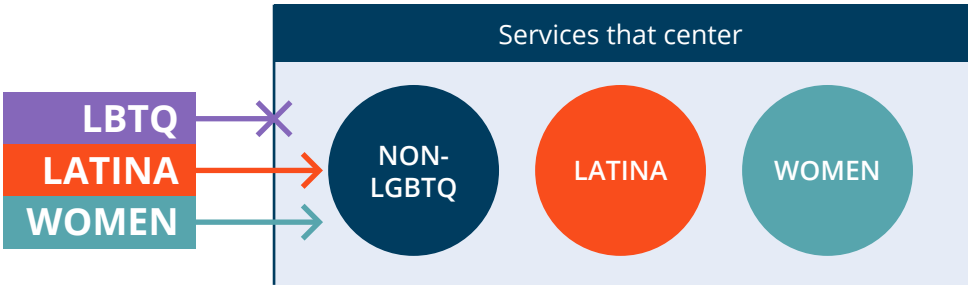
[6] *See, e.g.*, *Activism After Stonewall,* LIBR. CONG.: LGBTQIA+ STUD.: RES. GUIDE, https://guides.loc.gov/lgbtq-studies/after-stonewall (last visited Sept. 10, 2025) ("However, gay liberation was not equally liberating for everyone. People of color, women, and trans people were often marginalized by the mainstream gay rights movements, and continued to form their own organizations… People of color largely continued to work in separate movements for racial justice and civil rights, never having felt welcome by the predominantly white homophile movement. Similarly, a number of lesbian activists began to organize independent groups, including lesbian separatist organizations and collectives. Del Martin, co-founder of the Daughters of Bilitis, wrote in 1970: "Goodbye to the male chauvinists of the homophile movement...Gay is Good but not good enough, so long as it is limited to white males only."). *See also* NICOLE PEREZ & LOURDES TORRES, LATINA PORTRAIT: LATINA QUEER WOMEN IN CHICAGO (n.d.), https://vawnet.org/sites/default/files/assets/files/2016-10/LatinaQueerWomeninChicago.pdf ("In recent years, there has been an increase in data on Latinos/as and on LGBTQQ lives and experiences. However, the data is primarily about Caucasian white gays and lesbians, and among Latino/a publications, the experiences of LGBTQQ women are often ignored.").

[7] *Resource Tracking Data Explorer: Key Findings for 2023*, FUNDERS LGBTQ ISSUES (2023), https://lgbtfunders.org/data-explorer/ (last visited Sept. 10, 2025).

- Further, almost half (48%) of LBTQ Latinas met the CDC's definition of obesity, compared with 19% of GBTQ White men.
- Research indicates that supportive parenting and family formation services are crucial for the well-being of LBTQ Latinas. LBTQ Latinas under the age of 50 were over twice as likely to say they wanted to have children as GBTQ White men of the same age (74% vs. 33%). Furthermore, services would need to address different barriers to parenting. For example, LBTQ Latinas were much less likely to identify not having a partner or spouse as a barrier to having children than GBTQ White men (15% vs. 58%).
- LBTQ Latinas in Los Angeles County were much more likely to be non-citizens than GBTQ White men (13% vs. 2%). When gearing services towards LBTQ Latinas, providers should keep in mind that 20% are foreign-born and that, regardless of citizenship status, they may face unique challenges, including language barriers and cultural barriers. Some LBTQ Latinas lack the required immigration status or documentation for eligibility for services, experiencing additional barriers. In a climate of increased levels of detention and deportation, they may also experience fear and/or mistrust toward institutions that could support them, their families, and their loved ones.
- Further, levels of openness or outness about one's LGBTQ identity differ greatly between LBTQ Latinas and GBTQ White men. LBTQ Latinas are far less likely to be out to all of their immediate family members (45% vs. 75%) and all of their health care providers (31% vs. 74%) than GBTQ White men. Programs and services that assume family support or the sharing of household resources should consider the unique needs of LBTQ Latinas to ensure equitable access and effective support. Health care providers and services should consider that many LBTQ Latinas, particularly those who are bisexual, might not be out when accessing health care services.

Services that center non-LBTQ Latinas will be incomplete.

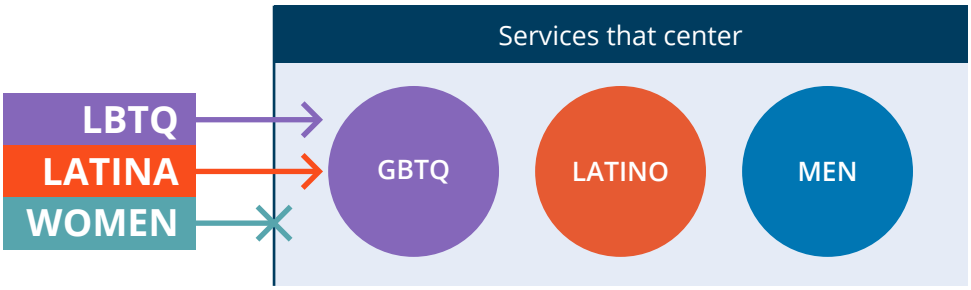


Services and programs that center non-LBTQ Latinas may not account for health disparities and other issues faced by LBTQ Latinas. For example:

- LBTQ Latinas were more than twice as likely to report symptoms of depression (23% vs. 11%), loneliness (45% vs. 22%), suicide attempts (24% vs. 4%), binge drinking (47% vs. 17%), heavy marijuana use (21% vs. 3%), and intimate partner violence (49% vs. 22%) as non-LBTQ Latinas.
- LBTQ Latinas were also much more likely to report living with a disability (53% vs. 29%); living in a household experiencing food insecurity (51% vs. 35%); and having been unhoused at some point in the past five years (16% vs. 6%) than non-LBTQ Latinas.

- LBTQ Latinas were also less likely to be currently married or in a domestic partnership compared to non-LBTQ Latinas (29% vs. 45%).
- LBTQ Latinas were more likely to be U.S.-born citizens than non-LBTQ Latinas (80% v. 61%).
- In terms of education, 35% of LBTQ Latinas had a college degree or more, compared with only 21% of non-LBTQ Latinas.

Services that center GBTQ Latinos will be incomplete.



Similarly, programs that focus on GBTQ Latinos may not fully address the needs of LBTQ Latinas. For example:

- Two-thirds of LBTQ Latinas (67%) identified as cisgender bisexual women while only 33% of GBTQ Latinos identified as cisgender bisexual men.
- LBTQ Latinas were also much more likely to report suicide attempts (24% vs. 6%) and intimate partner violence (49% vs. 27%) than GBTQ Latinos.

KEY FINDINGS

Demographics

- There are approximately 106,000 LBTQ Latina adults living in Los Angeles County.
    - By Supervisorial District, over half of LBTQ Latinas lived in District 4 (29%) and District 1 (25%).
- LBTQ Latinas are a younger population. More than six in 10 LBTQ Latina adults (63%) were between the ages of 18 and 34 years compared with 36% of non-LBTQ Latinas, 32% of LBTQ White women, 22% of GBTQ White men, and 18% non-GBTQ White men.
- Most (96%) LBTQ Latina adults were cisgender, and 4% were transgender.
- Sixty-seven percent of LBTQ Latina adults in Los Angeles County identified as cisgender biseuxal women and 29% as cisgender lesbians.
    - LBTQ Latinas were almost twice as likely to identify as cisgender bisexual women (67%) as GBTQ Latinos were to identity as cisgender bisexual men (33%).
- Most LBTQ Latina adults (80%) were U.S.-born citizens, 7% were naturalized citizens, and 13% were not U.S. citizens.
    - LBTQ Latinas were more likely to be U.S.-born citizens than non-LBTQ Latinas (80% v. 61%).

- LBTQ Latinas were much more likely to be non-citizens (neither U.S.-born nor naturalized citizens) than LBTQ White women (less than 2%) and GBTQ White men (2%) in Los Angeles County.

- Over half of LBTQ Latinas and non-LBTQ Latinas (53%) met the criteria used by the U.S. Census Bureau to assess disability.
  - This was over double the rate of disability for non-GBTQ White men (22%) in Los Angeles County.

Climate in Los Angeles County

- Most LBTQ Latinas felt that "Los Angeles County is a good place for LGBTQ people to live," with 81% somewhat or strongly agreeing with that statement.
- When asked more specifically about acceptance of LGBTQ people in the neighborhood where they lived, almost one in four LBTQ Latinas (24%) indicated there was only "a little" acceptance or "none."
  - While not statistically significant, this was higher than GBTQ Latinos (13%), GBTQ White men (7%), and LBTQ White women (5%).

Joys, Worries, and Contributions to Los Angeles of LBTQ Latinas

- When asked about their biggest sources of joy, LBTQ Latinas emphasized family, friends, and pets; exercising and being outside; listening to and making music; and cooking and enjoying food.
- When asked about their biggest sources of worry, LBTQ Latinas emphasized concerns about meeting the high cost of living in Los Angeles County; their relationships and caregiving for friends, family, and pets; their health; and their jobs.
- In terms of what LGBTQ people contributed to Los Angeles County, the types of contributions identified by LBTQ Latinas fell into four primary areas:
  - **Positive values and characteristics**. Fifty-four percent of LBTQ Latinas identified specific positive values and characteristics that LGBTQ people share not only with the LGBTQ community but also more broadly. Examples included acceptance and tolerance, compassion and support, inspiring everyone to be their authentic selves, love, joy, vibrancy and spirit, a strong sense of community, and a belief in equality.
  - **Enriching diversity.** Twenty-eight percent of LBTQ Latinas wrote about how LGBTQ people and communities added to the county's rich diversity, including by being role models for LGBTQ people who were not yet out and helping to educate non-LGBTQ people about LGBTQ communities.
  - **Community leadership and service**. One in four LBTQ Latinas (25%) discussed the community service and activism that LGBTQ people provide to LGBTQ communities and to other marginalized communities.
  - **Culture, arts, and creativity.** Finally, 13% wrote about how LGBTQ people's creativity contributes to the arts, culture, and entertainment in Los Angeles.

- LBTQ Latinas reported high levels of civic engagement, with 74% reporting at least one form of civic engagement in the past year. In the past year:
    - Approximately half (53%) of LBTQ Latinas reported posting or responding to social media posts about social issues.
    - Four in 10 reported signing a petition (40%) or donating money to community organizations or causes (39%).
    - Approximately one in five reported volunteering with a community group or organization (22%) or contacting a public official to express their feelings about a particular issue (17%).
    - Approximately one in 10 (11%) reported joining a march or demonstration, and 8% reported working on a political campaign in the past two years.

Recommendations for Elected Officials

When asked for suggestions about how local elected officials could improve the quality of life for LGBTQ people in Los Angeles County, LBTQ Latinas focused on five main themes:

- Elected officials engaging more effectively with LGBTQ communities through acceptance and support of LGBTQ people; listening and incorporating their input; and public and visible allyship;
- Increasing resources and awareness for services, programs, and events for LGBTQ communities;
- Protecting the safety of LGBTQ communities;
- Creating more affordable and safe housing, health care, and educational opportunities; and
- Protecting the legal rights and equality of LGBTQ people.

When asked separately about how elected officials could support LGBTQ people with family formation, LBTQ Latinas recommended that they:

- Provide more support and resources;
- Affirm LGBTQ families and provide them with equal parenting rights;
- Make adoption, foster care, and assisted reproductive technology (ART), including in vitro fertilization (IVF), easier and more affordable;
- Make school systems safer and more welcoming for LGBTQ students and parents; and
- Increase support for paid family leave and childcare.

Family and Friends

- Less than half (45%) of LBTQ Latinas were out to all their immediate family.
    - LBTQ Latinas (45%) were less likely to be out to all of their immediate family members than GBTQ White men (75%).
- Similarly, only 46% reported being out to all of their non-LGBTQ friends.
- Twenty-nine percent of LBTQ Latinas were currently married or in a domestic partnership compared with 45% of non-LBTQ Latinas.

- Almost half (47%) of LBTQ Latinas over age 50 were living alone, compared to 22% of all adults in Los Angeles County.
- Based on the UCLA Loneliness Scale, 45% of LBTQ Latinas in Los Angeles County were lonely, compared with 26% of all adults in Los Angeles County, 22% of non-LBTQ Latinas, and 20% of non-GBTQ White men.
- In terms of getting the emotional support they needed, 50% of LBTQ Latinas in Los Angeles County felt they always or usually received the support they needed.
    - In comparison, 73% of non-GBTQ White men in Los Angeles County felt they always or usually received the support they needed.
- Fifteen percent of LBTQ Latinas were parents, similar to LGBTQ adults in Los Angeles County overall (18%).
    - LBTQ Latinas had become parents through a variety of pathways: 70% of those with children had biological children, 2% had stepchildren, and 21% had adopted and/or fostered children.
- Almost three-fourths (74%) of LBTQ Latinas under the age of 50 said they wanted to have children, including some who already had at least one child.
    - LBTQ Latinas under the age of 50 were over twice as likely to say they wanted to have children compared to GBTQ White men (74% vs. 33%).
    - Among LBTQ Latinas who wanted a child, 68% were considering intercourse, 52% were considering adoption, 41% were considering ART, and 31% were considering fostering a child as a path to parenthood.
    - However, when asked about their preferred method for having a child, only 10% preferred adoption or fostering, with the others preferring intercourse (59%) or ART (31%). Most LBTQ Latinas (59%) felt that their preferred method for having a child was not at all likely or only somewhat likely, identifying cost (27%), not having a partner or spouse (15%), and fertility problems (13%) as key barriers.

LGBTQ Communities and Spaces

- One in five LBTQ Latinas (20%) reported having been verbally harassed by strangers while attending an LGBTQ event (like a Pride parade or a festival) or visiting an LGBTQ organization, community center, theater, restaurant, or business in LA.
- Due to fears of being assaulted or attacked because of their LGBTQ status, 11% of LBTQ Latinas in the county had avoided LGBTQ bars, nightclubs, or events during the past year, and 8% had avoided LGBTQ organizations or businesses.
- Several LBTQ Latinas shared experiences of racism within LGBTQ communities or spaces.

Religious and Spiritual Communities

- Two-thirds (68%) of LBTQ Latinas identified as a spiritual person, and 20% identified as a religious person.

- Over half (53%) of LBTQ Latinas in Los Angeles County indicated that religion was very or somewhat important in their lives.
- Although not statistically significant, LBTQ Latinas (19%) were more likely to report attending religious services at least once a month than GBTQ Latinos (10%), White LGBTQ women (8%), and men (7%).
- While over two-thirds (68%) of LBTQ Latinas in Los Angeles County indicated that they were part of a spiritual or religious community, the majority of them (65%) were not out to anyone in that community, and only 21% were out to everyone.
    - LBTQ Latinas were twice as likely to indicate that they were part of a religious or spiritual community than GBTQ White men in Los Angeles County (68% vs. 34%), but those who were, were also over twice as likely to not be out to anyone in that community compared to GBTQ White men (65% vs. 28%).
- Almost one in four LBTQ Latinas reported that they avoided religious or spiritual practices to avoid unfair treatment (23%) or to avoid being threatened or physically attacked (23%) because of their LBTQ identity in the past year.

Employment

- Almost seven in 10 (69%) LBTQ Latinas in Los Angeles County were employed, 15% were unemployed but looking for work, and 17% were not in the workforce.
- Of employed LBTQ Latinas, over half (52%) were not out to their supervisor, and over one-third (37%) were not out to any of their coworkers.
- Over one in eight (13%) LBTQ Latinas reported being fired or not promoted at work within the past five years because of their sexual orientation or gender identity while living in Los Angeles County.
- Similarly, over one in eight (14%) LBTQ Latinas reported not being hired for a job within the past five years because of their sexual orientation or gender identity while living in Los Angeles County.
- One in seven (14%) LBTQ Latinas reported that they had been verbally harassed by their supervisor or coworkers during their careers based on their sexual orientation, gender identity, or gender expression while working in Los Angeles County. A similar percentage (16%) reported having been verbally harassed by customers or clients.

Public Spaces and Safety

- Just over half (53%) of LBTQ Latinas felt safe all or most of the time in the neighborhood where they lived. In contrast, 89% of GBTQ White men felt safe all or most of the time in their neighborhoods.
- Thirty-three percent of LBTQ Latinas who have lived their entire lives in Los Angeles County reported that they had been a victim of a personal crime at least once in their lifetime, and 43% reported that they had been a victim of a property crime.
- Over one in four (28%) LBTQ Latinas reported being verbally harassed by strangers on the street. Eighty percent had their most recent experience in the past five years.

- Over one in five (22%) LBTQ Latinas reported avoiding restaurants and stores in Los Angeles County in the past year due to concerns about being threatened or physically attacked because of their LBTQ identity, and approximately one in 10 had avoided going to public parks or beaches (13%) and using public transportation (10%) for the same reasons.
- Some LBTQ Latinas reported having had negative interactions with police and law enforcement in Los Angeles County, including verbal harassment (12%), physical harassment (5%), sexual harassment (5%), and being solicited for sex (4%).

Economic Disparities

- **Education.** Thirty-five percent of LBTQ Latinas had a college degree or more compared with 21% of non-LBTQ Latinas, 61% of LBTQ White women, 62% of GBTQ White men, and 50% of non-GBTQ White men.
    - LBTQ Latinas were twice as likely to have a four-year college degree as non-LBTQ Latinas (28% vs. 13%).
    - While they had similar rates (7%) of having graduate degrees as non-LBTQ Latinas (8%) and GBTQ Latinos (11%), they were significantly less likely to have a graduate degree than LBTQ White women (26%), GBTQ White men (30%), and non-GBTQ White men (20%).
- **Household Income.** Approximately one in four (23%) LBTQ Latinas in Los Angeles County were in households living on less than 100% of the Federal Poverty Level (FPL), and over half (53%) were living on less than 200% of the FPL.
    - LBTQ Latinas (53%) were over twice as likely to be living in households with incomes below 200% of the FPL than LBTQ White women (23%) and GBTQ White men (21%). They were three times as likely to be living in such households as non-GBTQ White men (14%).
- **Food Insecurity.** Over half of LBTQ Latinas in Los Angeles County (51%) lived in households that met criteria for food insecurity in the past 12 months.
    - This was twice the rate of food insecurity for all adults in Los Angeles County (25%) and higher than the rate for non-LBTQ Latinas (35%), LBTQ White women (19%), GBTQ White men (16%), and non-GBTQ White men (11%).
- **Housing**
    - Almost two-thirds (64%) of LBTQ Latinas in Los Angeles County were renters.
    - LBTQ Latinas (29%) had a much lower rate of home ownership than GBTQ White men (49%) and non-GBTQ White men (63%) in Los Angeles County.
    - Almost three-fourths (72%) of LBTQ Latinas lived in households that were housing cost-burdened, spending 30% or more of their household income on housing, compared with 54% of adults overall in Los Angeles County.
    - Over twice as many LBTQ Latinas (32%) were severely housing cost-burdened (spending over 50% of their household income on housing) compared to GBTQ (15%) and non-GBTQ (12%) White men.

- Sixteen percent of LBTQ Latinas had been unhoused at some time in the past five years, over double the rate for all adults in Los Angeles County (7%) and over four times the rate of GBTQ (3%) and non-GBTQ White men (4%).
- One in five LBTQ Latinas (21%) reported having had a landlord or realtor in Los Angeles County refuse to sell or rent to them because of their sexual orientation or gender identity.

Health Disparities

- Almost one in four (23%) LBTQ Latinas reported symptoms that indicated that they were at major risk of depression.
  - Symptoms of depression were over twice as common among LBTQ Latinas than among all adults in Los Angeles County (11%), non-LBTQ Latinas (11%), and non-GBTQ White men (7%).
- Almost one in four (24%) LBTQ Latinas attempted suicide at some point in their lives.
  - LBTQ Latinas were much more likely to report a suicide attempt than all adults in Los Angeles County (4%), non-GBTQ White men (3%), non-LBTQ Latinas (4%), and GBTQ Latinos (6%).
- While almost half (46%) of LBTQ Latinas had received mental health care in the past 12 months, about one in four (25%) expressed an unmet need for care.
- Over twice as many LBTQ Latinas (49%) as adults overall in Los Angeles County (19%) reported experiencing intimate partner violence (IPV) at some point in their lives.
  - LBTQ Latinas were more likely to report IPV than non-LBTQ Latinas (22%), GBTQ Latinos (27%), and non-GBTQ White men (17%).
- Almost half (47%) of LBTQ Latinas reported binge drinking in the prior month compared to 22% of adults overall in Los Angeles County, 17% of non-LBTQ Latinas, and 22% of non-GBTQ White men.
- Twenty-one percent of LBTQ Latinas reported heavy marijuana use (meaning daily or near daily use in the prior month), three times more frequently than adults overall in Los Angeles (6%) and seven times more frequently than non-LBTQ Latinas (3%).
- Two-thirds (67%) of LBTQ Latinas met the CDC's definition of being overweight or obese, with almost half (48%) meeting the CDC's definition of obesity.
  - LBTQ Latinas (48%) were more likely to be living with obesity than adults overall in Los Angeles County (30%), including LBTQ White women (24%), GBTQ White men (19%), and non-GBTQ White men (23%).
- LBTQ Latinas (41%) reported more difficulty in accessing medical care than all adults in Los Angeles (25%) and non-GBTQ White men (15%).
- While accessing health care services in Los Angeles County, 18% of LBTQ Latinas reported having been verbally harassed, and 16% reported that they had been denied care or provided with inferior care, because of their sexual orientation or gender identity, while living in Los Angeles County. Three-fourths of LBTQ Latinas had their most recent experience of such harassment or discrimination in the past five years.

- About one in 10 LBTQ Latinas (11%) in Los Angeles County had avoided visiting a health care provider in the prior year to avoid unfair treatment because of their sexual orientation or gender identity.
- Among those who had health care providers, 31% of LBTQ Latinas reported being out to all their health care providers, while 39% reported not being out to any of their health care providers.
    - In contrast, about three-fourths (74%) of GBTQ White men in Los Angeles County were out to all of their health care providers, and only 9% were not out to any of their health care providers.

BACKGROUND

> *Being a lesbian Latina woman is just hard in general, probably a bit less in progressive CA, but I would definitely think twice about living my true self in other states where racism and homophobia are rampant.*
>
> — Cisgender Latina lesbian in her 40s

This report uses representative data collected from 1,006 LGBTQ Los Angelenos who completed the Los Angeles County Department of Public Health's 2023 Los Angeles County Health Survey (LACHS) and 504 LGBTQ Angelenos who also completed the Lived Experiences in Los Angeles County (LELAC) Survey, which was a call-back study to LACHS developed by the Williams Institute. Survey respondents were diverse in terms of sexual orientation, gender identity, race, age, income, and other demographic characteristics, reflecting the diversity of Los Angeles County's LGBTQ population. The LACHS survey respondents included 136 LBTQ Latinas, of whom 68 responded to the LELAC follow-up survey. For this report, LBTQ Latinas are defined as adults 18 years and older in Los Angeles County of Hispanic, Latino, or Spanish origin who identify as 1) cisgender women with a sexual orientation reported as lesbian or bisexual+ or 2) transgender women of any sexual orientation.

While there has been an increased effort to gather data on the Latinx and LGBTQ communities within the United States, major gaps persist in data collection and analysis at the intersection of race/ethnicity, LGBTQ identity, and gender.[8] There is a specific need for research informed by intersectional frameworks to provide a deeper understanding of how multiple forms of marginalization affect subpopulations within LGBTQ communities, including LBTQ Latinas.[9] Researchers focused on health disparities by race/ethnicity and sexual orientation have recognized that intersectional research on LBTQ Latinas remains limited.[10] This lack of research restricts the ability of policymakers, service providers, and LGBTQ advocates to address the unique challenges LBTQ Latinas face, making it difficult to develop culturally responsive programs and policies that promote equity and inclusion.

One barrier to intersectional research is limitations in data collection efforts, including surveys that ask about multiple marginalized identities in the same survey or do not have large enough samples to support analyses of LGBTQ populations or subpopulations. Fortunately, in California, government agencies have led statistical efforts to map intersections of LGBTQ identity and race/ethnicity.[11] Further,

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[8] For a longitudinal analysis of US national demographic data collection, from 1960 to 2019, *see* Ruth Enid Zambrana et al., *Analysis of Latina/o Sociodemographic and Health Data Sets in the United States From 1960 to 2019: Findings Suggest Improvements to Future Data Collection Efforts*, 48 Health Educ. & Behav. 320 (2021). For a summary of differences across racial groups among LGBT people in the US, *see* Bianca D.M. Wilson, Lauren Bouton & Christy Mallory, Williams Inst., Racial Differences Among LGBT Adults in the US (2022), https://williamsinstitute.law.ucla.edu/publications/racial-differences-lgbt/.

[9] Sabrina Alimahomed, *Thinking Outside the Rainbow: Women of Color Redefining Queer Politics and Identity*, 16 Soc. Identities 151 (2010).

[10] Hyun-Jun Kim & Karen I. Fredriksen-Goldsen, *Hispanic Lesbians and Bisexual Women at Heightened Risk or* [sic] *Health Disparities*, 102 Am. J. Pub. Health e9 (2012).

[11] Vanessa Miguelino-Keasling, Cal. Dep't Pub. Health, Sexual Orientation and Gender Identity: Selected Demographics and Health Indicators California Adults, 2015-2019 (2021), https://www.cdph.ca.gov/Programs/CCDPHP/DCDIC/CDSRB/CDPH%20Document%20Library/BRFSS/Snapshot_SOGI_Issue4_April21_final_ADA.pdf.

community-level and academic research focused on Los Angeles County has also considered how specific subpopulations within LGBTQ communities face greater challenges, including transgender and nonbinary adults, LGBTQ adults of color, bisexual men and women,[12] and transgender Latinas.[13]

Measuring discrimination and outcomes that consider the totality of LBTQ Latinas' lives requires an intersectional approach to analysis. Our intersectional approach builds on the foundational work of UCLA Law Professor Kimberlé Crenshaw, who describes the interactive nature of discrimination faced by people who have two or more marginalized social identities, relative to those with power in society.[14] Intersectional frameworks move away from older practices that measured discrimination based on one characteristic at a time—for example, race or gender—without attention to the ways in which mistreatment is often enacted, in people's lived experience, at the point where their social identities converge.

Researchers who have applied intersectional frameworks to LBTQ women of color have used the term "triple jeopardy" to name the compounding impacts of LBTQ identity, race/ethnicity, and gender,[15] although "triple" can be an undercount. LBTQ Latinas live at an intersection of a number of social identities that are marginalized in U.S. society. They are not only women who are each some combination of sexual, gender, and racial/ethnic minorities, but many are also immigrants, non-native speakers of English, low-income, disabled, or have other identities that are not assigned privilege in the United States. While these social identities are all areas in which LBTQ Latinas can experience marginalization, they are also areas in which LBTQ Latinas can find strength, community, and identity, and which they navigate as they build families, relationships, livelihoods, and more.

To support our intersectional analysis, this report presents descriptive analyses that highlight differences in experiences and outcomes between LBTQ Latinas and other groups that differ in terms of race/ethnicity, sexual orientation, gender identity, sex, and combinations of these factors. The clearest impact of intersectional discrimination faced by LBTQ Latinas in LA County can be identified by attending closely to the differences in outcomes between LBTQ Latinas, who face discrimination on some combination of gender, sexual orientation, gender identity, and race/ethnicity, and other factors, and non-GBTQ White men, who do not face discrimination based on these social identities (although some may face discrimination based on other characteristics or social identities). Throughout the report, we primarily compare LBTQ Latinas to the following six groups in Los Angeles County:

- **Non-LBTQ Latinas**, which include adults of Hispanic, Latino, or Spanish origin who are cisgender women with sexual orientation reported as straight or heterosexual;

[12] Brad Sears et al., Williams Inst., Communities of Resilience: The Lived Experiences of LGBTQ Adults in Los Angeles County (2024), https://williamsinstitute.law.ucla.edu/publications/lgbtq-la-county/.

[13] Miguel Fuentes Carreño et al., Williams Inst., A Quality of Life Study with Transgender, Gender Nonconforming, and Intersex (TGI) Adults in the City of Los Angeles (2023), https://williamsinstitute.law.ucla.edu/wp-content/uploads/TGI-QOL-LA-Nov-2023.pdf.

[14] Kimberlé Crenshaw, *Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics*, 1989 U. Chi. L. F. 139 (1989).

[15] Beverly Greene, *Lesbian Women of Color: Triple Jeopardy*, 1 J. Lesbian Stud. 109 (1997).

- **GBTQ Latinos**, which include adults of Hispanic, Latino, or Spanish origin who are 1) cisgender men with sexual orientation reported as gay or bisexual+[16] or 2) transgender men of any sexual orientation;
- **LBTQ White women**, which include non-Hispanic White-only adults (meaning adults who do not identify with another race other than White) and are 1) cisgender women with sexual orientation reported as lesbian or bisexual+ or 2) transgender women of any sexual orientation;
- **GBTQ White men**, which include non-Hispanic White-only adults who are 1) cisgender men with sexual orientation reported as gay or bisexual+ or 2) transgender men of any sexual orientation; and
- **Non-GBTQ White men**, which include non-Hispanic White-only adults who are cisgender men with sexual orientation reported as straight or heterosexual.
- **All adults** in Los Angeles County of any race/ethnicity, sexual orientation, or gender identity.

For further context, in some places we also compare LBTQ Latinas to all LGBTQ adults in Los Angeles County, drawing on our earlier publications based on LACHS 2023 and LELAC.[17]

The following definitions were used to create these groups:

- **Cisgender** is defined as a person whose internal sense of gender corresponds with the sex the person was identified as having at birth.
- **Transgender** includes transgender people whose internal sense of gender does not correspond with the sex the person was identified as having at birth.[18]
- **Bisexual+** includes people who identify as bisexual, pansexual, sexually fluid, heteroflexible, homoflexible, or queer.

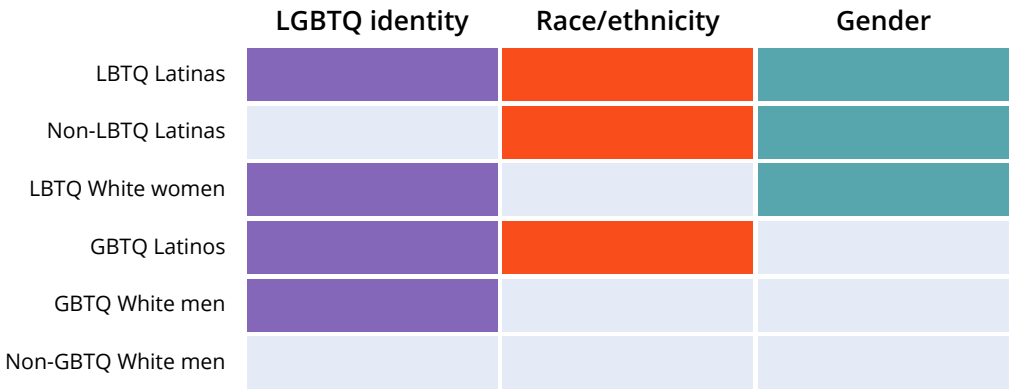
A simplified way to understand these comparisons is that the first three groups (non-LBTQ Latinas, LBTQ White women, GBTQ Latinos) differ from LBTQ Latinas along one form of identity and corresponding marginalization (respectively, LGBTQ identity, race/ethnicity, *or* gender alone); the fourth (GBTQ White men) along two forms of identity and corresponding marginalization (race/ethnicity *and* gender); and the fifth (non-GBTQ White Men) along three forms (LGBTQ identity, race/ethnicity, *and* gender). See Figure 1. What is oversimplified in this framing is the ways in which these marginalized identities interact (e.g., the economic and health disparities experienced by LBTQ Latinas can be greater than, and different from, the sum of disparities based on separately considering LGBTQ identity, race/ethnicity, and gender).

[16] Bisexual+ includes people who identified as bisexual on the survey or who had write-in responses such as "pansexual," "sexually fluid," "heteroflexible," "homoflexible," or "queer."

[17] *See* Sears et al., *supra* note 12; Brad Sears, Christy Mallory & Kerith J. Conron, Williams Inst., Hear Us. Support Us. Join Us!: Civic Engagement of LGBTQ Adults in LA County and Recommendations for Local Elected Officials (2024), https://williamsinstitute.law.ucla.edu/wp-content/uploads/LACo-Elected-Officials-Jun-2024.pdf; Brad Sears, Christy Mallory & Kerith J. Conron, Williams Inst., We Are LA!: What LGBTQ People Contribute to Los Angeles (2024), https://williamsinstitute.law.ucla.edu/publications/la-lgbtq-contributions/.

[18] Since this report is focused on cisgender and transgender women, Latinx people who identify as nonbinary are not included in this analysis.

Figure 1. Shared LGBTQ, race/ethnicity, and gender between LBTQ Latinas and comparison groups in this report



More specifically, comparing LBTQ Latinas to non-LBTQ Latinas highlights differences based on sexual orientation and transgender status, while keeping gender and race/ethnicity the same. Prior Williams Institute research has found that LGBTQ Americans have higher rates of poverty compared to their non-LGBTQ counterparts,[19] are more likely to experience food insecurity,[20] are twice as likely to have experienced homelessness,[21] and are five times more likely to be victims of violent crime.[22] Evidence also shows that LGBTQ populations experience significant health disparities[23] and increased threats of harassment and violence.[24]

To isolate differences based on gender among LGBTQ Latinx people, we compare LBTQ Latinas to GBTQ Latinos. Despite much progress over the past decades, gender inequality persists. Women earn less income in similar occupations,[25] are more likely to live in poverty,[26] and are more than twice

[19] M.V. Lee Badgett, Soon Kyu Choi & Bianca D.M. Wilson, Williams Inst., LGBT poverty in the United States: A Study of Differences Between Sexual Orientation and Gender Identity Groups (2019), https://williamsinstitute.law.ucla.edu/wp-content/uploads/National-LGBT-Poverty-Oct-2019.pdf.

[20] Brad Sears, Nathan Cisneros & Jet Harbeck, Williams Inst., Food Insecurity and Reliance on SNAP Among LGBT Adults (2025), https://williamsinstitute.law.ucla.edu/publications/lgbt-food-insecurity-snap/.

[21] Bianca D.M. Wilson et al., Williams Inst., Homelessness Among LGBT Adults in the US (2020), https://williamsinstitute.law.ucla.edu/publications/lgbt-homelessness-us/.

[22] Ilan H. Meyer & Andrew R. Flores, Williams Inst., Anti-LGBT Victimization in the United States: Results from the National Crime Victimization Survey (2022-2023) (2025), https://williamsinstitute.law.ucla.edu/publications/anti-lgbt-victimization-us/.

[23] Kesha Baptiste-Roberts, et al., *Addressing Health Care Disparities Among Sexual Minorities*, 44 Obstetrics & Gynecology Clinics N. Am. 71 (2017); Nik M. Lampe et al., *Health Disparities Among Lesbian, Gay, Bisexual, Transgender, and Queer Older Adults: A Structural Competency Approach*, 98 Int'l J. Aging & Hum. Dev. 39 (2023); Ilan H. Meyer, *Prejudice, Social Stress, and Mental Health in Lesbian, Gay, and Bisexual Populations: Conceptual Issues and Research Evidence*, 129 Psych. Bull. 674 (2003).

[24] Sabra L. Katz-Wise & Janet S. Hyde, *Victimization Experiences of Lesbian, Gay, and Bisexual Individuals: A Meta-Analysis*, 49 J. Sex Rsch. 142 (2012); Rebecca L. Stotzer, *Violence Against Transgender People: A Review of United States Data*, 14 Aggression & Violent Behav. 170 (2009).

[25] Ariane Hegewisch & Cristy Mendoza, Inst. for Women's Pol'y Rsch., Women Earn Less than Men Whether They Work in the Same or Different Occupations: The Gender Wage Gap by Occupation, Race, and Ethnicity 2024 (2025), https://iwpr.org/wp-content/uploads/2025/03/Occupational-Wage-Gap-Fact-Sheet-2025-1.pdf.

[26] Sarah Javaid, Nat'l Women's L. Ctr., National Snapshot: Poverty Among Women & Families in 2023 (2024), https://nwlc.org/

as likely to experience sexual harassment or assault in the past year[27] than men. Health disparities between men and women vary; women are less likely to have their pain taken seriously (thus, less likely to have it managed),[28] are more likely to report delays and barriers to health care access,[29] and face longer wait times in the emergency room when needing to be evaluated for possible heart attacks,[30] while men are less likely to seek and receive mental health treatment[31] and consume more alcohol and have more alcohol-related injuries (though these gaps are narrowing).[32]

Similarly, while there has been much focus on eliminating systemic racism, racial disparities in health care[33] and socioeconomic well-being [34] persist. Therefore, we compare LBTQ Latinas to LBTQ White women to highlight differences based on race/ethnicity.

Comparing LBTQ Latinas to GBTQ White men focuses on the compounding impacts of sexism and racism, as highlighted by Crenshaw and other scholars.[35] Comparing LBTQ Latinas to non-GBTQ White men accounts for three forms of oppression (racism, sexism, and anti-LGBTQ bias) together,

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wp-content/uploads/2024/12/National-Snapshot-Poverty-Among-Women-Families-in-2023-FINAL.pdf.

[27] Anita Raj et al., Newcomb Inst., #MeToo 2024: A National Study of Sexual Harassment and Assault in the United States (2024), https://newcomb.tulane.edu/sites/default/files/MeToo%202024%20Report%20_1_0.pdf.

[28] Mika Guzikevits et al., *Sex Bias in Pain Management Decisions*,121 Proc. Nat'l Acad. Sci. e2401331121 (2024); Lanlan Zhang et al., *Gender Biases in Estimation of Others' Pain*, 22 J. Pain 1048 (2021).

[29] Marilyne Daher et al., *Gender Disparities in Difficulty Accessing Healthcare and Cost-Related Medication Non-Adherence: The CDC Behavioral Risk Factor Surveillance System (BRFSS) Survey*, 153 Preventive Med. 106779 (2021).

[30] Darcy Banco et al., *Sex and Race Differences in the Evaluation and Treatment of Young Adults Presenting to the Emergency Department With Chest Pain*, 11 J. Am. Heart Ass'n e024199 (2022).

[31] Ilyas Sagar-Ouriaghli et al., *Improving Mental Health Service Utilization Among Men: A Systematic Review and Synthesis of Behavior Change Techniques Within Interventions Targeting Help-Seeking*, 13 Am. J. Men's Health, May 2019.

[32] Aaron M. White, *Gender Differences in the Epidemiology of Alcohol Use and Related Harms in the United States*, 40 Alcohol Rsch. 01 (2020).

[33] Banco et al., *supra* note 30; Cynthia G. Colen et al., *Racial Disparities in Health Among Nonpoor African Americans and Hispanics: The Role of Acute and Chronic Discrimination*, 199 Soc. Sci. & Med. 167 (2018); Kevin Fiscella & Mechelle R. Sanders, *Racial and Ethnic Disparities in the Quality of Health Care*. 37 Ann. Rev. of Pub. Health 375 (2016); Paulyne Lee et al., *Racial and Ethnic Disparities in the Management of Acute Pain in US Emergency Departments: Meta-Analysis and Systematic Review*, *37* Am. J. Emergency Med. 770 (2019); Fernando S. Mendoza et al., *Bias, Prejudice, Discrimination, Racism, and Social Determinants: The Impact on the Health and Well-Being of Latino Children and Youth*, 24 Acad. Pediatrics S196 (2024).

[34] Anthony P. Carnevale & Megan L. Fasules, Ctr. Educ. & Workforce, Latino Education and Economic Progress: Running Faster but Still Behind (2017), https://vtechworks.lib.vt.edu/server/api/core/bitstreams/256f6bd4-b9ef-46d6-a4c4-8c967386266e/content; Bruce Fuller et al., *Worsening School Segregation for Latino Children?*, 48 Educ. Researcher 407 (2019); Alison L. Mroczkowski & Bernadette Sánchez, *The Role of Racial Discrimination in the Economic Value of Education Among Urban, Low-Income Latina/o Youth: Ethnic Identity and Gender as Moderators*, 56 Am. J. Cmty. Psych. 1 (2015); Bernadette Sánchez et al., *Mentoring as a Mediator or Moderator of the Association between Racial Discrimination and Coping Efficacy in Urban, Low-Income Latina/o Youth*, 59 Am. J. Cmty. Psych. 15 (2017).

[35] Patricia Hill Collins, *Learning from the Outsider Within: The Sociological Significance of Black Feminist Thought*, 33 Soc. Problems S14 (1986); Combahee River Collective, *A Black Feminist Statement*, *in* In Words of Fire: An Anthology of African American Feminist Thought 232 (Beverly Guy-Sheftall ed., 1995); Kimberle Crenshaw, *Mapping the Margins: Intersectionality, Identity Politics, and Violence Against Women of Color*, 43 Stan. L. Rev. 1241 (1991); Gilbert C. Gee & Chandra L. Ford, *Structural Racism and Health Inequalities: Old Issues, New Directions*, 8 Du Bois Rev.: Soc. Sci. Rsch. Race 115 (2011).

sometimes called triple jeopardy.[36] While this is more rarely done in research, not making these comparisons obfuscates the multiple layers of marginalization that LBTQ Latinas face.

Notably, one limitation of this study is the smaller sample size. As noted above, the LACHS survey respondents included 136 LBTQ Latinas, of whom 68 responded to the LELAC follow-up survey. Smaller sample sizes are a persistent issue in researching LGBTQ populations, in particular when focusing on subpopulations within LGBTQ communities. As noted above, significant gaps persist in data collection and analysis at the intersection of race/ethnicity, LGBTQ identity, and gender[37]—in particular, when conducting analysis focused on smaller geographic areas, such as Los Angeles County, rather than the United States as a whole. However, a strength of the sample, unlike most research focused on LBTQ Latinas, is that it is not based on a convenience sample. It is a representative sample and allows for comparison with all LACHS data, including data about other sub-populations within Los Angeles County.

To account for the smaller sample size, we include 95% confidence intervals for all point estimates in this report in the supplemental tables in the Appendices. We also only include comparisons between LBTQ Latinas and other groups in the text of the report that are statistically significant, unless otherwise noted. Finally, we put each of the findings in the report in the context of prior research, including, in most cases, research on LBTQ Latinas based on larger, nationally representative samples, including research based on data from the Behavioral Risk Factor Surveillance System (BRFSS), the Youth Risk Behavior Surveillance System (YRBSS), Gallup, and the Williams Institute's Generations and TransPop surveys. In some cases, we can also compare our findings with prior research on LBTQ Latinas in Los Angeles County and/or California. In almost all cases, and unless otherwise noted, our findings are consistent with prior research—particularly where we highlight disparities or strengths between LBTQ Latinas and other groups.

One impact of having a smaller sample of LBTQ Latinas is that it only allows for consideration of LBTQ Latinas as a single group, despite the significant diversity within this population. In terms of sexual orientation, there are differences among Latinas who identify as lesbian, bisexual, and other non-straight sexual orientations. As pointed out throughout this paper, those who identify as bisexual face biphobia within both LGBTQ and Latinx communities and are more vulnerable economically and in terms of various health conditions than those who identify as lesbian. In terms of gender identity, transgender Latinas face greater levels of discrimination and stigma and experience greater vulnerability economically and worse health outcomes than cisgender LBQ Latinas.

"Latinas" also treats LBTQ Latinas as a singular racial/ethnic group when they, in fact, claim ancestry from a diverse set of nationalities.[38] Among all Latinx people in Los Angeles County, the majority are of Mexican descent (74%), followed by Salvadoran (9%), Guatemalan (6%), Honduran, Puerto Rican,

[36] Greene, *supra* note 15.

[37] For a longitudinal analysis of US national demographic data collection, from 1960 to 2019, *see* Zambrana et al., *supra* note 8. For a summary of differences across racial groups among LGBT people in the US, *see* Wilson, Bouton & Mallory, *supra* note 8.

[38] Bianca D.M. Wilson et al., Williams Inst., Latinx LGBT Adults in the U.S. (2021), https://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBT-Latinx-SES-Sep-2021.pdf.

Cuban, and Dominican descent.[39] At times, this report refers to aspects of Latinx culture in the United States, even though there are unique cultures influenced by these ancestral countries of LBTQ Latinas in Los Angeles County and histories of colonization and/or migration. Research has also shown economic and health disparities among Latinx subgroups based on ancestry or country of origin.[40]

Finally, the small sample does not allow us to consider differences among LBTQ Latinas based on citizenship or immigration status. The LACHS also does not consider citizenship, nativity, or immigration status in its weighting procedure, which may result in the underrepresentation of the immigrant population in our sample. As discussed more fully below, immigration status can compound the economic and health disparities that LBTQ Latinas face and compound experiences of discrimination and feelings of alienation from LGBTQ and broader communities.[41]

Unfortunately, our sample size in this survey is not large enough to assess differences among LBTQ Latinas based on LGBTQ status, country of ancestry, citizenship status, or immigration status.[42] It is essential that future studies on LBTQ Latinas are sufficiently large enough to account for these differences, as without this level of nuance, research risks oversimplifying the community's needs and limiting the effectiveness of programs and policies intended to support them.

As noted above, sexual orientation, gender identity, gender, and race/ethnicity do not fully capture the factors that shape the experiences of LBTQ Latinas as a group nor address the considerable variation among LBTQ Latinas. Other factors shape the experiences of some, many, or in some cases all LBTQ Latinas, including colorism, biphobia, immigration status, disability, weight stigma, religion, and more. It is also crucial to recognize that while discrimination and stigma are deeply entrenched in the dominant White, straight US culture, LBTQ Latinas at the intersection of Latinx and LGBTQ identities often face additional layers of discrimination and stigma from within their own Latinx communities and within the wider LGBTQ community. As we present specific findings from Los Angeles County in the main body of this report, we briefly place our findings in the context of prior research that suggests how some of these factors, as well as others, may be contributing to disparities faced by LBTQ Latinas and can inform programs and services that may help address them.

[39] *Hispanics/Latinos in Los Angeles County: By the Numbers*, L.A. Almanac, https://www.laalmanac.com/population/po722.php (last visited Aug. 17, 2025); Jessica E. Peña, Ricardo Henrique Lowe Jr. & Merarys Ríos-Vargas, *Eight Hispanic Groups Each Had a Million or More Population in 2020*, U.S. Census Bureau (Sept. 26, 2023), https://www.census.gov/library/stories/2023/09/2020-census-dhc-a-hispanic-population.html.

[40] Wilson et al., *supra* note 38.

[41] Sears et al., *supra* note 12; Wilson et al., *supra* note 38.

[42] *Id*.

FINDINGS

LBTQ LATINAS IN LOS ANGELES COUNTY

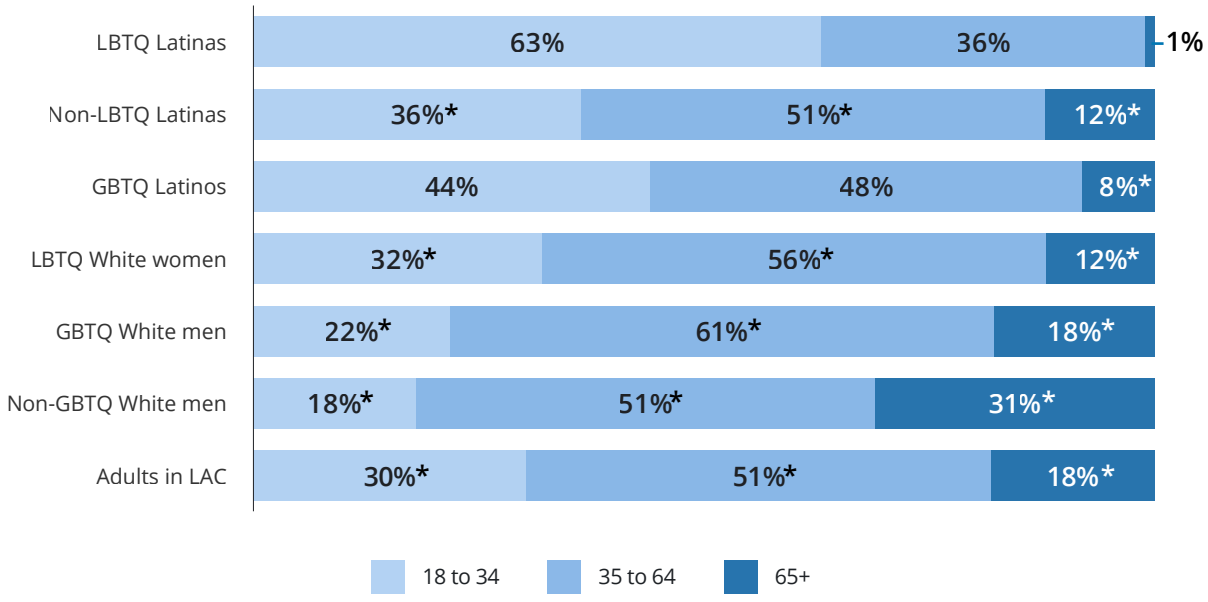
DEMOGRAPHIC CHARACTERISTICS

We estimate that there are approximately 106,000 LBTQ Latina adults living in Los Angeles County. The majority of survey respondents were under the age of 34, identified as cisgender and bisexual,[43] had never been married,[44] and were living with a disability.[45] Over one in 10 were not U.S. citizens.

Age

More than six in 10 LBTQ Latina adults (63%) were between the ages of 18 and 34, and 36% were between the ages of 35 and 64. Very few were over the age of 65. LBTQ Latina adults were significantly more likely to be between the ages of 18 and 34 than the overall adult population in Los Angeles County (30%), and subpopulations including non-LBTQ Latinas (36%), LBTQ White women (32%), GBTQ White men (22%), and non-GBTQ White men (18%).

Figure 2. Age of adults in LA County, LACHS, 2023



Note: *Statistically significant as compared to LBTQ Latinas

[43] Sears, et al., *supra* note 12.

[44] Rubeen Guardado, Miguel Fuentes Carreño & Kerith J. Conron, Williams Inst., Latinx LGBT Immigrants Without Green Cards in California (2024), https://williamsinstitute.law.ucla.edu/publications/latinx-lgbt-immigrants-ca/.

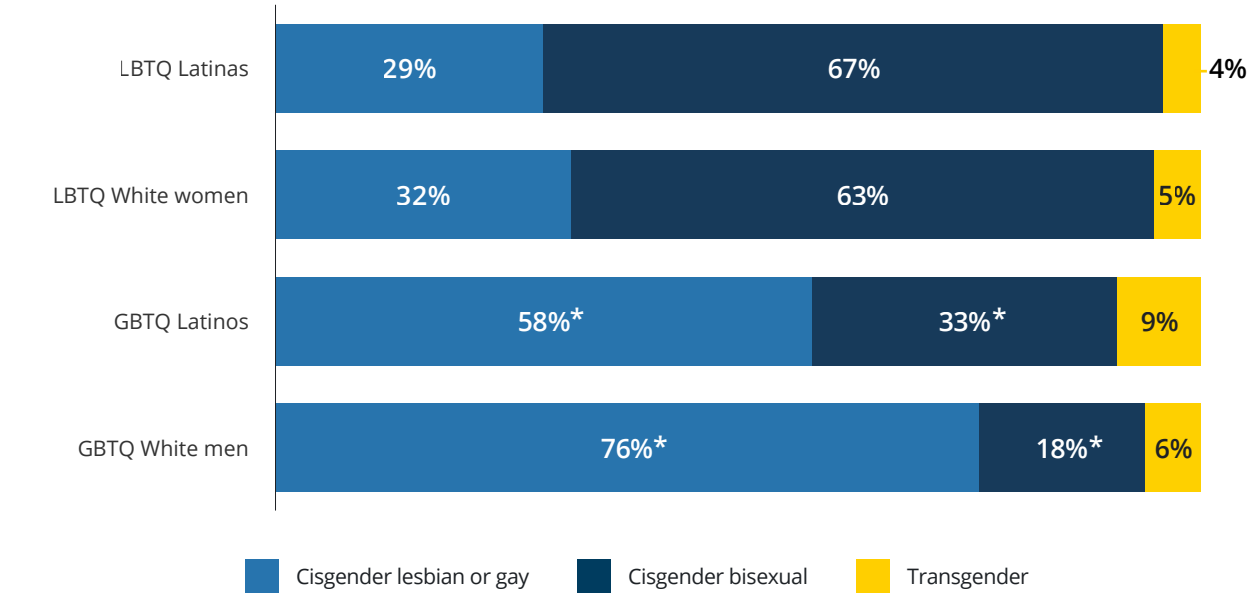
[45] Wilson et al., *supra* note 38.

The younger age of LBTQ Latina adults in this study is consistent with prior research by the William Institute. A 2021 Williams Institute study, based on national data, found that 71% of LBTQ Latinx women were between the ages of 18 and 34, compared to 44% of non-LBTQ Latinx women, 59% of GBTQ Latinx men, and 47% of non-GBTQ Latinx men.[46]

Gender Identity and Sexual Orientation

Most LBTQ Latinas (96%) were cisgender, and 4% were transgender, similar to GBTQ Latinos, LBTQ White Women, and GBTQ White men. Seventy percent of cisgender LBQ Latinas in Los Angeles County identified their sexual orientation as bisexual, and 30% as lesbian, similar to cisgender LBQ White women (66% bisexual and 34% lesbian). Cisgender LBQ Latinas were almost twice as likely to identify as bisexual compared to cisgender GBQ Latinos (37%) and over three times as likely to identify as bisexual compared to cisgender GBQ White men (19%).[47]

Figure 3. Sexual orientation and gender identity of LGBTQ adults in LA County, LACHS, 2023



Note: *Statistically significant as compared to LBTQ Latinas

The high percentage of cisgender LBQ Latinas identifying as bisexual is consistent with prior research by the Williams Institute using national data, which found that more LBQ women identify as bisexual (72%) than lesbian (28%).[48] A similar result was found in a study of Latinx LGBTQ youth.[49]

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[46] *Id*.

[47] Sample sizes were too small to present data on the sexual orientation of trans and nonbinary Latinas.

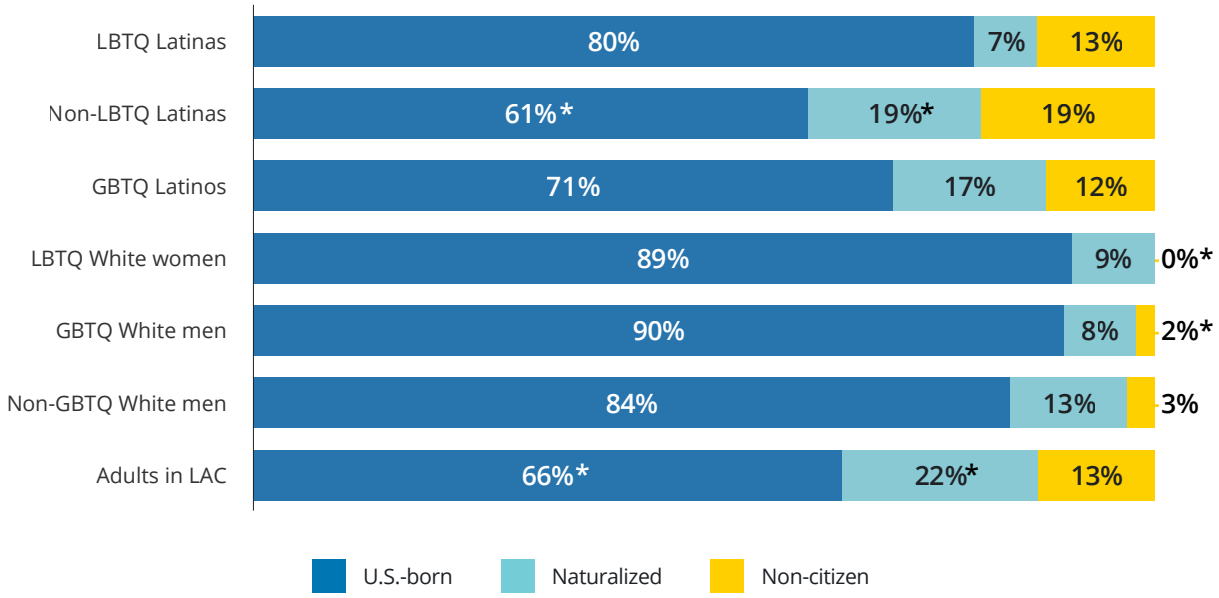
[48] Bianca D.M. Wilson et al., Williams Inst., Health and Socioeconomic Well-Being of LBQ Women in the U.S. (2021), https://williamsinstitute.law.ucla.edu/wp-content/uploads/LBQ-Women-Mar-2021.pdf.

[49] Myeshia N. Price et al., Trevor Project, The Mental Health and Well-Being of Latinx LGBTQ Young People (2023), https://www.thetrevorproject.org/research-briefs/the-mental-health-and-well-being-of-latinx-lgbtq-young-people/. Some smaller qualitative studies of students have suggested that stereotypes and stigma associated with the term "lesbian," including religious beliefs and traditional Latinx gender expectations such as Marianismo, may lead some LBTQ Latinas to avoid identifying as lesbian and instead identify as bisexual. *See, e.g.*, Gisela P. Vega, Latina Lesbian Students: Understanding their Experiences and

Citizenship

Most LBTQ Latinas (80%) were U.S.-born citizens, 7% were naturalized citizens, and 13% were non-citizens (neither U.S.-born nor naturalized). LBTQ Latinas were more likely to be U.S.-born citizens than non-LBTQ Latinas (61%) and adults overall in Los Angeles County (66%). They were more likely to be non-citizens than LBTQ White women (less than 1%) and GBTQ White men (2%) in Los Angeles County.

Figure 4. Citizenship status of adults in LA County, LACHS, 2023



Note: *Statistically significant as compared to LBTQ Latinas

As discussed more fully below, immigration status can contribute to the economic and health disparities that LBTQ Latinas face and compound feelings of alienation from LGBTQ and broader communities. Existing research attributes the economic and health disparities experienced by LBTQ Latinas who are not citizens to a combination of intersecting forms of discrimination based on race, immigration status, gender identity, and sexual orientation that can limit access to employment, housing, health care, and social support.[50] For example, previous studies highlight how transgender Latinx immigrants often feel that they face "double the fight" due to discrimination related to both their immigrant status and their gender identity, which can lead to social exclusion.[51] For service providers, this means that culturally competent, linguistically accessible, and confidential services are essential for improving support for LBTQ Latina immigrants.

Perceived Sexual Identity Development at a Hispanic Serving Institution (Nov. 8, 2016) (Ph.D. dissertation, Florida International University) (https://digitalcommons.fiu.edu/etd/2722); Camilo Posada Rodriguez, *Coming Out Experiences of LGB Latinos/as: The Role of Cultural Values*, 5 Scholarly Undergraduate Rsch. J. Clark 7 (2019), https://commons.clarku.edu/surj/vol5/iss1/1.

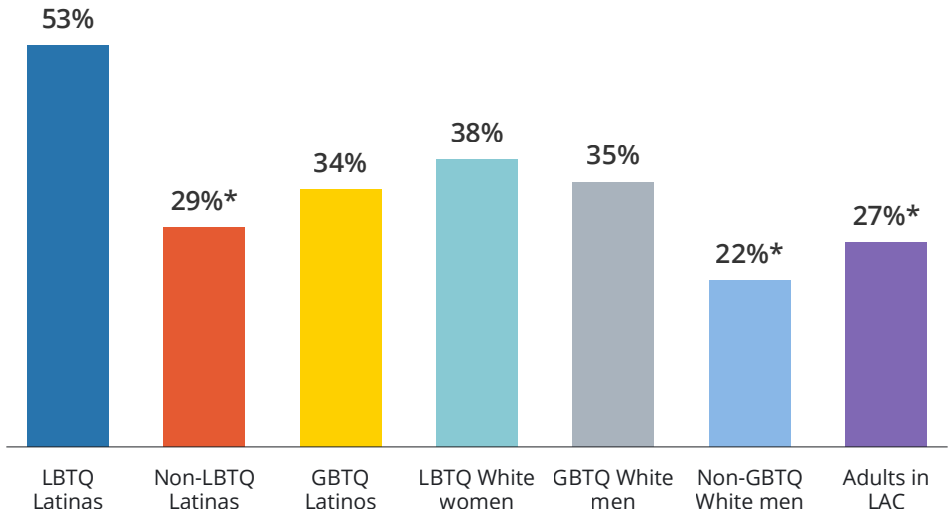
[50] Sears et al., *supra* note 12; Wilson et al., *supra* note 38.

[51] Jane J. Lee et al., *"They Already Hate Us for Being Immigrants and Now for Being Trans—We Have Double the Fight": A Qualitative Study of Barriers to Health Access Among Transgender Latinx Immigrants in the United States*, 27 J. Gay & Lesbian Mental Health 319 (2023), https://doi.org/10.1080/19359705.2022.2067279.

Disability

Over half (53%) of LBTQ Latinas met the criteria used by the U.S. Census Bureau to assess disability.[52] This was approximately double the rate of disability among adults overall in Los Angeles County (27%), including non-LBTQ Latinas (29%), and non-GBTQ White men (22%).

Figure 5. Disability status of adults in LA County, LACHS, 2023



Note: *Statistically significant as compared to LBTQ Latinas

Our findings are consistent with prior national research. For instance, a Williams Institute analysis based on Gallup data found that Latinx LBT women (40%) were more likely to report mild to high levels of disability than Latinx non-LBT women (30%), Latinx GBT men (34%), and Latinx non-GBT men (24%).[53] Prior Williams Institute analysis based on BRFSS data also found high rates of disability among LBQ Latinx women, with 51% reporting at least one day of limitations due to poor health in the prior month and 16% reporting fifteen to thirty days of such limitations.[54] As discussed more fully in sections below, disability status is connected to health and socioeconomic status as both are contributors to and products of these conditions, and the basis for stigma and discrimination.[55]

[52] Disability was defined as having serious difficulty with one or more of the following: hearing, seeing (with glasses), walking or climbing stairs; dressing or bathing; or because of a physical, mental, or emotional condition, having serious difficulty concentrating, remembering, or making decisions or difficulty doing errands alone, such as visiting a doctor's office or shopping.

[53] Wilson et al., *supra* note 38.

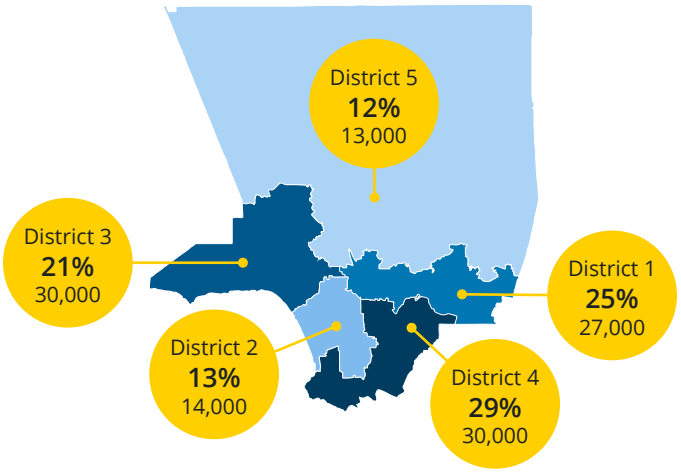
[54] Wilson et al., *supra* note 48.

[55] Wilson et al., *supra* note 38.

Residence Patterns

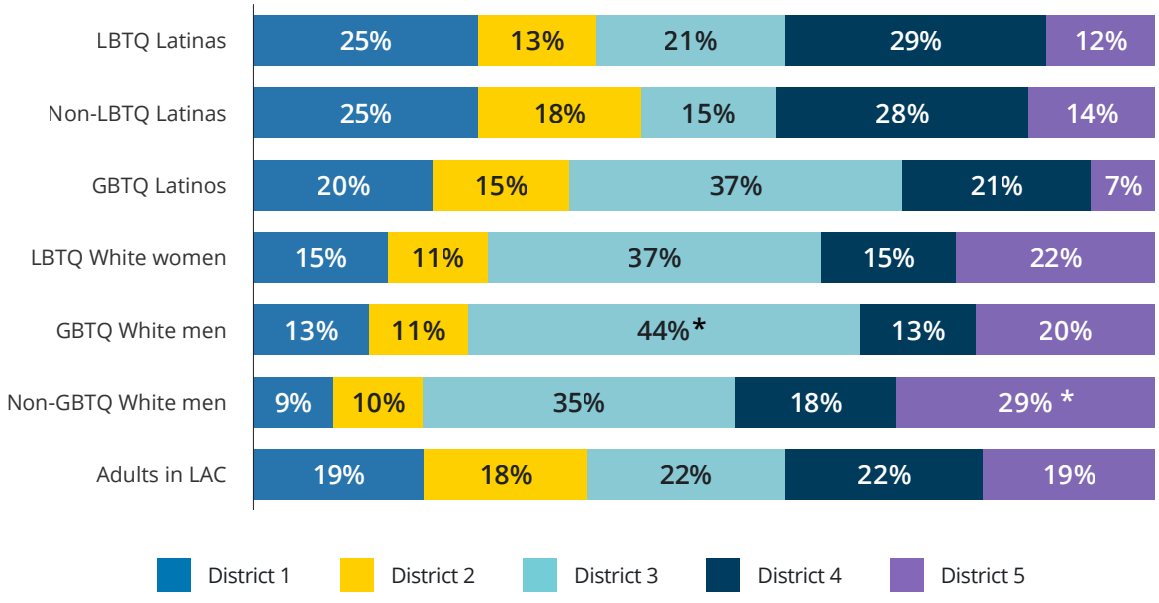
By Supervisorial District, LBTQ Latinas were concentrated in District 4 (29%) and District 1 (25%).

Figure 6. LBTQ Latina adults by LA County supervisorial district, LACHS, 2023



While 32% of LGBTQ Adults in Los Angeles County lived in District 3,[56] which includes West Hollywood and other historic LGBTQ neighborhoods, only 21% of LBTQ Latinas lived in District 3. The residence patterns of LBTQ Latinas in Los Angeles County closely mirror those of non-LBTQ Latinas and GBTQ Latinos. However, GBTQ White men were twice as likely to live in District 3 as LBTQ Latinas (44% vs. 21%). LBTQ Latinas also differ significantly from non-GBTQ White men in residence patterns: they were more likely to live in District 1 (25% vs. 9%) and less likely to live in District 5 (12% vs. 29%).

Figure 7. Residence of adults across LA County supervisorial districts, LACHS, 2023



Note: *Statistically significant as compared to LBTQ Latinas

[56] Sears et al., *supra* note 12.

CLIMATE FOR LBTQ LATINAS LIVING IN LOS ANGELES

Most LBTQ Latinas felt that "Los Angeles County is a good place for LGBTQ people to live," with 81% somewhat or strongly agreeing with the statement, and only 7% somewhat or strongly disagreeing with it. Several LBTQ Latinas expressed in their write-in responses uncertainty about the current and future climate for LGBTQ people:

> *[I'm worried about] the political climate in the coming year.*
>
> — Cisgender bisexual Latina in her 30s

> *[I have] a general dread about the state of the world.*
>
> — Cisgender queer Latina in her 40s

> *I feel uncomfortable often to dress to my (gender) transgender, I fear backlash.*
>
> — Transgender pansexual Latina in her 20s

Intersections of Race, Sexual Orientation, and Gender Identity

LGBTQ people of color who took the LELAC survey were asked about their experiences of racism. Among LBTQ Latinas, 46% reported having been treated unfairly or poorly as a person of color while living in Los Angeles County. While not statistically significant, this was more than GBTQ Latinos reported such experiences (25%).

LGBTQ people of color also responded to an open-ended question asking them to share an experience of racism that had occurred in the county, whether it involved their LGBTQ identity or not. Thirty-four percent of LBTQ Latinas responded to this question with accounts about the racism that they have faced. Several wrote about the challenges of being both Latina and LBTQ. For example:

> *I was born in Mexico but raised in LA since I was 4 years old … In middle school, I came out as a lesbian and got bullied for that and for my broken English. It made me angry, it made me depressed, but I learned to stand up for myself.*
>
> — Cisgender Latina lesbian in her 30s

> *I have had people in public places shout racist comments at my parents. I have had friends who have a change of attitude or stop being friends when I've talked about my sexual orientation. All of these and other experiences have made me feel "othered" and like I don't belong. Some have contributed to mental and emotional issues with self-esteem and identity.*
>
> — Cisgender bisexual Latina in her 30s

Some accounts included biased statements focused on the respondent speaking Spanish or the assumption that the respondent was an immigrant because of the color of their skin. For example:

> *I was speaking Spanish with my mom at a store, and a lady told us we needed to speak English … I was infuriated and told her it was my right to speak whatever language I felt like.*
>
> — Cisgender bisexual Latina in her 30s

> *I love my heritage and my skin color, but people see me and sometimes make assumptions about where I am from. I have been told to go back to Mexico several times, even though I am born and raised here.*
>
> — Cisgender Latina lesbian in her 30s

These accounts included six stories about being discriminated against or harassed while in a store. Four other incidents involved discrimination while at work, seeking housing, at school, and by law enforcement. Six accounts involved being harassed or attacked in other public spaces, such as on the street, at a beach, or while living outside as homeless. For example:

> *Being Mexican and brown, I have been looked past. People of white appearance are helped first or offered help at stores before I am helped.*
>
> — Cisgender bisexual Latina in her 30s

> *I was racially profiled at a [national chain convenience store]. They accused me of stealing something when I was putting my phone back in my purse.*
>
> — Cisgender bisexual Latina in her 20s

> *While working at a hospital, [I] had managers not giving me the same opportunity that others had there.*
>
> — Cisgender Latina lesbian in her 30s

> *Finding an apartment was extremely difficult due to my obviously Hispanic name, but once I began submitting interest forms under an Anglo name with all the same information, I received responses.*
>
> — Cisgender bisexual Latina in her 20s

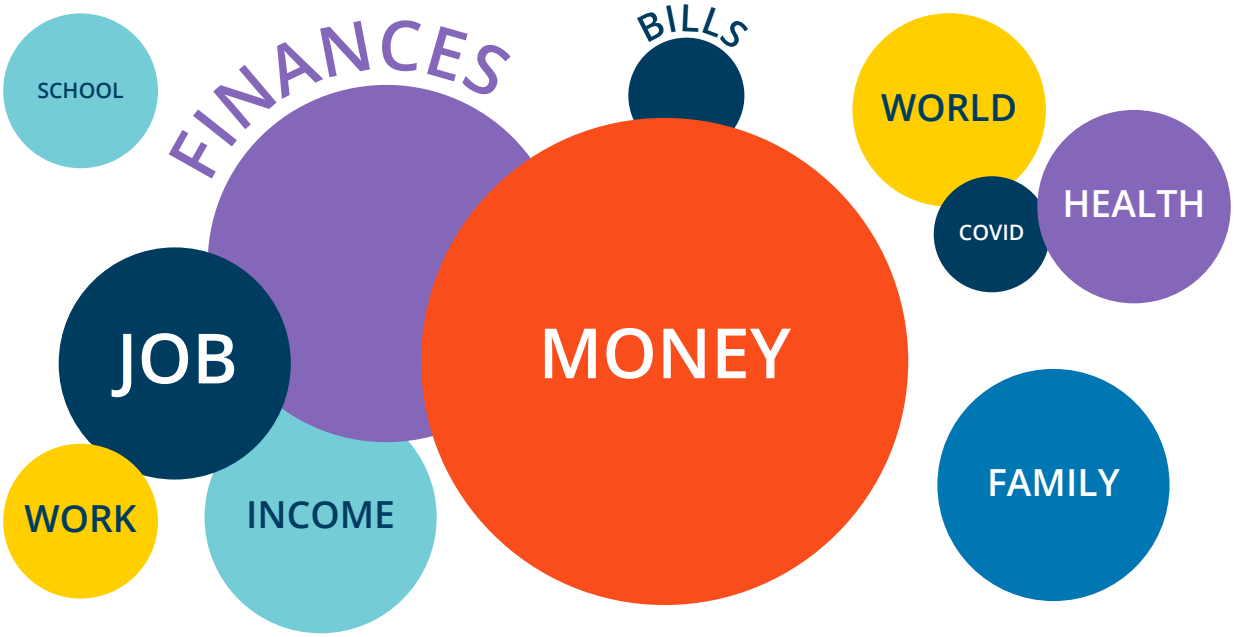
> *I am always followed at stores, always looked at twice by people walking down the street, always just being on guard because I am a person of color.*
>
> — Cisgender Latina lesbian in her

As described more fully below in LGBTQ Communities and Spaces, in four responses, LBTQ Latinas described racism within the LGBTQ community or being targeted because of their race while at LGBTQ venues or events.

Sources of Worry and Joy

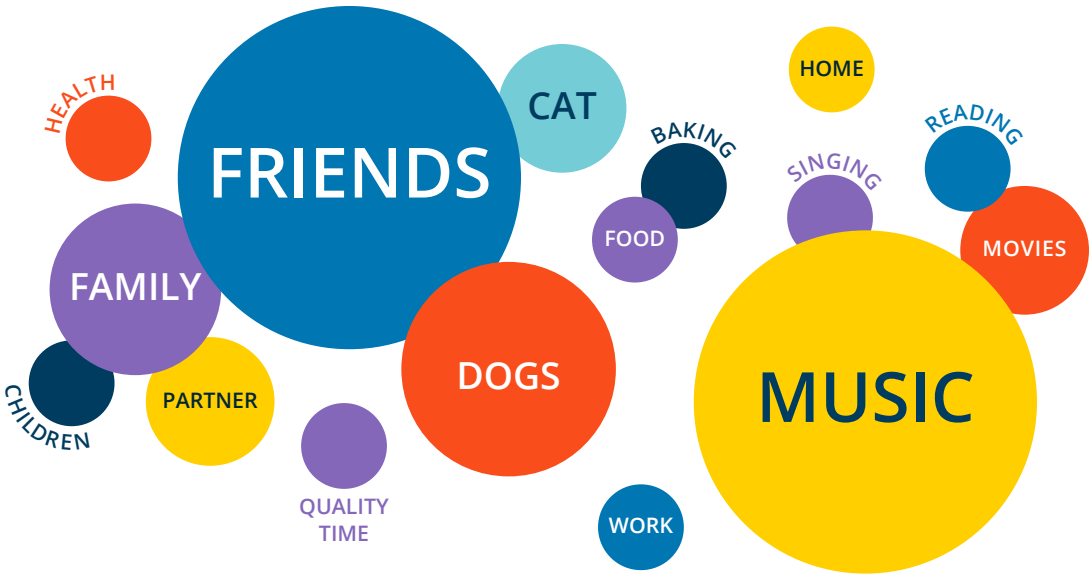
When asked about their "biggest sources of worry," most LBTQ Latinas focused on their finances and meeting the high cost of living in Los Angeles (63%); their relationships and caregiving for friends, family, and pets (28%); their health (18%); and their jobs and careers (12%). By comparison, few expressed that discrimination, harassment, or violence related to their sexual orientation or gender identity was one of their biggest concerns. Quotes expressing these concerns are included throughout this report to illustrate them in conjunction with relevant quantitative data.

Figure 8. Word cloud representing responses of LBTQ Latinas to the question, "What are your biggest sources of worry?" LELAC, 2023



Of the 30 LBTQ Latinas who responded to the question, "What are your greatest sources of joy," seven out of 10 (70%) named their family (43%), pets (43%), and/or friends (33%). In terms of family, six respondents named their "family," "familia," or "loved ones" in general; five named their children or "nieces and nephews," and two named their "mom," while siblings and partners received one mention each. Failing to resolve an age-old debate, of those who named a specific type of animal as their pet, about equal numbers mentioned cats (5) and dogs (6). One-third of respondents said that one of their great joys was "hanging out" or "sharing quality time" with their friends.

Figure 9. Word cloud representing responses of LBTQ Latinas to the question, "What are your greatest sources of joy?" LELAC, 2023



Examples of these responses included:

> *Mi familia.*
>
> — Transgender Latina in her 30s

> *My friends and my pet.*
>
> — Cisgender Latina lesbian in her 70s

After family, pets, and friends, what brought the greatest joy to LBTQ Latinas was engaging in healthy activities, listening to and making music, and eating and cooking. One third of respondents (33%) mentioned some aspect of healthy living as a source of their greatest joy. This included exercising through activities such as walking, biking, and yoga, as well as enjoying the great outdoor spaces in Los Angeles County, including its beaches and parks. Approximately one in four LBTQ Latinas (23%) who provided their greatest joys mentioned music in some way, including "singing" and "listening to music." Approximately one in five (20%) mentioned food in some way, including "eating good food," "cooking," and "baking." Examples of these responses included:

> *Music, singing, and riding my e-bike.*
>
> — Cisgender bisexual Latina in her 20s

> *Taking a walk at Plummer Park, hiking at Runyon Canyon, listening to music and music festivals.*
>
> — Cisgender Latina lesbian in her 40s

Approximately one quarter of LBTQ Latinas (27%) mentioned other hobbies, including "doing pottery," "playing video games," "watching movies," "reading books," "traveling," "following the news," "drawing," "coloring," and more generally participating in "the arts." Finally, a few respondents said what brought them joy was just "being at" or "having" a home, their "work," continuing their education, and "God." Examples included:

> *Educating myself about languages and art, playing videogames, my mom.*
>
> — Transgender pansexual Latina in her 20s

> *Steady paycheck, good health, continuing education at an affordable price, eating healthy.*
>
> — Cisgender lesbian Latina in her 40s

CONTRIBUTIONS TO LOS ANGELES COUNTY

Forty-eight of the LBTQ Latina survey respondents provided a substantive response to the question, "What do LGBTQ people contribute to the broader Los Angeles community and culture, if anything?"[57] Among these, the vast majority (94%) identified positive contributions that the LGBTQ community made to the broader Los Angeles community.[58]

Figure 10. Word cloud representing responses of LBTQ Latinas to the question, "What do LGBTQ people contribute to the broader Los Angeles community and culture, if anything?" LELAC, 2023

[57] Of the 20 responses we did not include, 5 respondents did not provide any response, 5 responded with some version of "I don't know," 4 responded with "NA" or "N/A," and 6 provided a response that did not answer the question [e.g. "yes" (4), "no," "Send out packages so the LGBTQ community and let them know you support them and stand with them like me"].

[58] We classified three responses as indicating that the LGBTQ community did not make a positive contribution to Los Angeles, a response of "none" and two responses that LGBTQ+ people did not contribute anything beyond what straight people contributed.

One-fifth (19%) of these responses included words and phrases such as "mucho," "a lot," "absolutely," "everything," and "so much" to describe the central role LGBTQ people play in the history and current culture of Los Angeles. Examples of these responses included:

> *The LGBTQ community has a long history in LA County, and over the decades has brought acceptance, tolerance, community, philanthropy, peace, art, advocacy, fun, and needed perspectives to … Los Angeles.*
>
> — Cisgender bisexual Latina in her 30s

> *I can't think of anything that LGBTQ people don't contribute. We exist in and contribute to every facet of community and culture, whether out … to others or not.*
>
> — Cisgender bisexual Latina in her 30s

> *Everything. We are everywhere now and a part of what makes LA a melting pot of cultures.*
>
> — Transgender sexual minority Latina in her 20s

The contributions of the LGBTQ community to Los Angeles County, identified by LBTQ Latinas, can be categorized into four major themes:

1. Positive Values and Characteristics
2. Enriching Diversity
3. Culture, Arts, and Creativity
4. Community Leadership and Service

Positive Values and Characteristics

When asked what LGBTQ people contribute to Los Angeles County, over half of LBTQ Latinas (54%) identified positive values or traits of LGBTQ people, often originating from their lived experience. We categorize examples of some of these contributions below, although many of these values are interrelated.

Acceptance, Tolerance, and Inclusivity

The most frequently mentioned values the LGBTQ community brought to the broader community (by eight respondents) were acceptance, tolerance, and inclusivity. Examples of these responses included:

> *A broader, more accepting mindset and views that aren't necessarily the norm of society.*
>
> — Cisgender bisexual Latina in her 40s

> *Preaching a lot more acceptance for anything really; you don't have to be queer to be accepted, you just have to be willing to come together to help lift each other up.*
>
> — Cisgender bisexual Latina in her 20s

Compassion, Support, and Understanding

Seven respondents discussed that the "humanity" that LGBTQ people have makes them "supportive," "patient," and "caring" of others, in particular for those in other marginalized communities. Some wrote that these traits are based on the lived experience of being LGBTQ. Examples of these responses included:

> *Compassion and understanding for other marginalized groups, such as people of color.*
>
> — Cisgender bisexual Latina in her 50s

> *[LGBTQ people have] good hearts that understand hardships sometimes more than most people because they've directly been through it themselves. A lot of LGBTQ people are willing to help out and bring a strong sense of... support to others.*
>
> — Cisgender lesbian Latina in her 20s

Authenticity and Honesty

Six respondents wrote about how, by living their lives openly, LGBTQ people inspire others to live authentically as their true selves. Examples of these responses included:

> *Being brave enough to be our authentic true selves and expressing it in various forms.*
>
> — Cisgender bisexual Latina in her 30s

> *Self-expression, showing other ways to live a genuine and authentic life outside of what we've been taught by society to fit into.*
>
> — Cisgender bisexual Latina in her 30s

Love

Five respondents used the word love to describe the positive values that the LGBTQ community contributes to Los Angeles. For example:

> *LGBTQ people bring a richness in acceptance and radical love to LA County.*
>
> — Cisgender bisexual Latina in her 20s

Joy, Vibrancy, and Spirit

Five respondents emphasized the joy and energy that LGBTQ people bring to the larger Los Angeles community. They used the following words to describe these contributions: "vibrancy," "color," "energy," "fun," "happiness," "positivity," "laughter," and "spirit."

Community

Five respondents mentioned that LGBTQ people created a strong sense of community for the LGBTQ community and more broadly. One example of these responses:

> *Definitely more love and family acceptance than some blood family, and we look out for each other.*
>
> — Cisgender bisexual Latina in her 40s

Equality

Two respondents wrote about LGBTQ people contributing to "igualdad"[59] and "a non-patriarchal point of view" to Los Angeles County.

Enriching Diversity

Twenty-eight percent of LBTQ Latina respondents wrote about how the LGBTQ community contributes to Los Angeles County's rich diversity. These respondents wrote about the "new and needed perspectives" and "varied viewpoints" that the LGBTQ community contributes to Los Angeles, which helped "expand people's preconceived notions." Others mentioned that LGBTQ people in Los Angeles County who are out contribute to diversity by supporting other LGBTQ people in coming out and making non-LGBTQ people more "aware" and "educated" about the community. For example:

> *I think the more we educate others about our existence and challenges, the more it opens conversation and interest to learn more. Or at least listen and … find middle and common ground. You may not accept us, but you have to respect us.*
>
> — Cisgender Latina lesbian in her 30s

Culture, Arts, and Creativity

Thirteen percent of LBTQ Latina respondents specifically wrote about how LGBTQ people contribute to the arts, culture, and entertainment in Los Angeles. Specific terms and areas mentioned included:

Community Leadership and Service

One in four (25%) LBTQ Latina respondents discussed how the values above are put into action through community service and activism that LGBTQ people provide to the LGBTQ community, to other marginalized communities, and, more broadly, Los Angeles County. Several respondents emphasized the ways in which the LGBTQ community "takes care of its own," providing support for others in LGBTQ communities. For example:

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[59] *Conozca el "DLE"* [Get to Know the "DLE"], Real Academia Española, https://www.rae.es/diccionario-lengua-espanola-rae-buscadores/google (last visited Aug. 22, 2025).

> *LGBTQ people are the leaders in creating safe spaces for their communities.*
>
> — Cisgender bisexual Latina in her 20s

> *LGBTQ culture in West Hollywood is a culture of helping others through providing services and events in the community.*
>
> — Cisgender Latina lesbian in her 40s

Other respondents emphasized that LGBTQ communities "do a lot for other communities" and create "positive social change" in Los Angeles County. For example:

> *At protests and demonstrations, the people represented are largely LGBTQ … Any push for further human rights protections is supported at a grassroots level by LGBTQ communities.*
>
> — Cisgender bisexual Latina in her 20s

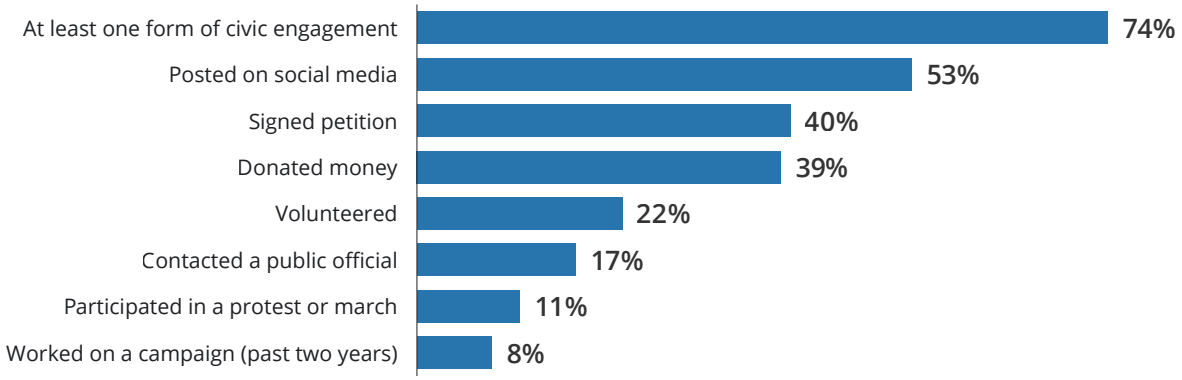
> *Without queer people, so many societal developments would still be stalled … LGBTQ people in Los Angeles County have carved out a safe haven for those who need a home and community.*
>
> — Cisgender bisexual Latina in her 30s

In response to the LELAC survey, LBTQ Latinas reported high levels of civic engagement, with 74% reporting at least one form of civic engagement in the past year across seven areas: charitable contributions, signing petitions, sharing opinions on social issues online, volunteering, participating in protests or marches, contacting an elected official, and working for a campaign. [60]

In terms of types of engagement, in the past year, approximately half (53%) of LBTQ Latinas reported posting or responding to social media posts about social issues. In the past year, four in 10 reported signing a petition (40%) or donating money to a community organization or cause (39%). Approximately one in five respondents reported volunteering with a community group or organization (22%) or contacting a public official to express their views on a particular issue (17%) in the past year. One in 10 (11%) reported joining a march or demonstration in the past year, and 8% reported working for pay or volunteering on an electoral or political campaign in the past two years. Perhaps reflecting their lower incomes and younger ages, the one area in which LBTQ Latinas (39%) differed from LBTQ White women (74%) and GBTQ White men (66%) in terms of civic engagement was donating money to charitable or political causes.

[60] Respondents were asked about their engagement in all forms of civic engagement during the past year, except for work on a political or electoral campaign. The time period for participation in a campaign was expanded to two years to include work leading up to the November 2022 election.

Figure 11. LBTQ Latinas' participation in different types of civic engagement in LA County, LELAC, 2023



Prior Williams Institute research has found even higher rates of civic engagement among Latinx LBQ women. Analysis of national data found that 100% of Latinx LBQ women participated in at least one political activity in the past 12 months, which was the highest rate for any racial/ethnic group.[61] The vast majority of this activity (92%) was focused on a mix of LGBT, racial/ethnic, and women's issues. While 8% of Latinx LBQ women focused their only political involvement on racial/ethnic issues, none solely focused on just women's issues or just LGBT issues.[62]

The percentage of LBTQ Latinas volunteering with organizations (22%) was similar to that of residents in California overall in 2019 (25%).[63] Similarly, current levels of charitable giving among LBTQ Latinas are equivalent to that of California residents overall (39% vs. 39%).[64] Compared to 2021 data for California residents overall, LBTQ Latinas in Los Angeles County were much more likely to engage in issues through social media posts (53% vs. 23%) and to contact public officials about social issues (17% vs. 8%).[65]

RECOMMENDATIONS FOR ELECTED OFFICIALS IN LOS ANGELES

LBTQ Latina respondents were given the opportunity to answer the question, "What, if anything, should elected officials do to improve the quality of life for LGBTQ people who live in Los Angeles County?" Of the 68 LBTQ respondents who responded to this question, two-thirds (67%) provided a substantive suggestion for local elected officials.[66] Respondents were asked a separate question

[61] WILSON ET AL., *supra* note 38.

[62] *Id*.; WILSON ET AL., *supra* note 48.

[63] Data on California residents overall are from the Current Population Survey Civil Engagement and Volunteering Supplement are from the Current Population Survey Civic Engagement and Volunteering and are available at *2017-2021 CEV Findings: State-Level Rates of All Measures from the Current Population Survey Civic Engagement and Volunteering Supplement*, AMERICORPS, https://data.americorps.gov/National- Service/2017-2021-CEV-Findings-State-Level-Rates-of-All-Me/4r6x-re58/data_preview (last visited Apr. 24, 2024).

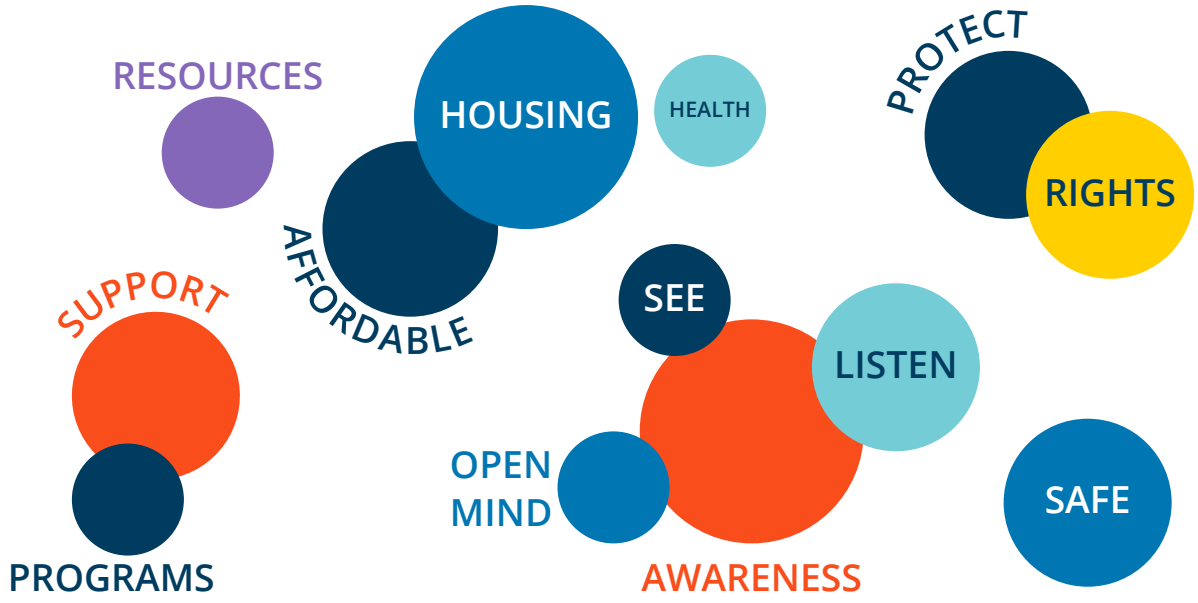
[64] *Id*.

[65] *Id*.

[66] Most of the other one-third of respondents left the question blank (5) or responded with a version of "I'm not sure" (6), not applicable" (3), or "I don't know" (3). In addition, two of the responses were hard to understand as responsive to the question, simply stating "yes" and "be free." Finally, two respondents wrote in that they had no suggestions ("none" and "honestly nothing

about recommendations related to family formation. Those responses are also summarized in the parenting section below.

Figure 12. Word cloud based on substantive recommendations of LBTQ Latinas in response to the question "What, if anything, should elected officials do to improve quality of life for LGBTQ people who live in Los Angeles County?" LELAC, 2023



The suggestions for improving the quality of life for LGBTQ people in Los Angeles County focused on five main themes:

1. Elected officials engaging more effectively with LGBTQ communities through acceptance and support of LGBTQ people, listening, and incorporating their input, and vocal and visible allyship;
2. Increasing resources and awareness for services, programs, and events for LGBTQ communities;
3. Protecting the safety of LGBTQ communities;
4. Creating more affordable and safe housing, health care, and educational opportunities for LGBTQ people; and
5. Protecting the legal rights and equality of LGBTQ people.

Engaging More Effectively with LGBTQ Communities

Almost sixty percent (59%) of responses focused on ways that elected officials could improve how they work with LGBTQ communities through fully accepting LGBTQ people, listening to LGBTQ people, and proactively creating opportunities to receive community input, and/or championing the LGBTQ community through vocal and visible allyship.

will change anyway,") while one respondent offered not policy suggestions because they felt that local elected officials "were on the right track" with supporting LGBTQ people in Los Angeles.

Acceptance and Support

Twenty percent of LBTQ Latina respondents called on Los Angeles County elected officials to be more "accepting," "supportive," "open-minded," and "understanding" of LGBTQ people. For example:

> *Try to see beyond our genders.*
>
> — Transgender pansexual Latina in her 20s

> *Create a safe space in public social services.*
>
> — Cisgender bisexual Latina in her 30s

> *Provide proper training to government agencies and offices.*
>
> — Cisgender Latina lesbian in her 20s

Listening and Community Input

Twenty percent of LBTQ Latina respondents also requested that elected officials "listen" more to LGBTQ community members and "actually believe their stories." This included doing more "outreach" to LGBTQ communities and "inviting and including them" in policy discussions. For example:

> *Put more LGBTQIA+ people in political offices.*
>
> — Cisgender Latina lesbian in her 30s

> *Definitely create more advisory boards to support LGBTQ people.*
>
> — Cisgender bisexual Latina in her 40s

Vocal and Visible Allyship

Four respondents called on elected officials to become more visible allies in their support of LGBTQ people, urging them to "spread awareness" and "speak out on LGBTQ issues."

Increasing Resources for Services, Programs, and Events for the LGBTQ Community

Seventeen percent of LBTQ Latinas focused their recommendations on providing "more resources" and "access to support" for LGBTQ people. This included calls for creating more "programs" and "community and social events" as well as providing more "awareness of services offered to LGBTQ people."

Criminal Legal System and Safety

Eighteen percent of LBTQ Latina respondents focused on promoting "safety" and "protection" in their suggestions for how Los Angeles County officials could improve the quality of life for LGBTQ people. These recommendations included:

> *Take violence against LGBTQ people more seriously.*
>
> — Cisgender pansexual Latina in her 30s

Don't go after sex workers. Especially transgender escorts.

— Transgender sexual minority Latina in her 20s

Affordable Housing, Health Care, and Education

Fifteen percent of respondents focused their recommendations on creating "safer" and more "affordable housing," and making education and health care more "accessible." These responses included:

LGBTQ people need more affordable housing.

— Cisgender Latina lesbian in her 60s

Provide more mental health programs.

— Cisgender bisexual Latina in her 30s

Legal Rights and Equality

Thirteen percent of respondents focused their recommendations on protecting LGBTQ "civil rights" and promoting LGBTQ and gender equality. These recommendations included:

Espacios con igualdad.

— Cisgender bisexual Latina in her 30s

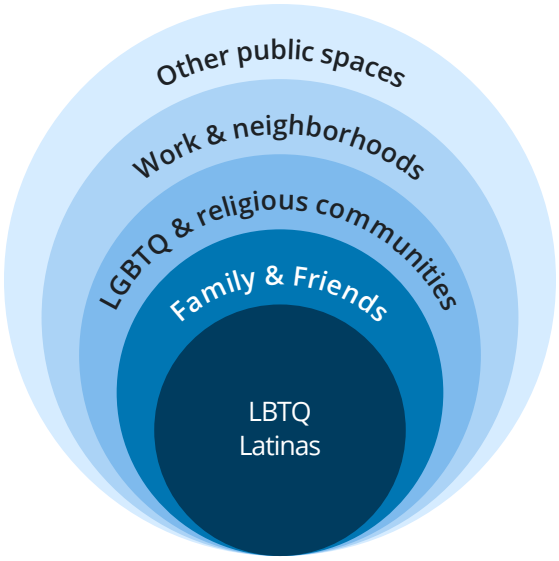
Equal treatment as men.

— Cisgender bisexual Latina in her 30s

FAMILY AND FRIENDS

The next two chapters explore the experiences of LBTQ Latinas in Los Angeles County, moving from private to public spaces. These spaces range from those where LBTQ Latinas may be more likely to seek support and have more control in shaping their interactions (such as family and friends, LGBTQ communities, and religious and spiritual communities), to those where they have less control in shaping their experiences (including work and local neighborhoods), and to those where they have little to no control in shaping their experience (including stores, entertainment venues, parks, beaches, and public transportation). While individual experiences differ, Figure13 serves as a general frame for moving from private to more public spaces and for organizing the next two chapters. This chapter focuses on family and friends, including plans for parenting and family formation.

Figure 13. Framework of private to public spaces for LBTQ Latinas' interactions and experiences



FAMILY AND RELATIONSHIPS

After financial concerns, concerns about families and relationships were the most frequently cited concerns when LBTQ Latinas were asked about their biggest sources of worry. These included fears of family rejection, concerns about having children and finding romantic partners, as well as more general worries about loved ones and pets. Examples included:

> *Family gatherings, my parents meeting my partner.*
>
> — Cisgender Latina lesbian in her 30s

> *My kids' father harassing me.*
>
> — Cisgender bisexual Latina in her 20s

> *Being able to adopt my foster son. Immigration.*
>
> — Cisgender lesbian Latina in her 30s

Bills and my cat got sick.

— Cisgender bisexual Latina in her 40s

Never finding love and being alone for the rest of my life.

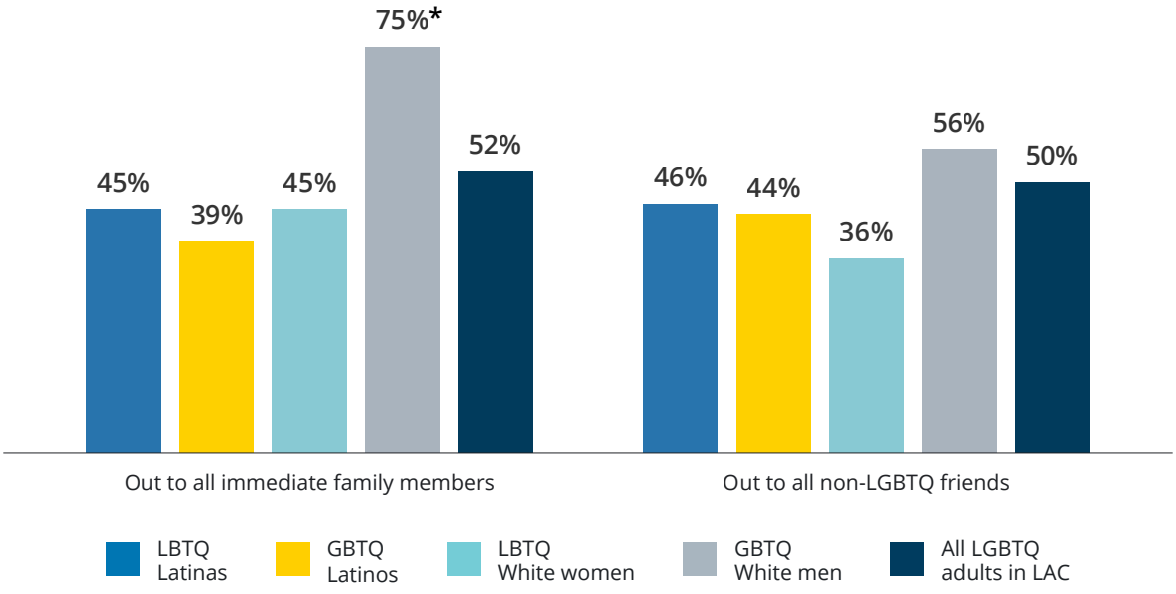
— Cisgender bisexual Latina in her 20s

This section considers the social support that LBTQ Latinas have in Los Angeles County, including the extent to which they are out to their immediate family and friends, marital and partnership rates, feelings of loneliness and lack of social support, the desire to parent, and barriers to family formation.

OUT TO FAMILY AND FRIENDS

Many LBTQ Latinas in Los Angeles County were not out to all of their immediate family members and friends. Less than half (45%) of LBTQ Latinas were out to all their immediate family, and 10% reported not being out to anyone in their immediate family. Similarly, only 46% reported being out to all of their non-LGBTQ friends, while 8% were out to none of their non-LGBTQ friends.

Figure 14. Level of outness to family and friends among LGBTQ adults in LA County, LELAC, 2023



Note: *Statistically significant as compared to LBTQ Latinas. These percentages are based on responses from those who selected "none," "some," "most," or "all." They do not include adults who selected that the question did not apply to them or that they did not know their level of outness to family members or friends. Analysis on file with authors.

LBTQ Latinas were similar to other comparison groups in their level of being out to immediate family and non-LGBTQ friends, except that they were less likely to be out to all of their immediate family members than GBTQ White men (45% vs. 75%).

These findings are consistent with prior research. A prior study of LBQ women by the Williams Institute based on national data found that, while not statistically significant, LBQ Latinas were less

likely to be out to their immediate family than LBQ White and Black women.[67] A study of LGBTQ youth and young adults found that 29% of Latinx LGBTQ youth and young adults—including 42% of Latinx transgender and nonbinary youth and young adults—were not out to their parents or caregivers.[68]

Prior Williams Institute research indicated that two reasons why LBTQ Latinas were less likely to be out to their immediate family could be that they were more likely to be bisexual and younger compared to women of other races.[69] Barriers for LBTQ Latinas in coming out to family members and friends include fear of rejection[70] and loss of support,[71] religious beliefs,[72] and gender norms and expectations.

MARITAL STATUS

The majority (54%) of LBTQ Latinas in Los Angeles County had never been married, similar to LGBTQ adults overall in Los Angeles County (55%).[73] Twenty-nine percent of LBTQ Latinas were currently married or in a domestic partnership; 11% were unmarried and cohabitating; and 6% were widowed, divorced, or separated.

LBTQ Latinas were less likely than non-LBTQ Latinas to be married or in a domestic partnership (29% vs. 45%) and to be widowed or divorced (6% vs.17%); conversely, they were more likely to have never been married (54% vs. 31%). These differences can be explained, in part, by age differences: 63% of LBTQ Latinas are between the ages of 18 and 34, compared to 36% of non-LBTQ Latinas. Notably, while marital status patterns for LBTQ Latinas were similar to those of LGBTQ people in Los Angeles County overall,[74] marital status patterns of non-LBTQ Latinas were similar to those of adults overall (non-LGBTQ and LGBTQ) in Los Angeles County.

Compared with non-GBTQ White men in Los Angeles County, LBTQ Latinas were also less likely to be married or in a domestic partnership (29% vs. 56%) and more likely to have never been married (54% vs. 27%). These differences can also be explained, in part, by age differences: 63% of LBTQ Latinas are between the ages of 18-34 compared to 18% of non-GBTQ White men.

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[67] Wilson et al., *supra* note 48. *See also* Perez & Torres, *supra* note 6 (a 2007 community survey finding that approximately one fifth of LGBTQQ) Latinas were not out to their mothers and one fourth were not out to their fathers or all of their siblings).

[68] Price et al., *supra* note 49.

[69] Wilson et al., *supra* note 48 (finding that bisexual women of all races were less likely to be out to their families than lesbians and those who were younger were less likely to be out than those to who were older). *See also* Sears et al., *supra* note 12 (finding that in Los Angeles County bisexual adults were less likely to be out to their immediate family members then lesbians or gay men).

[70] *See, e.g.*, Michael J. Li et al., *Contextualizing Family Microaggressions and Strategies of Resilience Among Young Gay and Bisexual Men of Latino Heritage*, 19 Culture, Health & Sexuality 107 (2017).

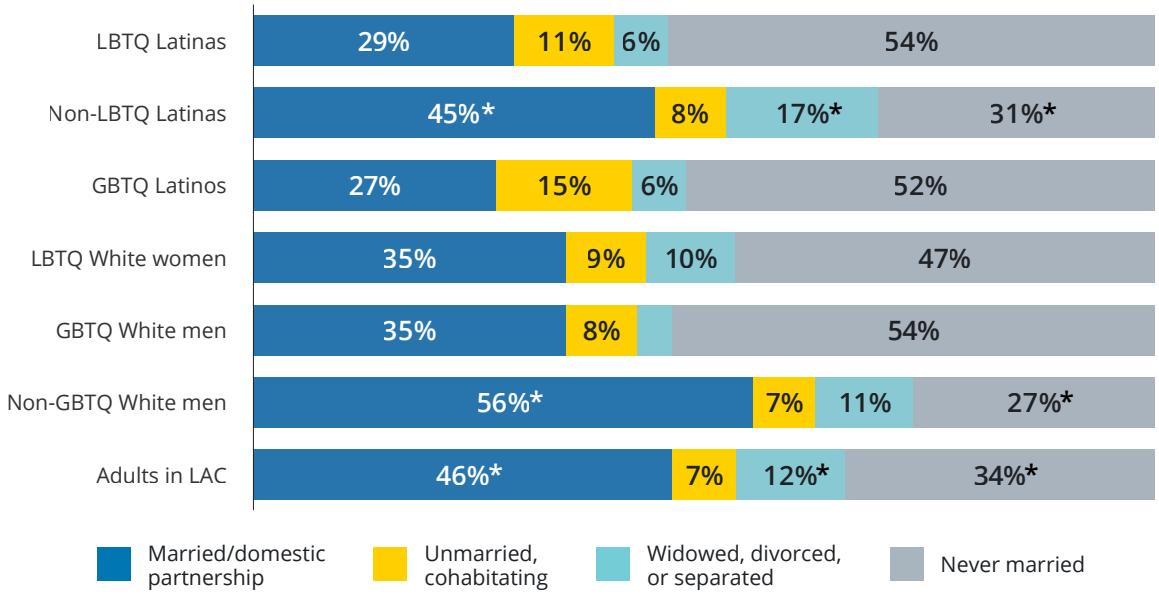
[71] Gisela Ponce Vega et al., *Familismo, Religiosidad, and Marianismo: College Latina Lesbians Navigating Cultural Values and Roles*, 22 J. Latinos & Educ. 1939 (2022). *See also* Antonio (Jay) Pastrana, *Being Out to Others: The Relative Importance of Family Support, Identity and Religion for LGBT Latina/os*, 13 Latino Stud. 88–112 (2015) (finding that perceived support from family had a significant, positive impact on outness levels and was two times stronger than the factor of feeling connected to the LGBT community).

[72] Posada Rodriguez, *supra* note 49.

[73] Sears et al., *supra* note 12.

[74] *Id*.

Figure 15. Marital status of adults in LA County, LACHS, 2023



Note: *Statistically significant as compared to LBTQ Latinas

These findings are consistent with prior Williams Institute analysis of national Gallup data,[75] which found that 18% of Latinx LBT women in the United States were married compared to 42% of Latinx non-LBT women and 21% of Latinx GBT men.[76] Further, Latinx LBT women (18%) were less likely to be married than White LBT women (26%), White GBT men (24%), and White non-GBT men (61%).[77]

In terms of broader partnership rates, Latinx LBT women (63%) and Latinx GBT men (63%) had a higher non-partnered rate (i.e., not married, in a domestic partnership, or cohabiting) compared to Latinx non-LBT women (45%) and Latinx non-GBT men (45%).[78] Latinx LBT women (63%) were more likely to be non-partnered than White LBT women (54%), White GBT men (57%), and White non-GBT men (34%).[79]

When considering the marital and partnership status of LBTQ Latinas, it is important to keep in mind that the majority of LBTQ Latinas in Los Angeles County identified as bisexual, and many were married or partnered with men. Among married or partnered Latinx LBT women in the United States, 28% had same-sex partners, and 72% had different-sex partners.[80]

Several structural and social factors likely contribute to lower marital and partnership rates for LBTQ Latinas. Marriage equality has only been available in the United States for the last two decades. Same-

[75] Angeliki Kastanis et al., *LGBT Data & Demographics*, Williams Inst. (Jan. 2018), https://williamsinstitute.law.ucla.edu/visualization/lgbt-stats/?topic=LGBT#density.

[76] Wilson et al., *supra* note 38; Wilson et al., *supra* note 48.

[77] *Id*.

[78] Wilson et al., *supra* note 48.

[79] *Id*.; Wilson et al., *supra* note 38.

[80] *Id*.

sex couples have had less time to marry and to envision lives that include marriage. Further, gender and racial wage gaps influence household income and may shape decisions around partnership and family formation, since two women partnered together, on average, have lower combined earnings than heterosexual or male same-sex couples.[81] For Latinx LBTQ women, these economic pressures intersect with racial and cultural dynamics that may discourage being openly in a same-sex partnership. Marital rates for LBTQ Latinas may also be lower due to broader effects of social stigma and immigration status.[82]

Because many LBTQ Latinas do not have spouses or partners to share economic, legal, or caregiving responsibilities, they face greater challenges in maintaining stable income, housing, and health coverage.[83] LBTQ Latinas' low marital and partnership rates can also create barriers to effectively accessing and utilizing programs and services. Many social programs, benefits, and community resources are designed with the assumption of traditional family or spousal support, which leaves single or non-partnered individuals at a disadvantage.[84] Wrap-around services that address health, economic, legal, and social needs simultaneously are one way to address this disadvantage. These services can be structured to provide cultural and adaptable care for individuals who cannot rely on partner-based support systems.[85]

LIVING ALONE, LONELINESS, AND SOCIAL SUPPORT

About one in seven (15%) LBTQ Latinas lived alone, similar to the percentage of all adults in Los Angeles County (17%), but less than the percentages of LBTQ White women (35%) and GBTQ White men (43%) who lived alone. However, almost half (47%) of LBTQ Latinas over age 50 reported living alone.

Based on the UCLA Loneliness Scale,[86] 45% of LBTQ Latinas in Los Angeles County were lonely, compared with 26% of adults overall in Los Angeles County (26%), 22% of non-LBTQ Latinas, and 20% of non-GBTQ White men. Studies show that adults with higher scores on the UCLA Loneliness Scale tend to experience more challenges related to friendships, romantic relationships, and health.[87]

In terms of getting the emotional support they needed, fewer LBTQ Latinas felt they always or usually received the support they needed than non-GBTQ White men in Los Angeles County (50% vs.73%).

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[81] Wilson et al., *supra* note 48.

[82] Wilson et al., *supra* note 38.

[83] *Id*.; Wilson et al., *supra* note 48.

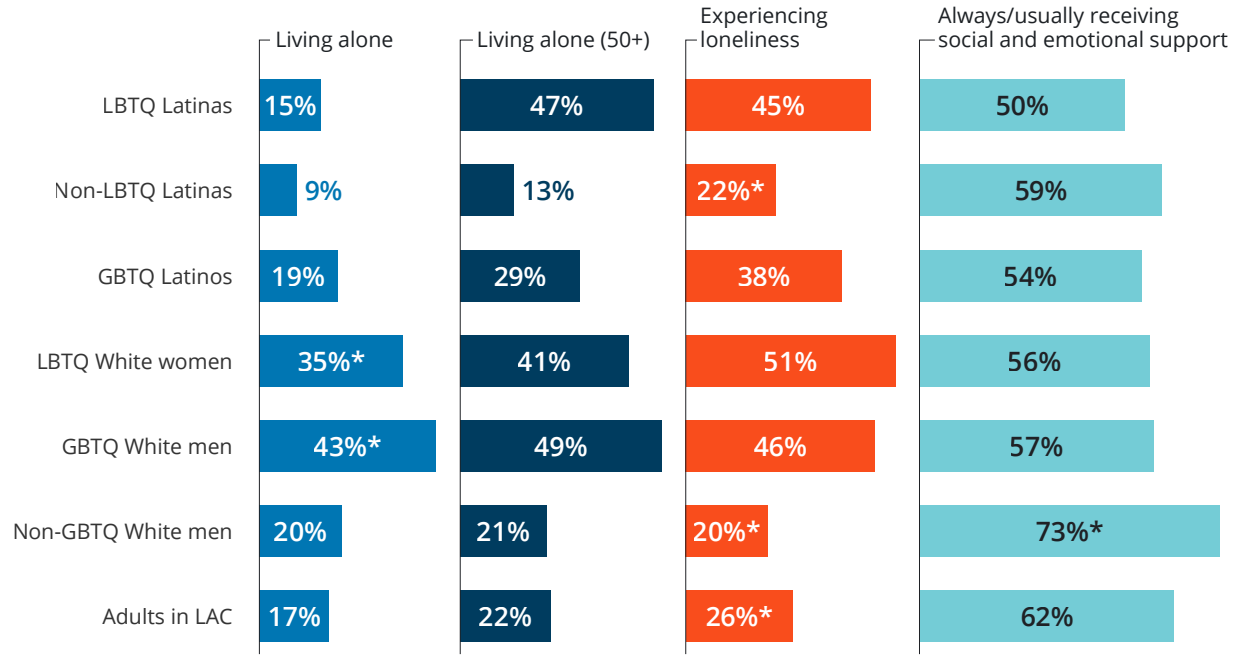
[84] *Id*.

[85] *Id.;* Wilson et al., *supra* note 48.

[86] The UCLA Loneliness Scale is one of the most widely used assessments for loneliness among adults. It asks 20 questions that focus primarily on people's evaluations of their social networks (e.g., "How often do you feel part of a group of friends?" and "How often do you feel that there are people who really understand you?") Studies show that adults who have higher scores on the UCLA Loneliness Scale tend to have more challenges related to friendships and romantic relationships, heath, well-being, and economic stability. *UCLA Loneliness Scale (Version 3)*, Stan. Univ.: SPARQTOOLS, https://sparqtools.org/mobility-measure/ucla-loneliness-scale-version-3/ (last visited Aug. 22, 2025).

[87] Stan. Univ.: SPARQTOOLS, *supra* note 86.

Figure 16. Adults in LA County living alone, experiencing loneliness, and lacking social and emotional support, LACHS 2023



Note: *Statistically significant as compared to LBTQ Latinas

These findings are consistent with prior research. Williams Institute analysis based on national data has found that Latinx LBT women are more likely to live alone than Latinx non-LBT women but less likely to live alone than Latinx GBT men,[88] White LBT women, White GBT men, and White non-GBT men.[89] A prior Williams Institute report also found that Latinx LBQ women reported similar levels of social support (67%), feeling alone too much (56%), and wondering if they will ever have a partner or spouse (44%) as White and Black LBQ women.[90]

When considering men and women, Latinx LGBT adults are less likely than non-Latinx LGBT adults to report moderate levels of social support or social well-being and more likely to report "feeling alone too much" or to wonder if they will ever find a partner or spouse.[91] However, Latinx LGBT adults did not significantly differ from White LGBT adults along these measures.[92]

Some of the other findings in this paper help explain why LBTQ Latinas in Los Angeles County had higher rates of living alone, experiencing loneliness, and feeling less social support than other groups. LBTQ Latinas who are older may be more likely to live alone because they are less likely to have a spouse or partner or to have children. However, overall, LBTQ Latinas may be less likely to live alone because they are a younger population and still live with their families and/or because they have

[88] Wilson et al., *supra* note 38; Wilson et al., *supra* note 48.

[89] Bianca D.M. Wilson, Lauren Bouton & Christy Mallory, Williams Inst., White LGBT Adults in the US: LGBT Well-Being at the Intersection of Race (2022), https://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBT-White-SES-Jan-2022.pdf.

[90] Wilson et al., *supra* note 48.

[91] Wilson, Bouton & Mallory, *supra* note 89.

[92] *Id*.

fewer resources and cannot live alone without family or roommates, even if they wish to do so. It is important to consider that some may see getting to live on their own as a positive milestone marking economic and family independence, while others may view it as contributing to loneliness. Since White LGBTQ adults are, on average, older and have more economic resources, they may be more likely to be able to live alone.

LBTQ Latinas may have higher rates of experiencing loneliness and feeling less social support because they are less likely than those in other groups to be out to immediate family members and friends; to have spouses, partners, or children; or to feel connected to LGBTQ communities, Latinx communities, or their local neighborhoods. Those who are religious or spiritual are also less likely to feel connected to their religious or spiritual communities. Prior researchers have noted that many of these factors contribute to feelings of less social support among LBQ women of color[93] and can be even greater for Latinx LGBT immigrants.[94] Cultural stigma, fear of family rejection, and strained parental relationships can further reduce LBTQ Latinas' social support networks and increase feelings of isolation.[95] Further, the financial insecurity of LBTQ Latinas can limit social engagement, restrict access to community spaces, and create shame or embarrassment that reinforces isolation. [96]

Programs that seek to engage LBTQ Latinas may present barriers to participation and reinforce social isolation. For example, an individual's financial limitations can prevent participation in programs such as community events, mental health therapy, or wellness activities.[97] Stigma and fear of discrimination (especially for immigrants, bisexual women, and those who remain partially closeted) can create hesitation in engaging with support groups or LGBT centers.[98] Further, as noted above, service providers may not adequately account for the unique needs of single or childless LBTQ Latinas, assuming support from within the household or from family or friends that may not be available.[99]

PARENTING

Fifteen percent of LBTQ Latinas were parents, similar to LGBTQ adults in Los Angeles County overall (18%). Of LBTQ Latina parents, 72% had a child under the age of 18 in the household. LBTQ Latina parents had become parents through a variety of pathways: 70% had biological children, 2% had stepchildren, and 21% had adopted or foster children.

[93] Wilson et al., *supra* note 48; Wilson et al., *supra* note 38.

[94] Guardado, Fuentes Carreño & Conron, *supra* note 44.

[95] Wilson et al., *supra* note 38.

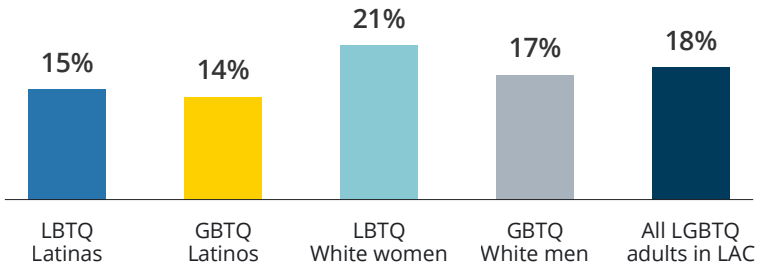
[96] *Id*.

[97] Perez & Torres, *supra* note 6.

[98] *Id*.

[99] Guardado, Fuentes Carreño & Conron, *supra* note 44.

Figure 17. Percent of lifetime parents among LGBTQ adults in LA County, LELAC, 2023

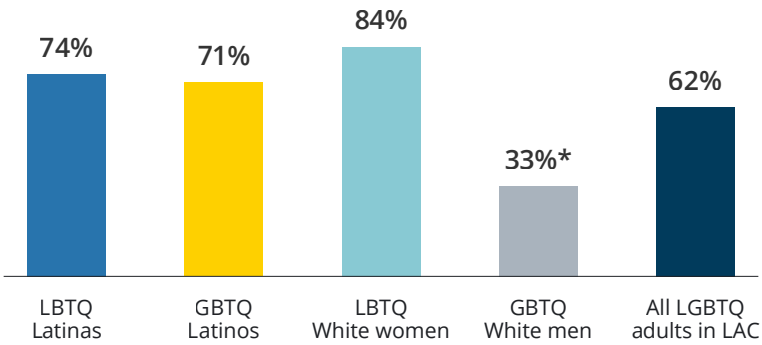


Note: No statistically significant differences as compared to LBTQ Latinas

These findings on parenting among LBTQ Latinas are aligned with the patterns identified in prior Williams Institute research. Analysis based on national Gallup data found that LBT Latinas were less likely to have children than non-LBT Latinas but more likely to have children than GBT Latinos.[100] They were also more likely to be raising children than LBT White women, GBT White men, and non-GBT White men.[101] Other Williams Institute analysis has shown that among Hispanic LBQ women, cisgender lesbian women, cisgender bisexual women, and transgender adults have similar rates of parenting.[102] However, Hispanic cisgender lesbian and bisexual women had higher rates of parenting than Hispanic cisgender gay and bisexual men.[103]

Consistent with national research, interest in family building among LBTQ Latinas in Los Angeles County is high.[104] Almost three-fourths (74%) of LBTQ Latinas under the age of 50 reported wanting to have children, including some who already had at least one child. LBTQ Latinas under the age of 50 were over twice as likely to say they wanted to have children as GBTQ White men (74% vs. 33%).

Figure 18. Percent of LGBTQ adults under 50 who want to have children (very much or somewhat) in LA County, LELAC, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas

[100] Wilson et al., *supra* note 38.

[101] Wilson, Bouton & Mallory, *supra* note 89.

[102] Bianca D.M. Wilson & Lauren J.A. Bouton, Williams Inst., LGBTQ Parenting in the U.S. 16 (2024), https://williamsinstitute.law.ucla.edu/publications/lgbt-parenting-us/.

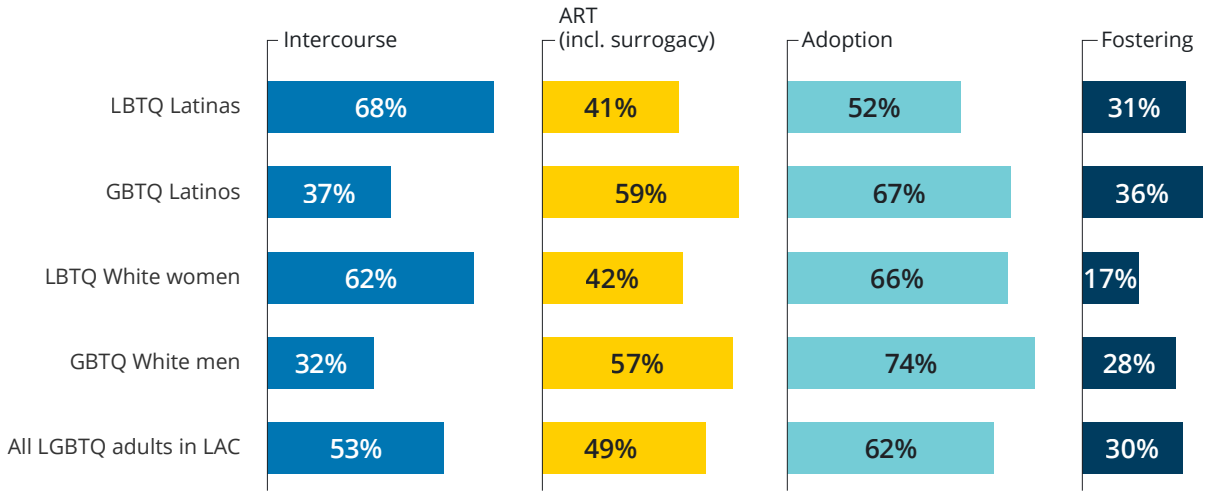
[103] *Id*.

[104] Ed Harris & Amanda Winn, Fam. Equal., LGBTQ Family Building Survey (2019), https://familyequality.org/resource/lgbtq-family-building-survey/.

Unlike the current study, prior Williams Institute research of national data found that Latinx LBQ women were more likely than White LBQ women to feel that they would be "very or extremely likely" to form families in the future (56% vs. 21%) and less likely to report that having children one day was "not at all important to them" (22% vs. 55%).[105]

Among LBTQ Latinas who wanted a child, most were considering multiple strategies to create or expand their families. Specifically, 68% were considering intercourse (defined as having sperm, egg, and uterus available and not needing assistance with insemination), 41% were considering assisted reproductive technology (ART), including IVF,[106] 52% were considering adoption, and 31% were considering fostering a child.

Figure 19. Methods considered for having a child among LGBTQ adults considering building or expanding their families, LELAC, 2023



Note: No statistically significant differences as compared to LBTQ Latinas

However, when asked about their preferred method for having a child, only 10% of LBTQ Latinas preferred adoption or fostering, while 59% preferred intercourse, and 31% preferred ART. Most (58%) felt that their preferred method was not at all likely (25%) or only somewhat likely (34%). LBTQ Latinas were more likely to feel that their preferred method was "very likely" than GBTQ White men (42% vs. 3%), and, although not a statistically significant difference, GBTQ Latinos (42% vs.19%).

LBTQ Latinas identified the following barriers to having children through their preferred method: cost (27%); not having a partner or spouse (15%); fertility problems (13%); not having one or more of the needed body parts, such as sperm, egg, uterus (10%); their partner or spouse being opposed to having children (3%); and other health problems (3%). LBTQ Latinas were less likely to identify not

[105] Wilson et al., *supra* note 48.

[106] In this study, ART was defined as including in vitro fertilization (IVF) and surrogacy and as needing one or more of the following: sperm, egg, uterus, or assistance with insemination. To simplify the question-and-response process, we listed insemination as an assisted reproductive technology; however, the term "medically assisted reproduction" is preferred by the American Society for Reproductive Medicine to describe assistance with insemination. Fernando Zegers-Hochschild et al., *The International Glossary on Infertility and Fertility Care, 2017*, 108 Fertility & Sterility 393 (2017).

having a partner or spouse as a barrier to having children through their preferred method than GBTQ White men (15% vs. 58%).

Prior research supports that the intersection of economic, social, and legal inequities creates barriers to family formation for LBTQ Latinas. These barriers can reduce current parenting rates, depress the desire to parent, and pose obstacles to family formation. For example, prior Williams Institute analysis based on national data also found that more Latinx LGBT adults (23%) than non-LGBT adults (5%)[107] and White LGBT adults (10%)[108] reported wanting to have children but feeling that they could not have them.

Prior research supports that economic vulnerability is one of the most significant barriers to parenting for LBTQ Latinas. LBTQ Latinas with children have even higher rates than LBTQ Latinas overall of living in households that have low incomes,[109] are experiencing food insecurity,[110] and are housing unstable.[111] National studies on LGBTQ parenting also indicate that Hispanic LGBTQ parents experience poverty at higher rates and do not benefit as significantly from the protective economic effects of marriage compared to White or Black LGBTQ parents.[112]

Economic vulnerability can mean that LBTQ Latinas do not have the financial stability that is often required for family building,[113] may prioritize survival needs over family planning, and may not be able to afford — in time or money — the costs of parenting support programs,[114] fertility treatments, adoption fees, or legal assistance for parental recognition.[115] These economic vulnerabilities can be compounded by limited access to affordable childcare and the lack of comprehensive paid family leave.[116] Parenting and family formation options for LBTQ Latinas can also be curtailed due to a lack of adequate health insurance coverage or access to health care.[117]

Further, the absence of legal recognition for LBTQ non-biological parents can compound the difficulties faced by LBTQ Latinas.[118] Prior Williams Institute research has found that nearly 22% of LBQ cisgender women are raising children to whom they are not legally recognized as parents, while another 9% are uncertain of their legal relationship, creating significant emotional and practical vulnerabilities.[119]

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[107] Wilson et al., *supra* note 38.

[108] Wilson, Bouton & Mallory, *supra* note 89.

[109] Wilson et al., *supra* note 48.

[110] Williams Inst., Food Insecurity and SNAP Participation in the LGBT Community (2016). https://williamsinstitute.law.ucla.edu/wp-content/uploads/Food-Insecurity-Graphic-Jul-2016.pdf.

[111] Wilson et al., *supra* note 48.

[112] Wilson & Bouton, *supra* note 102.

[113] Bianca D.M. Wilson et al., Williams Inst., Pathways into Poverty: Lived Experiences Among LGBTQ People (2020), https://williamsinstitute.law.ucla.edu/publications/pathways-into-poverty/.

[114] Williams Inst., *supra* note 110.

[115] Wilson & Bouton, *supra* note 102; Wilson et al., *supra* note 48.

[116] Wilson et al., *supra* note 48.

[117] Guardado, Fuentes Carreño & Conron, *supra* note 44.

[118] Wilson et al., *supra* note 48.

[119] *Id*.

LBTQ Latinas who are immigrants may face additional barriers to parenting. Williams Institute research has shown that Latinx LGBT immigrants without Green Cards are less likely to marry or raise children than their non-LGBT peers.[120] Immigrants without documents or Green Cards may have reduced access to marriage and parenting rights in the United States.[121] Fears of discrimination, detention, deportation, or loss of custody may further discourage LBTQ Latinas from parenting or accessing social services and programs that support parenting.[122]

RECOMMENDATIONS

Fifty-four LBTQ Latinas, or 79% of LBTQ Latinas, responded with suggestions to the question "What, if anything, should elected officials be doing to support LGBTQ people in having and raising children?"

Figure 20. Word cloud representing responses of LBTQ Latinas to the question, "What, if anything, should elected officials be doing to support LGBTQ people in having and raising children?" LELAC, 2023

Provide More Support, Opportunities, and Resources

Twenty-one (39%) of the responses to this question were general calls for more "acceptance," "help," "inclusion," "support," "resources," and "options" for LBTQ Latinas to be parents. Examples of these responses include:

> *Possibly making it more accessible to us? Give us the resources to parent.*
>
> — Cisgender bisexual Latina in her 30s

[120] Guardado, Fuentes Carreño & Conron, *supra* note 44.

[121] *Id*.

[122] *Id*.

Support for parents wanting to raise children regardless of their identity or sexual preferences.

— Cisgender lesbian Latina in her 40s

Normalize LGBTQ Families and Provide them with Equal Legal Protections

One in five (20%) LBTQ Latinas who provided recommendations focused on the need to "normalize" LGBTQ families (11%) and provide them with legal protections and equal parental rights (9%) without tying their comments to a specific policy around adoption, fostering, childcare, or paid family leave as discussed below. Examples included:

Normalize same-sex parents … people think same-sex parents are unfit solely because they are in a same-sex relationship.

— Cisgender bisexual Latina in her 20s

[LGBTQ parents should] have the same rights as 'regular' heterosexual couples do.

— Cisgender bisexual Latina in her 20s

Make Adoption and Foster Care Easier and More Affordable

One in five (20%) LBTQ Latinas who provided recommendations specifically mentioned adoption or foster care. Respondents called for the adoption and fostering process to be easier, including through legal reform, lowering costs, providing resources to meet costs, and addressing bias towards LGBTQ families in the adoption system.

Make adoption an easier process for LGBTQ families; there are so many children in the system who need a loving family. The system fails everyone.

— Cisgender Latina lesbian in her 40s

Allow the adoption process not to be so harsh on LGBTQ people.

— Cisgender Latina lesbian in her 20s

Making ART, Including IVF, More Affordable

Nine (17%) LBTQ Latinas focused their recommendations on making ART, including IVF, more affordable, as well as adoption. Examples of these responses included:

Make [parenting] more affordable. Adoption is so expensive. IVF is so expensive. My partner and I went through an unsuccessful IVF round, but we can't afford a second. Adoption is our next option, but the cost is deterring us from jumping in.

— Cisgender Latina lesbian in her 30s

Implement changes in the insurance sector to allow the coverage of reproductive services, such as IVF, egg retrieval, hormone therapy, and other needs for queer couples attempting pregnancy. Adoption fees are astoundingly high. These hurdles, among others, make having a family out of reach for many people.

— Cisgender bisexual Latinas in her 30s

Educate the community on the cost/income barriers we have, because attempting to have children is expensive and sometimes not successful. This is a service used by heterosexual cisgender people too, not just LGBTQ+ folks. It would be great to have some sort of assistance program to help with costs.

— Cisgender Latina lesbian in her 30s

Improving Education for LGBTQ Students and Parents

Seven LBTQ Latina respondents framed their recommendations around the education system, including improving school safety, teaching students about LGBTQ people, and making schools more welcoming to LGBTQ parents. These responses included:

Make sure the kids or parents aren't discriminated against or bullied at school.

— Transgender pansexual Latina in her 20s

Teach equality and diversity at a young age in schools and throughout the school years.

— Cisgender lesbian Latina in her 50s

Increasing Support for Paid Family Leave and Childcare

Finally, three respondents called for more "accessible and affordable childcare" and "paid family leave." For example:

We need greater maternity leave for both partners, equal to that of most European countries.

— Cisgender bisexual Latinas in her 30s

Recommendations

- Provide support, including mental health services and community and peer support, for LBTQ Latinas who are not out to friends and family members.
- Provide support and social activities for LBTQ Latinas, in particular those who are older, who may live alone, feel lonely, or lack the emotional and social support they need.
- Provide wrap-around services – including legal assistance, childcare subsidies, health care access, social support networks, economic support, and social services – to help LBTQ Latinas achieve economic, social, and family stability.
- Offer culturally and linguistically specific outreach, services, and supports to build trust and address the unique needs of LBTQ Latina parents.

- Expand insurance and Medi-Cal coverage for ART (including IVF) and fertility preservation for LGBTQ people.
- Develop a state tax credit for family formation costs beyond adoption, including all costs associated with surrogacy.
- Expand parental leave requirements and provide childcare support and legal protections for diverse family structures.
- Educate LGBTQ people about family-building options and fertility resources, and adoption and fostering access, costs, and resources through the California Department of Social Services, including the state child adoption tax credit.[123]
- Implement practices that ensure LGBTQ students and children of LGBTQ parents feel safe, respected, and fully integrated into school environments.

[123] *California Foster Care and Adoption Guidelines*, AdoptUSKids, https://adoptuskids.org/adoption-and-foster-care/how-to-adopt-and-foster/state-information/california (last visited Aug. 22, 2025); *Frequently Asked Questions About Adoption*, Cal. Dep't Soc. Servs., https://www.cdss.ca.gov/adoptions (last visited Aug. 22, 2025); *Child Adoption Costs Credit*, Cal. Franchise Tax Bd. (Feb. 18, 2025), https://www.ftb.ca.gov/file/personal/credits/child-adoption-costs-credit.html.

COMMUNITIES AND PUBLIC SPACES

This section looks at LBTQ Latinas' experiences in Los Angeles County beyond family and friends to their interactions in communities, where LBTQ Latinas may be more likely to seek support or have more control in shaping their interactions (such as religious and spiritual communities, LGBTQ communities, and local neighborhoods), and in more public spaces, where they have minimal control shaping their experience (such as work, stores, entertainment venues, parks and beaches, and public transportation). See Figure 13 above.

LGBTQ COMMUNITIES AND SPACES

One in five (20%) LBTQ Latinas reported having been verbally harassed by strangers while attending an LGBTQ event (e.g., a Pride parade or a festival) or visiting an LGBTQ organization, community center, theater, restaurant, or business in Los Angeles County. Most (80%) had their most recent experience within the past five years. LBTQ Latina respondents described these experiences in written responses, such as:

> *As part of the LGBTQ community, there have been several times when we were called certain names due to holding hands in public. It sometimes makes me feel uncomfortable and sad that we are not welcome or accepted.*
>
> — Cisgender Latina lesbian in her 20s

> *I was shot with a paintball gun out of a moving car during Pride Month, walking out of a gay bar on Sunset Avenue at night. My girlfriend and I do not appear White, and we were holding hands.*
>
> — Cisgender bisexual Latina in her 30s

Others called for more protection when visiting LGBTQ spaces. For example:

> *We need more patrols of LGBTQ areas.*
>
> — Cisgender bisexual Latina in her 20s

> *We need more safe places for LGBTQ communities.*
>
> — Cisgender bisexual Latina in her 20s

With increasing frequency over the past several years, events intended for the LGBTQ community in many areas of the country have been subject to violent threats. In 2024, the FBI and the Department of Homeland Security issued a warning that terrorist organizations may target LGBTQ events, particularly Pride Month events.[124]

[124] Rebecca Santana, *Federal Agencies Warn of Possible Threats to LGBTQ Events, Including Pride Month Activities*, PBS (May 14, 2024), https://www.pbs.org/newshour/politics/federal-agencies-warn-of-possible-threats-to-lgbtq-eventsincluding-pride-month-activities.

LBTQ Latinas in Los Angeles County also reported avoiding LGBTQ spaces out of concerns for their safety. Eleven percent of LBTQ Latinas reported avoiding going to LGBTQ bars, nightclubs, or events, including Pride festivals, and 8% avoided going to other LGBTQ organizations or businesses, including LGBTQ bookstores, to avoid being assaulted or attacked due to their sexual orientation or gender identity.

Finally, in responding to a write-in question about experiences of racism, four LBTQ Latinas wrote about experiences of racism within LGBTQ communities or spaces. These responses include:

> *I have been called a spic or a wetback by White people in the community.*
>
> — Transgender sexual minority Latina in her 20s

> *My experiences as a bisexual person were often ignored. At first, I was a little confused about how to feel, but it sort of made me unable to feel comfortable relating to other non POC queer individuals.*
>
> — Cisgender bisexual Latina in her 20s

These experiences align with those documented in prior research. For example, a study based on interviews with Latina lesbians showed that many have experienced alienation from both White LGBQ communities and Latino non-LGBQ communities because of racism and homophobia.[125] Another study documented that perceived limitations in networking and community building within LGBTQ communities by younger LBTQ Latinas led to feelings of isolation.[126]

Biphobia can also lead to feelings of alienation among bisexual Latinas from both LGBTQ and Latinx communities. Prior Williams Institute analysis of national data found that more lesbian women of all races/ethnicities felt connected to the LGB community (81% vs. 59%) and to their racial/ethnic community (30% vs. 21%) than bisexual/queer women.[127] In one study, bisexual Latinx women reported that heterosexual individuals viewed them as threatening to relationships, and sexual minorities believed they threatened the integrity of LGBTQ identity and community.[128]

For LBTQ Latinas, pinpointing one reason for a discriminatory event or feelings of alienation may not be possible or sufficient.[129] A Williams Institute study of LBQ women found that 85% of Latinx LBQ women perceived multiple reasons, such as race/ethnicity, sexual orientation, and being female, for experiencing a discriminatory event.[130]

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[125] Susana Rodriguez, Negotiating Our Membership: Factors Leading Latina Lesbians to Develop a Political Collective Identity (2014) (M.S.W. thesis, Smith Coll.) (https://scholarworks.smith.edu/theses/828).

[126] Christie A. Santos et al., *Sexual Health in a Social and Cultural Context: A Qualitative Study of Young Latina Lesbian, Bisexual, and Queer Women*, 4 J. Racial & Ethnic Health Disparities 1206 (2017).

[127] Wilson et al., *supra* note 48.

[128] Santos et al., *supra* note 126.

[129] *Id*.

[130] Wilson et al., *supra* note 48.

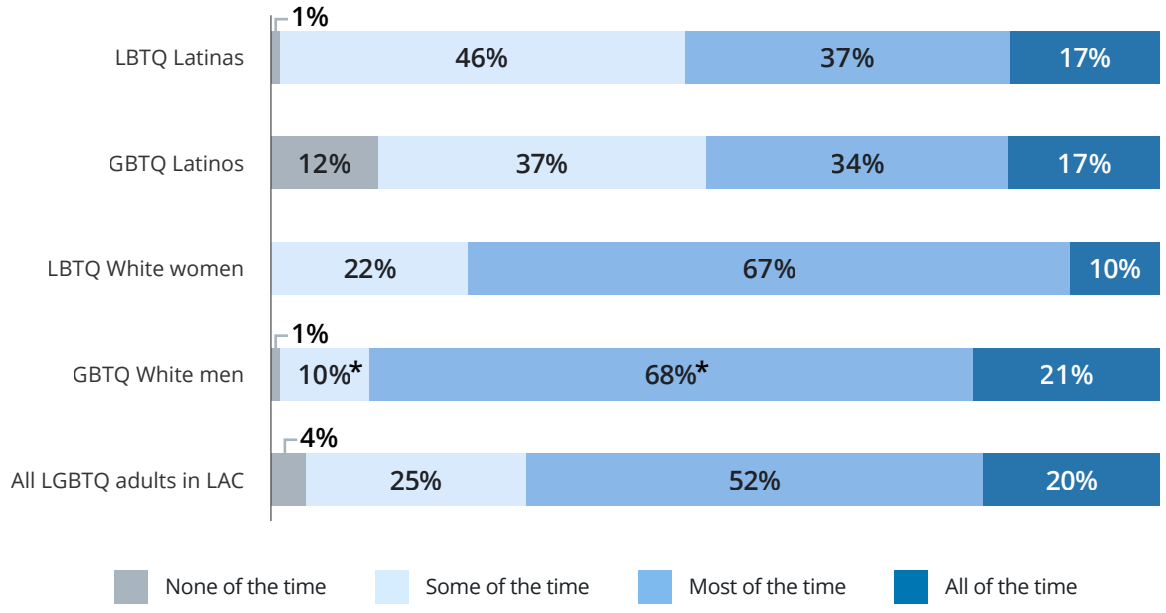
LATINX COMMUNITIES

While the LELAC survey did not ask specifically about respondents' connections to their racial and ethnic communities, it did ask about perceptions of acceptance and safety in respondents' local "neighborhoods." The geographic data collected by the LACHS and summarized above, as well as prior Williams Institute research,[131] indicated that LBTQ Latinas are more likely than White LGBTQ people to live in their racial and ethnic communities than they are to live in historically LGBTQ communities in Los Angeles County, such as West Hollywood.

When asked about acceptance of LGBTQ people in the neighborhood where they lived, about one in four LBTQ Latinas (24%) indicated there was only "a little" acceptance or "none." While not statistically significant, this finding was higher than for the other three LGBTQ racial/ethnic and gender comparison groups in this report: only 13% of GBTQ Latinos, 7% of GBTQ White men, and 5% of LBTQ White women felt this way. In other words, LBTQ Latinas reported feeling less accepted in their local neighborhoods.

When asked if they felt safe in their neighborhood, all, most, some, or none of the time, less than one in five LBTQ Latinas (17%) said they felt safe all of the time in their neighborhood, and just over half (53%) felt safe all or most of the time. In contrast, 89% of GBTQ White men felt safe all (21%) or most (68%) of the time in their neighborhoods. This finding is consistent with findings that among LGBTQ adults in Los Angeles County overall, LGBTQ people of color were less likely to feel safe in their neighborhoods than White LGBTQ people.[132]

Figure 21. How often LGBTQ adults felt safe in their neighborhood in LA County, by gender and race/ethnicity, LELAC, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas

[131] Brad Sears, Neko Castleberry & Christy Mallory, Communities of Resilience: LGBTQ People by Supervisorial District in Los Angeles County (2024), https://williamsinstitute.law.ucla.edu/wp-content/uploads/LACo-Districts-Nov-2024.pdf.

[132] Sears et al., *supra* note 12.

Prior research indicates LBTQ Latinas often face feelings of alienation in or disconnectedness from the Latinx community.[133] Prior research by the Williams Institute also found that:

- Latinx LGBTQ adults overall felt less connected to their race/ethnic community compared to Latinx non-LGBTQ adults (43% vs. 61%).[134]
- Bisexual women of all races/ethnicities feel less connected to their race/ethnic community than lesbians (20% vs. 30%).[135]
- Transgender LBQ women (7%) of all race/ethnicities feel less connected to their race/ethnic communities than cisgender GBQ men (24%), LBQ women (25%), straight women (25%), and straight men (33%).[136]

Factors that influence LBTQ Latinas' feelings of alienation from Latinx communities include homophobia, transphobia, religious beliefs, lack of LGBTQ visibility, and negative responses to coming out.[137] Certain beliefs within some Latinx cultures can also lead to internalized homophobia and challenges in accepting LGBTQ identity.[138] Familismo (familial expectations of heterosexual traditions such as women marrying men) and marianismo (gendered expectations of conforming to standards of femininity) are two examples of these cultural beliefs.[139] Further, as discussed more in the next section, religious beliefs within some Latinx cultures can also lead to isolation and social rejection.[140]

RELIGIOUS AND SPIRITUAL COMMUNITIES

The vast majority of LBTQ Latinas in Los Angeles County identify as either a religious person, a spiritual person, or both. Two-thirds of LBTQ Latinas (68%) identified as a spiritual person, and 20% identified as a religious person.[141]

Over half of LBTQ Latinas (53%) in Los Angeles County indicated that religion was very or somewhat important in their lives. In contrast, in 2014, 75% of all adults in the Los Angeles metro area reported that religion was very or somewhat important in their lives.[142] Besides differences based on LGBTQ status, differences based on age could explain some of this difference in religiosity, since LBTQ Latinas are younger than the general adult population in California, and younger adults are less likely to be religious.[143]

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[133] Wilson et al., *supra* note 48.

[134] Wilson et al., *supra* note 38.

[135] Wilson et al., *supra* note 48.

[136] *Id*.

[137] Ponce Vega et al., *supra* note 71.

[138] Santos et al., *supra* note 126.

[139] Ponce Vega et al., *supra* note 72.

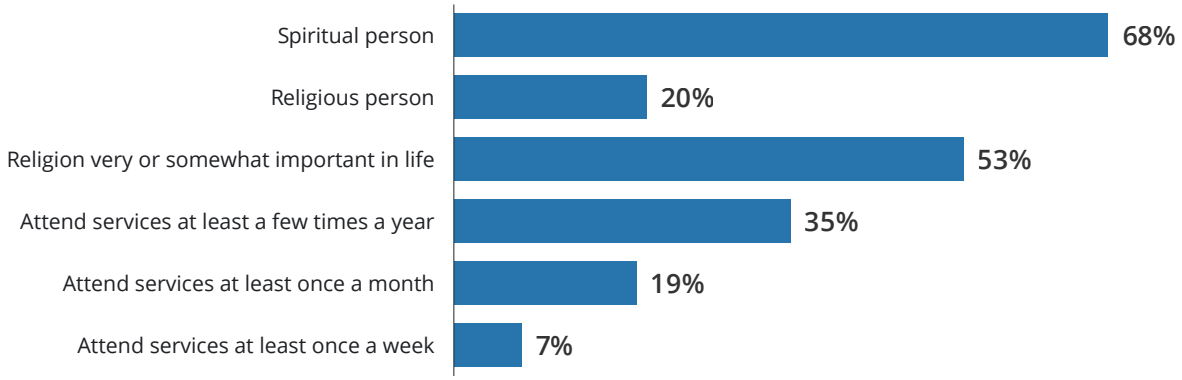
[140] Posada Rodriguez, *supra* note 49; Santos et al., *supra* note 126.

[141] When "don't know" responses are considered, only 21% of LBTQ Latinas clearly indicated that they were not a spiritual person and only half (51%) clearly indicated that they were not a religious person.

[142] *People in the Los Angeles Metro Area*, Pew Rsch. Ctr.: Religious Landscape Study (2025), https://www.pewresearch.org/religious-landscape-study/metro-area/los-angeles-ca/.

[143] Jennifer Agiesta, *Americans Decreasingly Call Religion Important to Their Lives and Are Divided Over Its Role in Society*, CNN (Feb. 26, 2025), https://www.cnn.com/2025/02/26/us/religious-views-usa-pew-study.

Figure 22. Religious and spiritual beliefs and practices of LBTQ Latinas in LA County, LELAC, 2023



Approximately one-third of LBTQ Latinas (35%) in Los Angeles County attended religious services at least a few times a year, and one in five (19%) attended at least once a month. By comparison, recent data from the U.S. Census Bureau's Household Pulse Survey indicate that in the Los Angeles metro area, 41% of all adults attend religious services at least a few times a year, with 18% reporting that they attend services at least once a week.[144]

Although not statistically significant, LBTQ Latinas were more likely to report attending religious services at least once a month (19%) than GBTQ Latinos (10%), LBTQ White women (8%), GBTQ White men (7%), and all LGBTQ adults in Los Angeles County (10%).

While Latinx LBT women had similar rates as Latinx GBT men of identifying as highly religious and not religious, they were less likely to identify as highly religious than Latinx non-LBT women (27% vs. 47%) and more likely to identify as not religious (42% vs. 20%).[145] Latinx LBT women were also more likely to identify as highly religious (27%) than White LBT women (17%) and White GBT men (18%) and less likely to identify as not religious (42%) than White LBT women (58%) and White GBT men (60%).[146]

In terms of religious denomination, prior Williams Institute research based on national data found that Latinx LBT women were more likely than Latinx GBT men to belong to "other religions" but less likely to be Protestant or Roman Catholic.[147] Latinx LBT women were more likely to be Roman Catholic (35%) than White LBT women (13%) and White GBT men (18%) and less likely to be Protestant, identify with no religion, or be agnostic or atheist.[148]

While over two-thirds of LBTQ Latinas (68%) in Los Angeles County indicated that they were part of a spiritual or religious community, the majority (65%) were not out as LBTQ to anyone in that

[144] Ryan Burge, *Which Cities are the Least Religious?*, Graphs About Religion (Mar. 18, 2024), https://www.graphsaboutreligion.com/p/which-cities-are-the-least-religious.

[145] Wilson et al., *supra* note 38.

[146] Wilson, Bouton & Mallory, *supra* note 89.

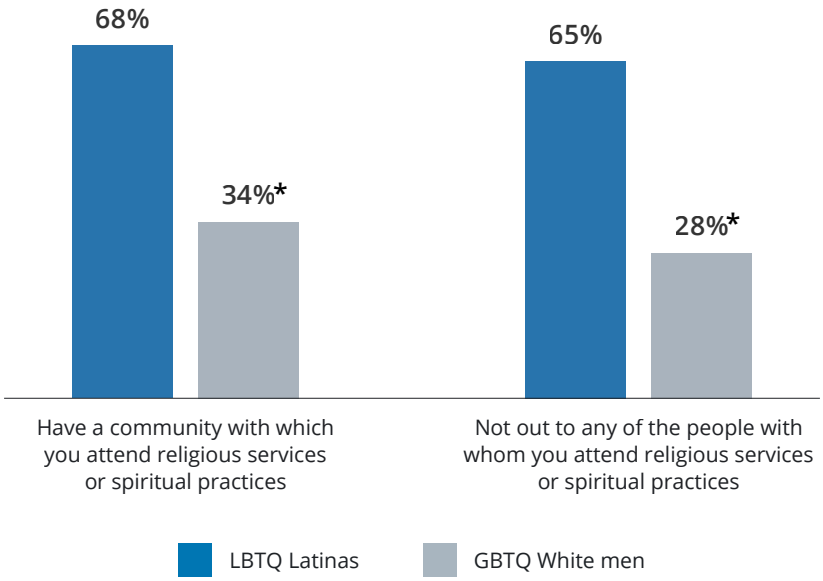
[147] Wilson et al., *supra* note 38.

[148] Wilson, Bouton & Mallory, *supra* note 89.

community, and only 21% indicated that they were out to everyone.[149] While only 4% of LBTQ Latinas indicated that they had been discouraged from pursuing religion based on sexual orientation or gender identity in Los Angeles County at some point in their lives, almost one in four reported that they avoided religious or spiritual practices to avoid unfair treatment (23%) or to avoid being threated or physically attacked (23%) because of sexual orientation or gender identity in the past year.

While LBTQ Latinas did not show statistically significant differences on most measures related to their religion and spirituality, they were twice as likely to indicate that they were part of a religious or spiritual community than GBTQ White men in Los Angeles County (68% vs. 34%) but also over twice as likely to not be out to anyone in their community of faith compared to GBTQ White men (65% vs. 28%).[150] This is consistent with prior research that showed that LGBTQ people of color and cisgender bisexual women in Los Angeles County are less likely to be out to any of the people with whom they attend religious or spiritual services.[151]

Figure 23. LBTQ Latinas and GBTQ White men in LA County who indicated that they had a religious or spiritual community and were not out to any of the people in that community, LELAC, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas

Prior research suggests that conflicts between sexual orientation and traditional religious teachings can lead some LBTQ Latinas to distance themselves from organized religion.[152] For some, religion can

[149] These percentages are out of those who responded none, some, most, or all. They do not include adults who selected that the question did not apply to them or that they did not know their level of outness to members of their religious or spiritual community. Analysis on file with authors.

[150] These percentages are out of those who responded none, some, most, or all. They do not include adults who selected that the question did not apply to them or that they did not know their level of outness to members of their religious or spiritual community. Analysis on file with authors.

[151] Sears et al., *supra* note 12.

[152] Wilson et al., *supra* note 38; Wilson et al., *supra* note 48.

create shared values and a source of pride with family and Latinx communities while simultaneously being a source of alienation. Prior researchers have suggested that homophobia, stricter gender roles, and heteronormative expectations (such as different-sex marriage) are ingrained in the religious beliefs of some Latinx people or some denominations of Catholicism and Christianity more broadly. This can contribute to LBTQ Latinas' struggles in accepting their LBTQ identity and in coming out, and can create stress, self-consciousness, and feelings of guilt.[153]

One study found that 78% of LGB Latinos/as noted family religious values as a significant stress factor in coming out.[154] Negative religious messaging directly from churches, peers, and schools (including those that are religiously affiliated) can further fuel alienation and shame.[155] These experiences may deter LBTQ Latinas from accessing community-based resources or health services from providers who are associated with religious institutions. Service providers who seek to address these disparities must offer culturally responsive, secular, and affirming programs that acknowledge the tension between faith and LGBTQ identity while actively working to reduce stigma rooted in religious and cultural norms.[156]

EMPLOYMENT

When asked about their "biggest sources of worry," over one in 10 LBTQ Latinas (12%) focused on their jobs and careers. These responses included:

> *El no tener trabajo*
>
> — Transgender Latina lesbian in her 50s

> *Unemployed, voluntarily quit due to burnout, unsure of next steps.*
>
> — Cisgender bisexual Latina in her 50s

> *Not having enough money, finding a job*
>
> — Cisgender Latina lesbian in her 30s

Almost seven in 10 LBTQ Latinas (69%) in Los Angeles County were employed, 15% were unemployed but looking for work, and 17% were not working and not looking for work. While LBTQ Latinas' levels of being employed and unemployed did not differ significantly from other groups in Los Angeles County, they were half as likely to not be in the workforce as non-LBTQ Latinas (33%), non-GBTQ White men (35%), and adults in Los Angeles County overall (30%). This may be in part explained by the fact that LBTQ Latinas are a younger population and thus less likely to be out of the workforce due to older age or retirement.

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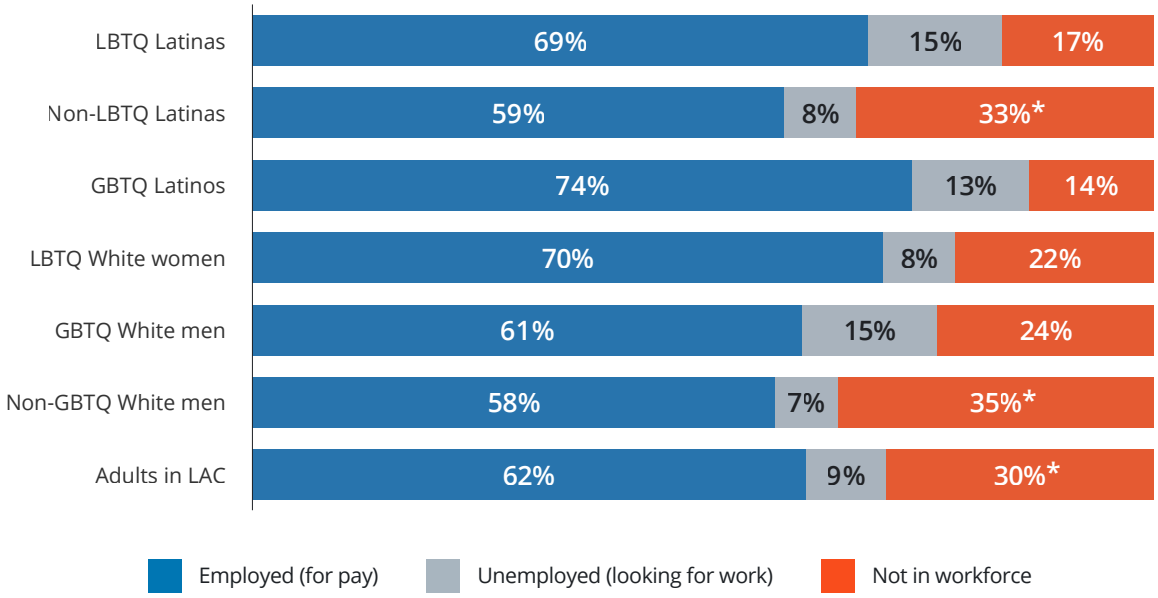
[153] *See, e.g.*, Pastrana, *supra* note 71; Nicole N. Gray, David M. Mendelsohn & Allen M. Omoto, *Community Connectedness, Challenges, and Resilience Among Gay Latino Immigrants*, 55 Am. J. Cmty. Psych. 202 (2015); Santos et al., *supra* note 126; Ponce Vega et al., *supra* note 71; Vega, *supra* note 49.

[154] Posada Rodriguez, *supra* note 49; Vega, *supra* note 49.

[155] *Id.*; Ponce Vega, *supra* note 71.

[156] Christy Mallory et al., Williams Inst., Public Attitudes Toward the Use of Religious Beliefs to Discriminate Against LGBTQ People (2023), https://williamsinstitute.law.ucla.edu/publications/public-opinion-religious-exempt/.

Figure 24. Employment status of adults in LA County, LACHS, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas

The finding that 15% of LBTQ Latinas were unemployed but looking for work is consistent with high rates of unemployment for younger people,[157] as LBTQ Latinas in Los Angeles County are predominantly between the ages of 18 and 34. This study and prior research suggest that LBTQ Latinas experience workplace discrimination and harassment based on LGBTQ identity, sex, and race/ethnicity that could affect their participation in the workforce (see Employment Discrimination and Employment Verbal Harassment section below). A prior Williams Institute study on Latinx LGBTQ adults' workplace experiences found that 41% of LGBTQ Latinx employees reported leaving a job because of how they were treated due to their LGBTQ status.[158] Finally, citizenship status may also create barriers to employment for LBTQ Latinas.[159]

Prior Williams Institute studies based on national data have found that Latinx LBT women had higher rates of unemployment than White LBT women, White GBT men, and White non-GBT men.[160] However, another Williams Institute study found similar rates of unemployment between Latinx LBQ women and White LBQ women.[161]

Prior Williams Institute analysis also suggests that LBTQ Latinas may face a great deal of job instability even if they are currently employed. A study focused on Latinx LGBTQ people found that while 13% of Latinx LBTQ women reported being unemployed, 43% of Latinx LBTQ women also reported that they

[157] *Labor Force Statistics from the Current Population Survey*, U.S. Bureau of Lab. Stat. (Aug. 1, 2025), https://www.bls.gov/web/empsit/cpseea10.htm.

[158] Brad Sears et al., Williams Inst., Workplace Experiences of Latinx LGBTQ Employees (2024). https://williamsinstitute.law.ucla.edu/wp-content/uploads/Latinx-Workplace-Oct-2024.pdf.

[159] Wilson et al., *supra* note 38.

[160] Wilson, Bouton & Mallory, *supra* note 89.

[161] Wilson et al., *supra* note 48.

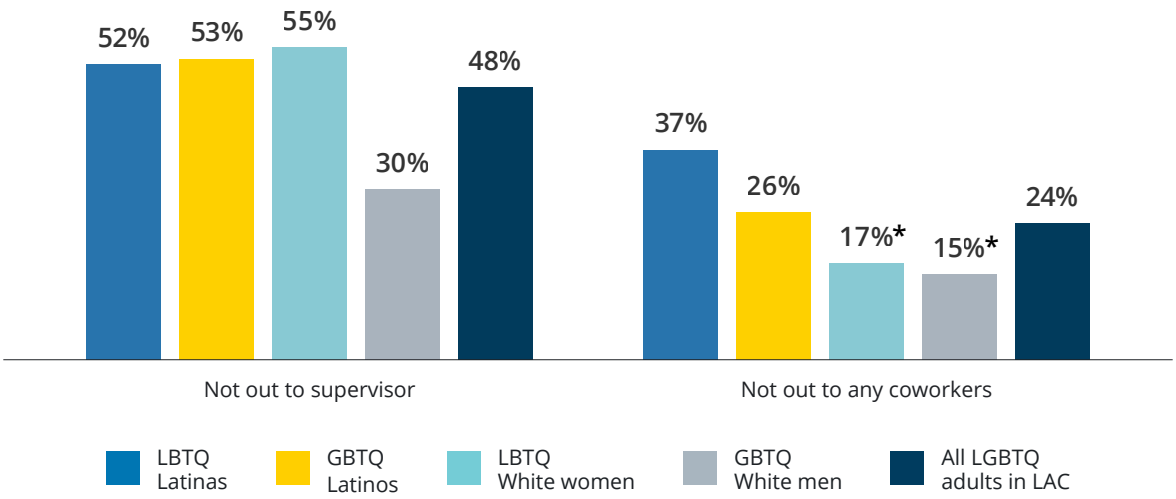
were looking for a job but couldn't find one they wanted; 18% had been fired or laid off in the prior year; 41% had been unemployed in the prior year and had been looking for a job for more than one month; and 50% had changed jobs, job responsibilities, or work hours in the prior year.[162]

Finally, it is essential to note that the high unemployment rate among LBTQ Latinas in Los Angeles County reflects the county's overall high unemployment rate, which ranks 342nd out of 387 metropolitan areas in the United States.[163] The higher unemployment rate in Los Angeles can be attributed in part to the continued impacts of the COVID-19 pandemic, high inflation, rollbacks in the tech sector, the relocation of the entertainment sector, disruptions to supply chains, including those at the port of Los Angeles, and the lingering effects of strikes in the entertainment industry.[164]

Being Out at Work

Less than half (48%) of employed LBTQ Latinas are out to their immediate supervisor, and only 29% are out to all of their coworkers. Put differently, over half of LBTQ Latina employees (52%) are not out to their supervisor, and over one-third (37%) are not out to any of their coworkers. LBTQ Latinas did not differ significantly from other groups in terms of being out to their supervisor. However, they were significantly more likely to be out to none of their coworkers than LBTQ White women (17%) and GBTQ White men (15%).

Figure 25. Level of outness at work among LGBTQ employees in LA County to supervisors and coworkers, by sex and by race/ethnicity, LELAC, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas. Percentages are based on responses of "none/no," "some," "most," or "all/yes." They do not include those who selected that the question did not apply to them or who did not know their level of outness at work. Analysis on file with authors.

[162] Wilson et al., *supra* note 38.

[163] *Local Area Unemployment Statistics: Unemployment Rates for Metropolitan Areas*, U.S. Bureau Lab. Stat. (July 30, 2025), https://www.bls.gov/web/metro/laummtrk.htm.

[164] David Lightman, *Why Does California Have the Nation's Highest Unemployment Rate? Three Sectors Were Hit Hard*, Sacramento Bee (Apr. 5, 2024, 8:49 AM), https://www.sacbee.com/news/california/article287381510.html.

A prior Williams Institute analysis based on national data found that 31% of Latinx LBQ women were not out to their coworkers; this was higher than, but not statistically different from, White LBQ women (18%).[165] A Williams Institute study based on a 2023 workplace survey found that nearly half (46%) of Latinx LGBTQ employees reported not being out to their current supervisor, and 18% reported that they were not out to any of their co-workers. Less than one-third (31%) of Latinx LGBTQ employees reported that they were out to all their coworkers.[166]

Prior Williams Institute research suggests that gender, sexual orientation, and age may explain why many LBQ Latinas are not out in the workplace. As presented above, approximately two-thirds of LBTQ Latinas are bisexual and under the age of 35. Prior Williams Institute analysis focused on LBQ women found that LBQ women were more likely to not be out to their coworkers than GBQ men (27% vs. 20%); cisgender bisexual women were more likely to not be out than cisgender lesbians (36% vs. 7%); and LBQ women under 50 were more likely to not be out than those who are over 50 (29% vs. 13%).[167]

Not being out, in full or in part, is a way that many LGBTQ employees protect themselves from discrimination and harassment. Williams Institute research has shown that those who are out to at least some people in the workplace are twice as likely to have experienced discrimination or harassment because of their sexual orientation or gender identity than those who are not out to anyone at work (54% vs. 21%).[168]

Discrimination

Over one in eight LBTQ Latinas (13%) reported having been fired or not promoted at work during their careers because of their sexual orientation or gender identity while living in Los Angeles County. While lifetime rates of being fired or not promoted were similar to those of other groups, LBTQ Latinas were much more likely to report their most recent experience within the past five years. Among those who had these experiences, 82% of GBTQ White men had their most recent occurrence of being fired or not promoted over five years ago, while all LBTQ Latinas reported their most recent experience within the past five years.

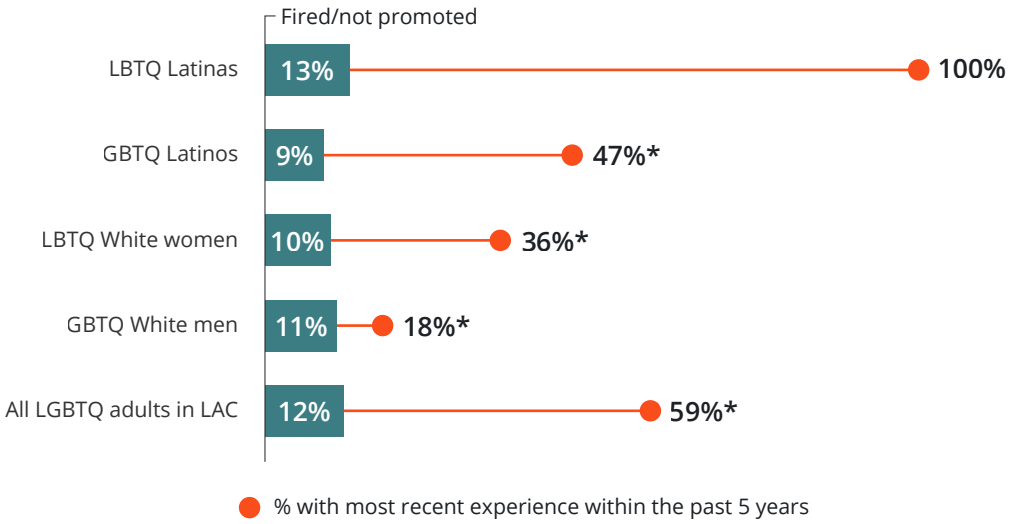
165 Wilson et al., *supra* note 48.

166 Sears et al., *supra* note 158.

167 Wilson et al., *supra* note 48.

168 Brad Sears et al., Williams Inst., LGBTQ People's Experiences of Workplace Discrimination and Harassment (2024), https:// williamsinstitute.law.ucla.edu/publications/lgbt-workplace-discrimination/.

Figure 26. LGBTQ adults fired/not promoted in LA County because of their sexual orientation or gender identity, lifetime, and those with the most recent experience within the past five years, LELAC, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas.

Similarly, one in seven LBTQ Latinas (14%) reported having not been hired for a job during their careers because of their sexual orientation or gender identity while living in Los Angeles County. While lifetime rates of not being hired were similar for comparison groups, LBTQ Latinas were also more likely to have reported that their most recent experience of not being hired for a job occurred within the past five years.

Figure 27. LGBTQ adults not hired in LA County because of their sexual orientation or gender identity, lifetime, and those with more recent experience within the past five years, LELAC, 2023

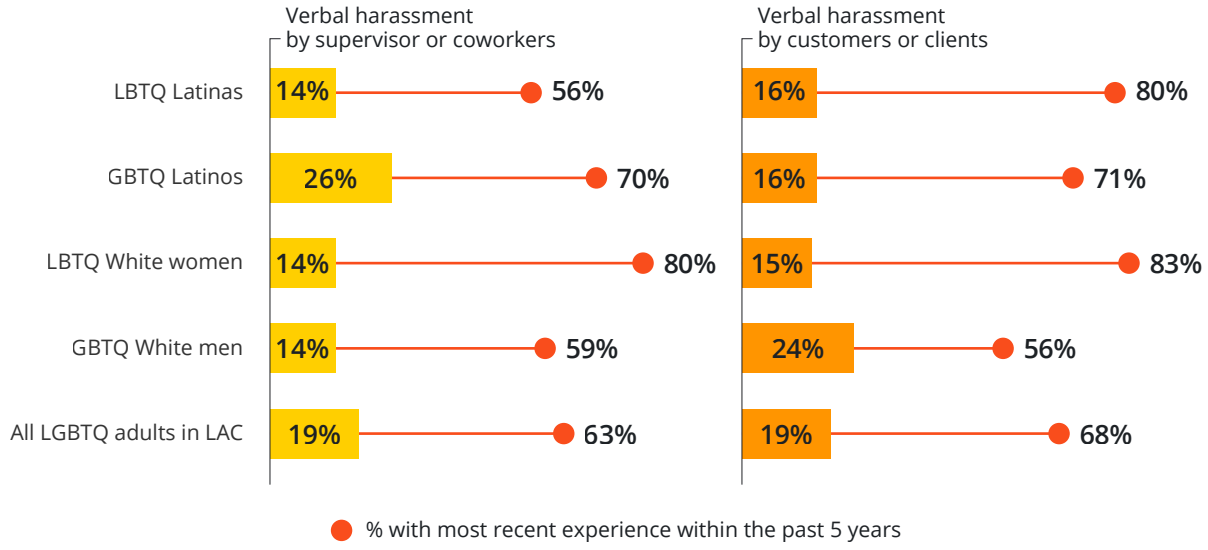
Note: *Statistically significant difference as compared to LBTQ Latinas.

Experiences of employment discrimination in Los Angeles County were less common than those documented in national surveys. A 2023 Williams Institute national survey found that about three in 10 LGBTQ Latinx employees reported having been fired (31%), not promoted (30%), or not hired (33%) because of their sexual orientation or gender identity at some point in their lives.[169] LGBTQ Latinx employees were approximately twice as likely as LGBTQ White employees to report lifetime experiences of being fired, not promoted, or not hired.[170]

Verbal Harassment

One in seven LBTQ Latinas (14%) reported that they had been verbally harassed by their supervisor or coworkers during their careers based on their sexual orientation, gender identity, or gender expression while working in Los Angeles County, with over half (56%) reporting their most recent experience within the past five years. A similar percentage (16%) reported having been verbally harassed by customers or clients during their careers in Los Angeles County, with 80% reporting their most recent experience within the past five years.

Figure 28. LGBTQ adults who experienced verbal harassment at work in LA County because of their sexual orientation or gender identity at some point in their careers, and those with the most recent experiences within the past five years, LELAC, 2023



Note: No statistically significant differences as compared to LBTQ Latinas

Similar to experiences of employment discrimination, experiences of verbal harassment based on sexual orientation and gender identity in Los Angeles County were less common than those reported in national studies. Prior Williams Institute research found that over one-third of LGBTQ Latinx

[169] Sears et al., *supra* note 158. This survey was only of LGBTQ adults currently in the workforce, which may explain some of the difference. *See also* Lindsay Mahowald, *Hispanic LGBTQ Individuals Encounter Heightened Discrimination*, Ctr. Am. Progress (July 29, 2021), https://www.americanprogress.org/article/hispanic-lgbtq-individuals-encounter-heightened-discrimination/ (a 2020 nationally representative survey finding that more than half (52%) of Hispanic LGBTQ individuals reported discrimination affecting their ability to be hired in).

[170] Sears et al., *supra* note 158.

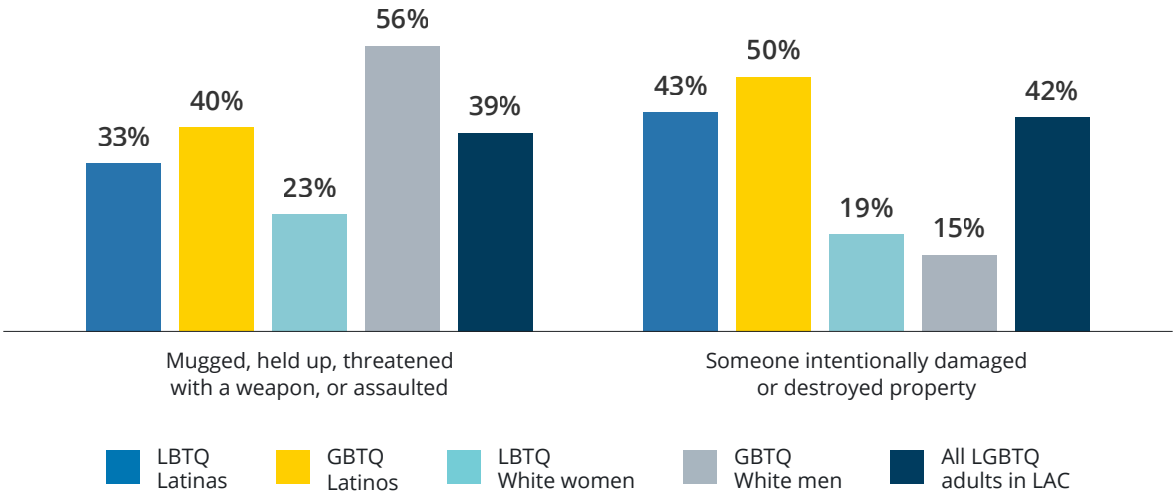
employees (36%) reported experiencing verbal harassment in the workplace because of their sexual orientation or gender identity at some point in their careers.[171] In contrast to our current findings, prior Williams Institute research found that LGBTQ Latinx employees experienced higher rates of being verbally harassed at some point during their careers than LGBTQ White employees.[172] This study also described the types of verbal harassment that Latinx LGBTQ employees experienced because of their LGBTQ identity, which included name-calling, misgendering, and being harassed for not conforming to traditional binary gender or gender stereotypes.[173] Many Latinx LGBTQ employees described intersectional discrimination and harassment based on multiple marginalized identities, including their LGBTQ identity, race/ethnicity, gender, disability, religion, and pregnancy.[174]

PUBLIC SPACES

Victimization

Many LGBTQ people in Los Angeles County not only have concerns about their safety but also have experienced victimization. Thirty-three percent of LBTQ Latinas who have lived their entire lives in Los Angeles County reported that they had been a victim of a personal crime ("mugged, held up, threatened with a weapon, or assaulted") at least once in their lifetime, and 43% reported that they had been a victim of a property crime (i.e., someone had intentionally damaged or destroyed property owned by them or someone else in their house).

Figure 29. LGBTQ adults who have lived their entire life in LA County and who have been the victim of a personal or property crime, by gender and by race/ethnicity, LELAC, 2023



Note: No statistically significant differences as compared to LBTQ Latinas

[171] *Id*. This survey was only of LGBTQ adults currently in the workforce and verbal harassment was not separated by coworkers and clients, which may explain some of the difference.

[172] *Id*. This survey was only of LGBTQ adults currently in the workforce and verbal harassment was not separated by coworkers and clients, which may explain some of the difference.

[173] *Id*. This survey was only of LGBTQ adults currently in the workforce and verbal harassment was not separated by coworkers and clients, which may explain some of the difference.

[174] *Id*. This survey was only of LGBTQ adults currently in the workforce and verbal harassment was not separated by coworkers and clients, which may explain some of the difference.

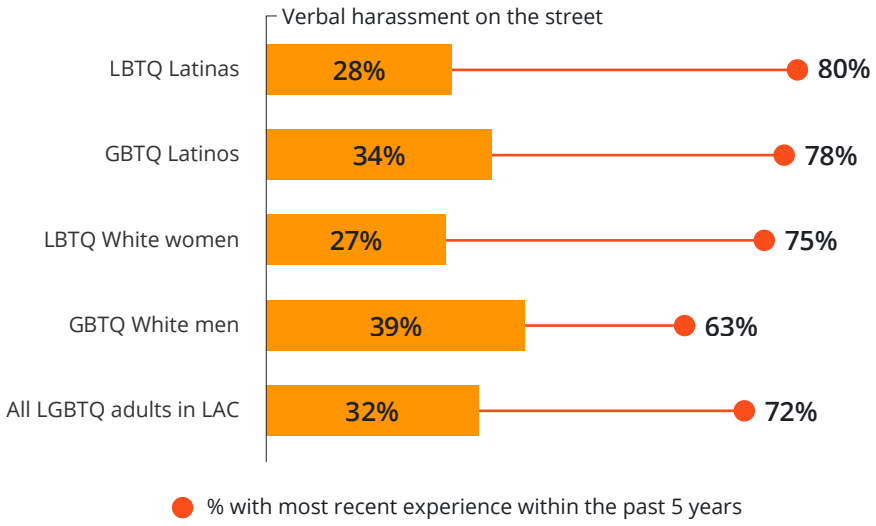
Compared to prior nationally representative research of LBQ women and LGBTQ Latinx adults, rates of lifetime victimization among LBTQ Latinas in Los Angeles County were lower for personal crimes and higher for property crimes. A previous Williams Institute study of LBQ women found that 42% of cisgender LBQ Latinas have been the victim of personal crimes, and 32% have been the victim of property crimes.[175] These rates did not differ significantly among Latinx and White LBQ women.[176]

Though respondents were not asked what reason they believe led to their victimization, these rates of victimization across crime types for Latinx and White LGBTQ adults could be driven by LGBTQ status. Prior research has found that there were significant disparities between sexual and gender minorities (SGMs) and non-SGMs in victimization rates across all types of violent crime among Latinx and White populations.[177] Other research also indicates that LBTQ Latina immigrants are more vulnerable to crimes.[178]

Verbal Harassment on the Street

Over one in four LBTQ Latinas (28%) reported being verbally harassed by strangers on the street in Los Angeles County. Eighty percent of these reported their most recent experience within the past five years.

Figure 30. Experiences of verbal harassment in LA County because of sexual orientation or gender identity, by gender and race/ethnicity, LELAC, 2023



Note: No statistically significant differences as compared to LBTQ Latinas

[175] Wilson et al., *supra* note 48.

[176] *Id*. *But see* Wilson, Bouton & Mallory, *supra* note 89 (finding that being a victim of personal or property crimes did not differ significantly between LGBT Latinx and White adults).

[177] Andrew R. Flores et al., *Violent Victimization at the Intersections of Sexual Orientation, Gender Identity, and Race: National Crime Victimization Survey, 2017–2019*, 18 PLoS ONE e0281641 (2023); *But see* Wilson et al., *supra* note 38 (finding that Latinx LGBT adults were less likely to be a victim of a property crime than non-LGBT adults).

[178] Alexandra Ricks, *Latinx Immigrant Crime Victims Fear Seeking Help*, Urb. Inst. (Sept. 25, 2017), https://www.urban.org/urban-wire/latinx-immigrant-crime-victims-fear-seeking-help.

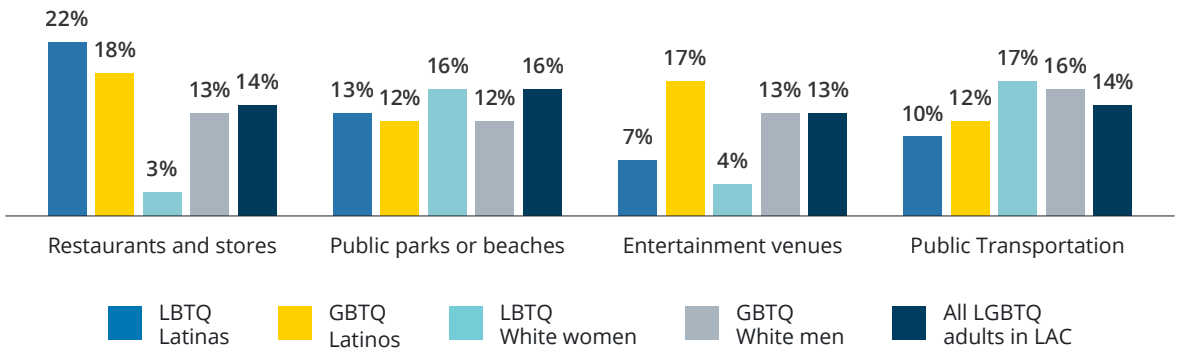
The absence of statistically significant differences between racial groups is consistent with prior research on anti-LGBTQ harassment on the streets.[179] Although neither the location nor the motivation of the verbal harassment or threats was identified, a Williams Institute analysis of a national data set found that 68% of Latinx LBQ women reported that they had been called names or insulted, and 38% reported that they had been threatened or harassed.[180] These rates did not differ significantly among Latinx and White LBQ women,[181] between Latinx LGBTQ and non-LGBTQ adults,[182] or between Latinx LGBTQ adults and White LGBTQ adults.[183]

Avoiding Public Spaces to Protect Safety

Many LBTQ Latinas reported having avoided businesses, places of entertainment (such as theaters), public transportation, and public spaces (such as parks and beaches) in Los Angeles County in the past year to avoid poor treatment or being threatened or physically attacked because of their sexual orientation or gender identity.

Over one in five (22%) LBTQ Latinas said that they had avoided going to restaurants and stores in Los Angeles County in the past year due to concerns about being threatened or physically attacked because of their sexual orientation or gender identity. Approximately one in 10 had avoided going to public parks or beaches (13%) and using public transportation (10%) for the same reason. Seven percent had avoided entertainment venues, such as movie theaters or sports stadiums, due to safety concerns.

Figure 31. LGBTQ adults who avoided public spaces in LA County in the past year to avoid being threatened or physically attacked because of their sexual orientation or gender identity, LELAC, 2023



Note: No statistically significant differences as compared to LBTQ Latinas. Entertainment venues include, but are not limited to, movie theaters, sports stadiums, and amusement parks.

[179] Darren L. Whitfield et al., *The Crossroads of Identities: Predictors of Harassment Among Lesbian, Gay, Bisexual, and Queer Adults*, 10 J. Soc'y Soc. Work & Rsch. 237 (2019).

[180] Wilson et al., *supra* note 48.

[181] *Id*. Rates of lifetime victimization among LBTQ White women were much lower in Los Angeles County than in prior nationally representative research: 48% of LBQ White women have ever been the victim of personal crimes and 39% have ever been the victims of property crimes.

[182] Wilson et al., *supra* note 38.

[183] Wilson, Bouton & Mallory, *supra* note 89.

These findings for Latinx LGBTQ adults are consistent with prior research. A 2020 nationally representative survey of over 1,500 LGBTQ people found that 20% of Latinx LGBTQ individuals reported avoiding necessary services to avoid discrimination.[184]

Other research has examined avoidance behaviors on public transportation and their link to experiences of violence.[185] A study by the Center for American Progress found that 11% of transgender people and 9% of LGBT people with disabilities avoided public transportation due to fear of discrimination.[186] Thirty-two percent of 2015 U.S. Transgender Survey respondents reported having been verbally harassed on public transportation, and 3% reported that they had been physically attacked.[187]

Based on its own research, the Los Angeles Metro Authority has concluded that "women and girls, particularly those of color and those in the LGBTQ+ communities, are often the targets of street harassment on public transit … women who identify as lesbian or bisexual are more likely to report experiencing sexual harassment than straight women."[188] Such harassment includes "unwanted sexual and racialized comments and slurs, whistling, leering, and other intimidating actions."[189] According to a 2019 report by the Los Angeles Metropolitan Transportation Authority, it is important to understand that while safety is the primary barrier to riding transit for women,[190] "women of color and those with low incomes were also more dependent on public transit."[191] A 2025 report by the LA Metro Authority concluded that transgender people were more likely to take safety precautions by "avoiding night/non-commute hours, avoiding certain routes/stations, carrying pepper spray/mace, and not riding alone."[192]

For many LBTQ Latinas in Los Angeles, who are younger and more likely to have low incomes, public transportation is a critical link to work, healthcare, family, and community. Policies should be adopted to protect LBTQ's mobility when traveling to, and after arriving at, their jobs, services, and other public spaces in Los Angeles.

INTERACTIONS WITH LAW ENFORCEMENT

Some LBTQ Latinas reported having had negative interactions with police and law enforcement in Los Angeles County. These experiences included verbal harassment (12%), physical harassment or assault

[184] Mahowald, *supra* note 169.

[185] Kirsty Forsdike et al., *"God, Whatever You Do, Don't Tell People It's Unsafe": Public Transport Service Providers' Perspectives on Women's Safety from Sexual Violence on Public Transport*, 150 Transport Pol'y 14 (2024) (discussing feelings of safety and avoidance behaviors on public transportation).

[186] Letter from Nicole Englund, Chief of Staff of L.A. Metro, to L.A. Metro Bd. of Dirs. (Dec. 27, 2024), https://boardarchives.metro.net/BoardBox/2024/241227_%20SB434_Street_Harassment_Reporting.pdf.

[187] Sandy E. James et al., Nat'l Ctr. Transgender Equal., The Report of the 2015 U.S. Transgender Survey (2016), https://transequality.org/sites/default/files/docs/usts/USTS-Full-Report-Dec17.pdf.

[188] Letter from Nicole Englund to L.A. Metro Bd. of Dirs., *supra* note 186.

[189] *Id*.

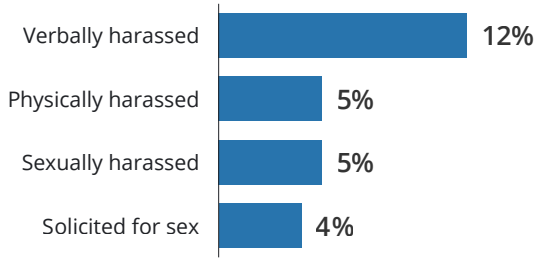
[190] *Id*.

[191] *Id*.

[192] L.A. Cnty. Metro. Transp. Auth., Street Harassment Survey and Focus Groups (2025), https://cdn.beta.metro.net/wp-content/uploads/2025/04/04091252/Street-Harassment-Survey-Focus-Group-Report-March-2025.pdf.

(5%), sexual harassment or assault (5%), and being solicited for sex (4%). LBTQ Latinas did not differ significantly from other LGBTQ groups in reporting these experiences.

Figure 32. Experiences of harassment of LBTQ Latinas by LA County law enforcement, LELAC, 2023



Prior research based on larger national samples supports that LBTQ girls and women of color (especially those who are transgender) are more likely to experience negative interactions with law enforcement, over-policing, and over-incarceration than LBTQ White girls and women. For example, prior Williams Institute research based on national data found that LBQ Latinas were also more likely to report having had serious trouble with the police or law compared to White LBQ women (8% vs. 3%).[193]

A community survey of transgender Latinas in Los Angeles conducted in 2010 and 2011 found that two-thirds reported verbal harassment, 21% reported physical assault, and 24% reported sexual assault by law enforcement.[194] A more recent community survey found that among transgender and nonbinary adults in Los Angeles County, Latino/a/x respondents had the highest arrest rates (14%) during the past five years.[195] Additionally, studies conducted in California and San Francisco have found that transgender Latina immigrants experienced high rates of sexual assault, physical violence, and negative interactions with law enforcement. Fearing deportation or further victimization, many undocumented individuals reported avoiding the police entirely.[196]

Research indicates that fear of law enforcement and previous experiences of harassment serve as significant barriers to seeking protection from law enforcement, including reporting hate crimes. Other barriers to LBTQ Latinas reporting crime include not knowing about victim support services; lack of culturally relevant services; lack of Spanish-speaking police officers and victim service providers; lack of belief in LBTQ Latina victims' stories due to racial, gender, and LGBTQ bias; historical tensions between communities of color and law enforcement, which has created a lack of trust; and fears of detention or deportation for those who are immigrants.[197]

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[193] Wilson et al., *supra* note 38; Wilson et al., *supra* note 48.

[194] Jordan Blair Woods et al., Williams Inst., Latina Transgender Women's Interactions with Law Enforcement in Los Angeles County (2013), https://williamsinstitute.law.ucla.edu/publications/latina-tran-women-law-enforce-lac/.

[195] Jody L. Herman et al., Williams Inst., Para Mi Punto de Vista / From My Point of View: Results of the 2023 LA County Trans & Nonbinary Survey (2024), https://williamsinstitute.law.ucla.edu/wp-content/uploads/LACo-Trans-NB-Jun-2024.pdf.

[196] Elana Redfield, Rubeen Guardado & Kerith J. Conron, Williams Inst., Transgender Immigrants in California (2024), https://williamsinstitute.law.ucla.edu/publications/trans-immigrants-ca/; Akua O. Gyamerah et al., *Experiences and Factors Associated with Transphobic Hate Crimes among Transgender Women in the San Francisco Bay Area: Comparisons Across Race*, 21 BMC Pub. Health 1053 (2021).

[197] Ricks, *supra* note 178.

OVER POLICING RESULTS IN OVER INCARCERATION

While our study did not gather data about incarceration, harassment and over policing can result in over incarceration. Prior Williams Institute research has also found that LBQ women, particularly LBQ women of color, are over-represented among those incarcerated in prisons, jails, and youth facilities. LBQ girls were more likely to experience victimization by staff and other youth while detained compared to heterosexual girls and, on average, were detained for longer periods than heterosexual girls. Broader criminal legal system reforms aimed at ending over-policing and incarceration for people of color and LGBTQ people would benefit Latina LBTQ women and girls, as would policies that would strengthen and expand protections from LGBTQ harassment and discrimination in carceral settings. See Bianca D. M. Wilson et.al. Health and Socioeconomic Well-Being of LBQ Women in the US (Los Angeles: The Williams Institute, UCLA School of Law, March 2021).

Fears of detention or deportation are heightened for Latina immigrants with abusive spouses who may threaten to report or withdraw sponsorship as a form of control and in an environment of increasing ICE raids and police cooperation with ICE.[198] In addition to concerns about themselves, LBTQ Latinas may fear being forced to or inadvertently identify family or friends who lack documentation if they encounter law enforcement.[199] Finally, current narratives by the Trump administration that conflate all Latinx people with undocumented immigrants and perpetrators of crimes may further discourage LBTQ Latinas from seeking police protection or victim support services.[200]

Negative interactions with law enforcement may also prevent LBTQ Latinas from seeking non-law enforcement related services. For example, transgender Latinas in Los Angeles have reported difficulty accessing mainstream resources due to police victimization and systemic distrust of institutions.[201] Community-based studies suggest that cultural and LGBTQ inclusive services are crucial for reducing fear and improving access, including that providers clearly separate their programs from law enforcement agencies and ICE. [202]

RECOMMENDATIONS

- Invest in leadership development programs for LBTQ Latinas to increase their representation in decision-making spaces across public, private, and non-profit environments.
- Improve community safety for LGBTQ neighborhoods and community businesses and events, including dedicating adequate law enforcement resources to protect people who visit LGBTQ spaces.
- Increase the number and capacity of safe LGBTQ spaces in areas outside of West Hollywood and Hollywood, including South Los Angeles, East Los Angeles, and the San Fernando Valley.

[198] *Id*.

[199] *Id*.

[200] *Id*.; Fuentes Carreño et al., *supra* note 13.

[201] Fuentes Carreño et al., *supra* note 13.

[202] Williams Inst., Requests for Proposals: LGBTQ & Racial Justice Small Grants Program (2021), https://williamsinstitute.law.ucla.edu/wp-content/uploads/2021-Small-Grants-RFP.pdf.

- Provide community-specific resources and trainings to combat racism, biphobia, transphobia, nativism, and xenophobia within LGBTQ communities.
- Provide community-specific resources and trainings to combat homophobia, biphobia, and transphobia within Latinx communities.
- Support LBTQ Latinas' access to religious and spiritual communities, and policies for ensuring LBTQ Latinas of faith feel welcomed within LGBTQ spaces.
- Ensure that essential services are accessible through non-faith-based providers and enforce grant and contractor provisions that require that all providers, including faith-based service providers, be LGBTQ inclusive.
- Enforce workplace non-discrimination laws to include intersectional discrimination and ensure workplaces are welcoming for LBTQ Latinas and bisexual women more generally.
- Support employment and job opportunities for LBTQ Latinas in Los Angeles County that include a living wage and benefits.
- Focus on eliminating LGBTQ discrimination and harassment within Los Angeles's public spaces, including on the streets, in entertainment venues, public transportation, parks, and beaches.
- Improve systems for reporting and responding to hate incidents and hate crimes, including partnering with community-based organizations.
- Improve relationships and trust between Los Angeles law enforcement and LBTQ Latinas, including increasing representation of LBTQ Latinas in law enforcement.

ECONOMIC DISPARITIES

When asked about their biggest sources of worry, 63% of LBTQ Latinas identified financial concerns as their top concern, including those related to the high cost of living and housing in Los Angeles, as well as concerns about steady employment. Many responded with just one or two words, such as "money," "income," "bills," and "financial struggles." Other examples included:

> *The cost of living in Los Angeles, no job security, inflation.*
>
> — Cisgender lesbian Latina in her 40s

> *Having enough money for things I need/want. Worrying about being evicted.*
>
> — Transgender Latina sexual minority in her 20s

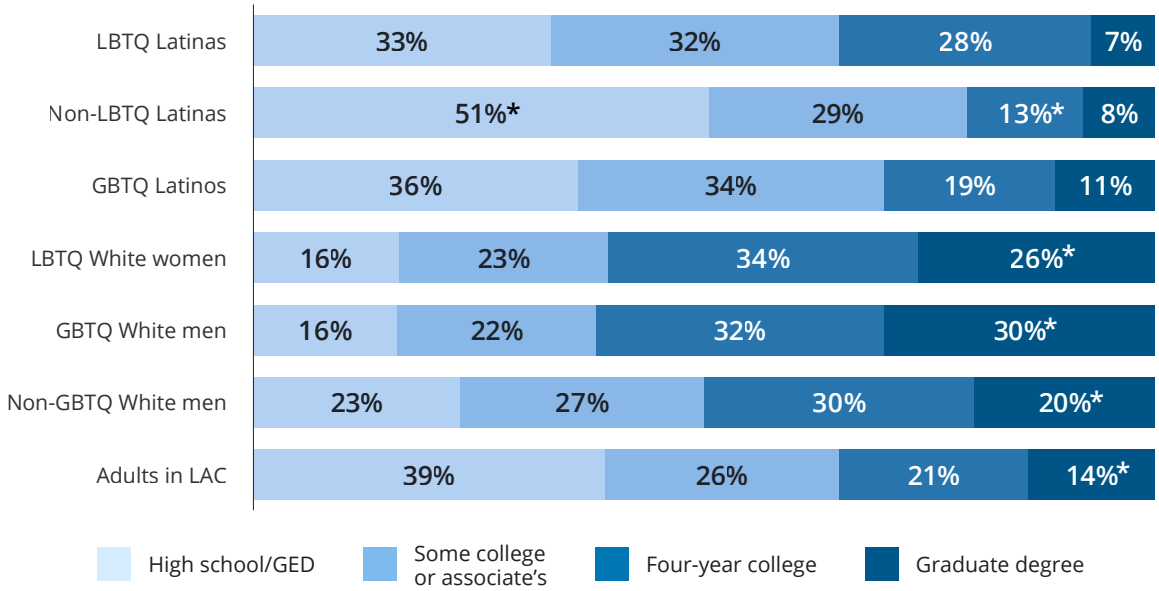
> *No poder tener para mi renta*
>
> — Transgender sexual minority Latina in her 30s

EDUCATION

In terms of education, LBTQ Latinas over the age of 25 were more likely to have a college degree or more than non-LBTQ Latinas (35% vs. 21%). They were less likely to have a college degree or more than LBTQ White women (61%), GBTQ White men (62%), and non-GBTQ White men (50%) over the age of 25.

Considering post-college education separately brings these disparities into greater focus. LBTQ Latinas over the age of 25 were twice as likely to have a four-year college degree as non-LBTQ Latinas (28% vs. 13%), but had similar rates of having graduate degrees (7% vs. 8%). While their differences in having a college degree were not statistically significant, LBTQ Latinas were less likely to have a graduate degree than LBTQ White women (26%), GBTQ White men (30%), and non-GBTQ White men (20%).

Figure 33. Educational attainment of adults over age 25 in LA County, LACHS, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas

These findings are consistent with a prior Williams Institute analysis showing that Latinx LBT women ages 25 and older were more likely to have received a college education compared to non-LBT Latinx women (21% vs 17%).[203] Also consistent with these findings, previous Williams Institute research found that Latinx LBT women were less likely to have a college degree than White LBT women (17% vs. 33%).[204]

Previous Williams Institute research has identified some of the barriers to higher education for LGBTQ people of color (POC), such as discrimination, unfair treatment, safety concerns, and feelings of not belonging; lack of LGBTQ visibility; and low availability of LGBTQ support and resources on campus.[205] For example, POC LGBTQ adults were twice as likely as White LGBTQ adults to experience unfair treatment at school due to their LGBTQ identity [206] and to report that this discrimination was a barrier to obtaining the education, training, or degrees they desired (15% vs. 7%). Immigration and citizenship status are other factors that negatively impact access to higher education.[207]

A dissertation presenting a qualitative study of Latina lesbian students attending Hispanic-serving Institutions (HSIs) found that barriers to coming out at HSIs included "Latino homophobia," verbal harassment, and discrimination.[208] Some participants explained that negative messages from peers

[203] Wilson et al., *supra* note 38.

[204] Wilson et al., *supra* note 48.

[205] Kerith J. Conron et al., Williams Inst., Educational Experiences of LGBTQ People of Color (2023) https://williamsinstitute.law.ucla.edu/wp-content/uploads/BIPOC-Higher-Ed-Feb-2023.pdf.

[206] *Id*.

[207] Guardado, Carreño & Conron, *supra* note 44 (finding that 13% of Latinx LGBT non-citizens without a Green Card had a bachelor's degree or more compared to 31% of Latinx LGBT US-born citizens).

[208] Vega, *supra* note 49.

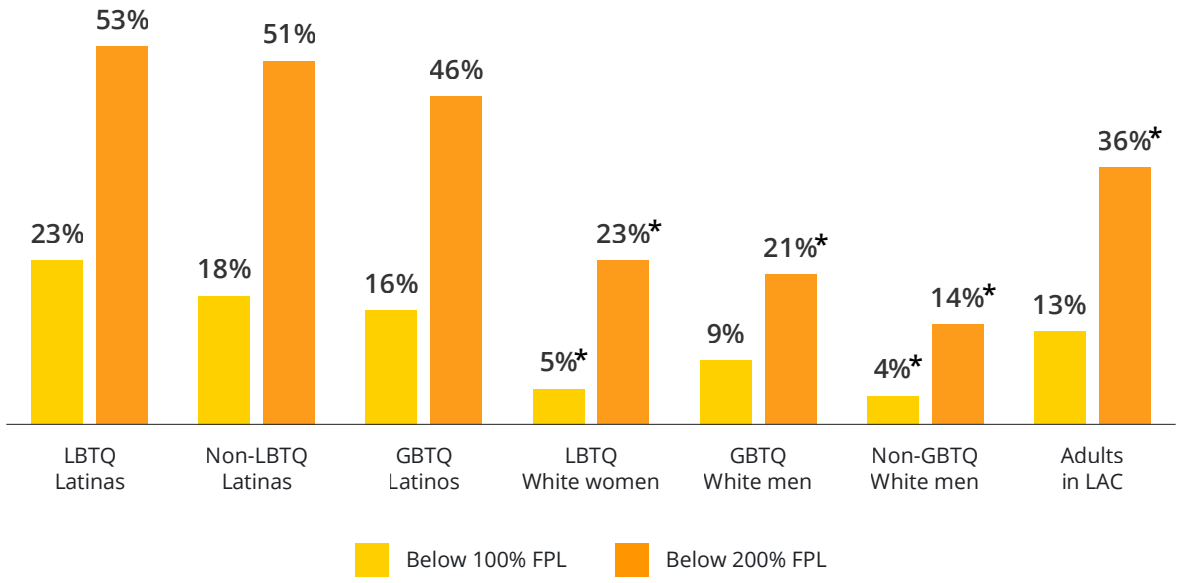
reinforced "that being both Latina and lesbian" were "contradictory identities in Latinx culture."[209] Participants also expressed barriers to their choice of major based on their gender, race/ethnicity, and LGBT identity, and were concerned that coming out would impact their career opportunities.[210] They noted several things that made their campus feel more accepting, including having supportive mentors, faculty, and campus leadership; inclusion of LGBTQA topics in course materials; and the presence of LGBTQA student groups.[211]

HOUSEHOLD INCOME

Approximately one in four LBTQ Latinas (23%) in Los Angeles County were in households living below 100% of the Federal Poverty Level (FPL), and over half (53%) were living on less than 200% FPL.[212]

LBTQ Latinas were over twice as likely to be living in households with incomes below 200% FPL as LBTQ White women (23%) and GBTQ White men (21%). They were three times as likely to live in such households as non-GBTQ White men (14%).

Figure 34. Living in households below 200% FPL among adults in LA County, LACHS, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas

[209] *Id*.

[210] *Id*.

[211] *Id*.

[212] For a one-person household, living on less than 200% of the federal poverty level meant living on less than $27,180 per year, for a two-person household, it meant living on less than $36,620 per year, and for a three-person household, it meant living on less than $46,060 per year. An estimated livable wage salary for typical expenses in Los Angeles for a one-person household is $55,385, for a two-adult household it's $74,182, and for two adults and one child it's $110,952. City of Los Angeles (2024, Feb 1). July 1, 2024, Minimum Wage Ordinance Wage Rate Increase. Office of Wage Standards, City of Los Angeles. https:// https://wagesla.lacity.gov/ ; Amy K. Glasmeier, *Living Wage Calculator for Los Angeles County, California*, Living Wage Calculator (Feb. 10, 2025), https://livingwage.mit.edu/counties/06037.

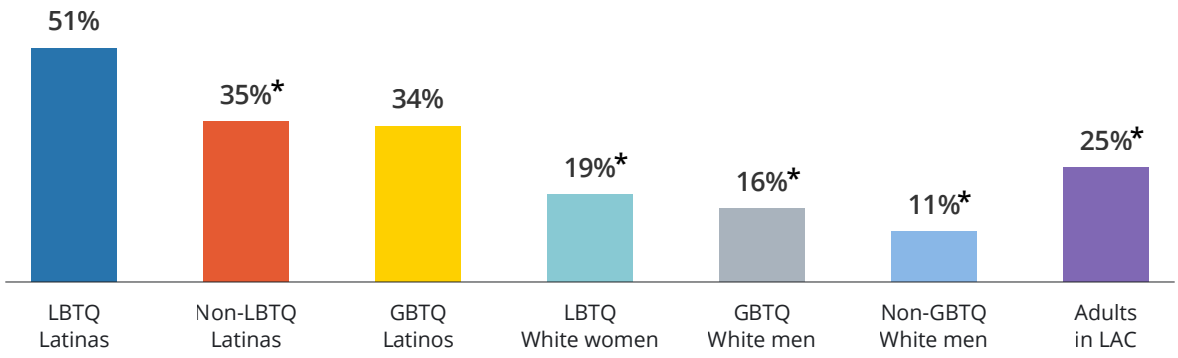
Prior Williams Institute research based on national data also found that LBQ Latinas were more likely to live at or below 200% FPL than LBQ White women (65% vs. 40%).[213] Similarly, an earlier Williams Institute analysis found that Latinx cisgender lesbians (35%) have higher rates of poverty than White cisgender lesbians (11%), Latinx cisgender gay men (24%), and White cisgender gay men (8%).[214] A similar pattern was found when comparing Latinx cisgender bisexual women and White cisgender bisexual women (45% vs 23%).[215]

Prior research has suggested that several factors contribute to LBTQ Latinas living in households with lower incomes, including discrimination,[216] anti-LGBT bias, mental health issues, substance abuse issues,[217] immigration status,[218] low wages, and lower rates of educational attainment and employment.[219]

FOOD INSECURITY

About half (51%) of LBTQ Latinas in Los Angeles County lived in households that met the criteria for food insecurity in the past 12 months.[220] This was twice the rate of food insecurity for all adults in Los Angeles County (25%). More specifically, LBTQ Latinas in Los Angeles County had a higher rate of food insecurity than non-LBTQ Latinas (35%), LBTQ White women (19%), GBTQ White men (16%), and non-GBTQ White men (11%).

Figure 35. Household food insecurity in the prior 12 months in LA County, LACHS, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas

[213] Wilson et al., *supra* note 48.

[214] Badgett, Choi & Wilson, *supra* note 19.

[215] *Id*.

[216] Mahowald, *supra* note 169; *see also* Sears et al., *supra* note 158 (finding that 58% of Latinx LGBTQ employees reported experiencing some form of workplace discrimination or harassment because of their sexual orientation or gender identity, and 41% reported have left a job as a result).

[217] Wilson et al., *supra* note 113.

[218] Guardado, Fuentes Carreño & Conron, *supra* note 44 (finding that Latinx LGBT immigrants without Green Cards had higher rates of living below 200% FPL than those who born in the U.S. (64% vs. 43%)).

[219] Wilson, Bouton & Mallory, *supra* note 8.

[220] The Household Food Security Scale was scored by the Los Angeles County Department of Public Health according to guidance published in Stephen J. Blumberg et al., *The Effectiveness of a Short Form of the Household Food Security Scale*, 89 Am. J. Pub. Health 1231 (1999).

These findings are consistent with research on food insecurity in Los Angeles County[221] and the United States[222] showing higher rates of food insecurity among LGBTQ Latinx people,[223] LGBT women of color,[224] younger LGBTQ adults,[225] and bisexual people (as compared to lesbians and gay men).[226] Williams Institute research based on national data found Latinx LBT women were more likely to experience food insecurity in the prior year than Latinx non-LBT women, Latinx GBT men, and Latinx non-GBT men.[227]

In terms of younger Latinx LGBTQ people, research conducted by the Trevor Project found that more Latinx LGBTQ youth and younger adults experienced food insecurity in the prior month compared to LGBTQ youth and younger adults overall, with higher rates among those who were Latinx and multiracial, transgender and nonbinary, or ages 18 to 24.[228] A study of LGBT high school youth also found that Latinx LGBT youth were more likely to experience hunger due to insufficient food at home in the prior month than their non-LGBT counterparts.[229]

Prior research suggests that barriers to becoming food secure for LBQ Latinas include immigration status,[230] poverty, homelessness, and unemployment.[231] Access to food stamps,[232] charity food services,[233] and food banks [234] can contribute to decreasing food insecurity. Despite the importance of these programs, prior research suggests that many LBTQ Latinas face barriers to accessing them, such as lack of transportation,[235] lack of storage areas for food, concerns about food quality, concerns about rejection (in particular from faith-based service providers), shame, language barriers, and lack of documents for food stamp benefits.[236]

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[221] Sears et al., *supra* note 12 ("More LGBTQ adults of color (42%) had experienced food insecurity in the past year compared to White LGBTQ adults (19%").

[222] Kerith J. Conron et al., Williams Inst., Food Insufficiency Among LGBT Adults During the COVID-19 Pandemic (2022), https://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBT-Food-Insufficiency-Apr-2022.pdf; Sears et al., *supra* note 12.

[223] Wilson et al., *supra* note 38.

[224] Wilson, Bouton & Mallory, *supra* note 8.

[225] Price et al., *supra* note 49.

[226] Sears et al., *supra* note 12 (Larger proportions of cisgender bisexual men (37%) and women (37%) had experienced food insecurity in the past year compared to cisgender gay men (22%) and lesbians (30%)").

[227] Wilson et al., *supra* note 38.

[228] Price et al., *supra* note 49.

[229] Moriah L. Macklin, Elana Redfield & Kerith J. Conron, Williams Inst., Food Insecurity Among LGBTQ Youth (2023), https://williamsinstitute.law.ucla.edu/wp-content/uploads/Youth-Food-Insecurity-Jun-2023.pdf.

[230] Guardado, Fuentes Carreño, & Conron, *supra* note 44.

[231] Herman et al., *supra* note 195.

[232] Sears, Flores & Harbeck, *supra* note 20.

[233] Bianca D.M. Wilson, M. V. Lee Badgett, & Alexandra-Grissell H. Gomez, Williams Inst., "We're Still Hungry": Experiences with Food Insecurity and Food Programs Among LGBTQ People (2020), https://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBTQ-Food-Bank-Jun-2020.pdf.

[234] *Id*.

[235] *Id*.

[236] Sears et al., *supra* note 20.

HOUSING

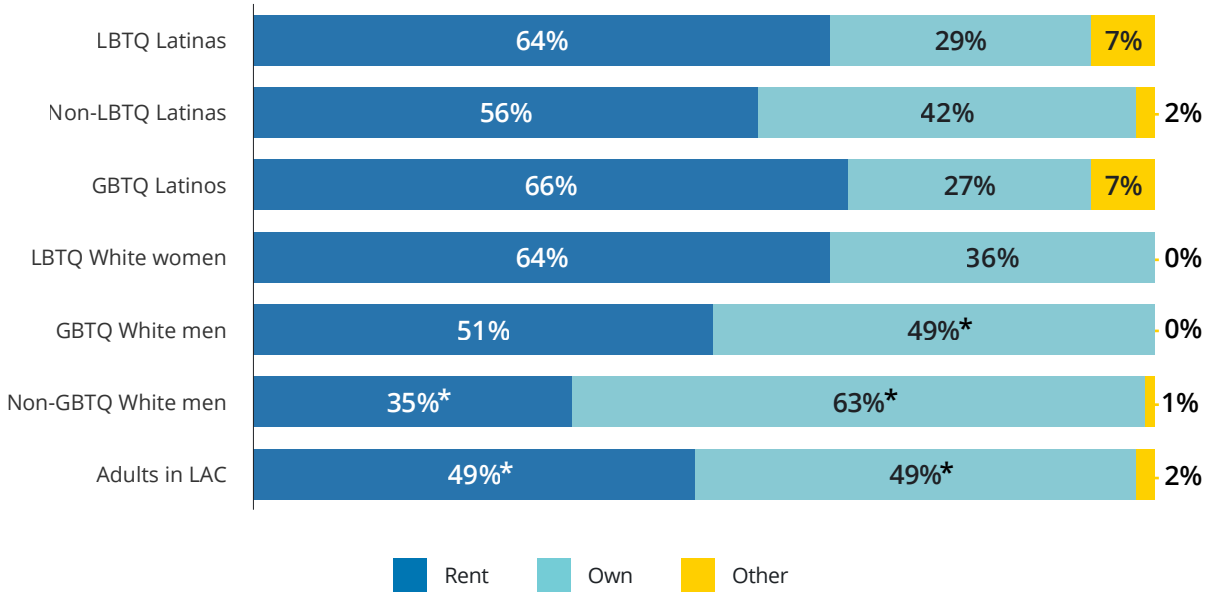
Renting and Home Ownership

Almost two-thirds (64%) of LBTQ Latinas in Los Angeles County rented their home, and only 29% were homeowners. LBTQ Latinas had a much lower rate of home ownership than adults overall (49%), GBTQ White men (49%), and non-GBTQ White men (63%) in Los Angeles County.

These findings are consistent with prior Williams Institute research based on national data , which found that LBQ Latinas were less likely to own their home than White LBQ women and that, more generally, LBQ women were less likely to own their home than non-LGBTQ women and men.[237]

In part, the high rate of renting by LBTQ Latinas can be attributed to their age, sexual orientation, and gender identity. Younger adults are more likely to rent than older adults, and national research[238] and prior analysis focused on Los Angeles County[239] has shown that more LGBTQ adults than non-LGBTQ adults rented housing versus owned their own homes. In addition, LBTQ Latinas are predominantly bisexual women, and in Los Angeles County, larger proportions of cisgender bisexual women rented compared to lesbians.[240]

Figure 36. Rent housing and home ownership among adults in LA County, LACHS, 2023[241]



Note: *Statistically significant difference as compared to LBTQ Latinas

[237] Wilson et al., *supra* note 48.

[238] Bianca D.M. Wilson, Kathryn O'Neill Luis A. Vasquez, Williams Inst., LGBT Renters and Eviction Risk (2021), https://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBT-Eviction-Risk-Aug-2021.pdf; Wilson et al, *supra* note 21.

[239] Sears et al., *supra* note 12 (61% of LGBTQ adults are renters compared with 46% of non-LGBTQ adults in Los Angeles County).

[240] Sears et al., *supra* note 12.

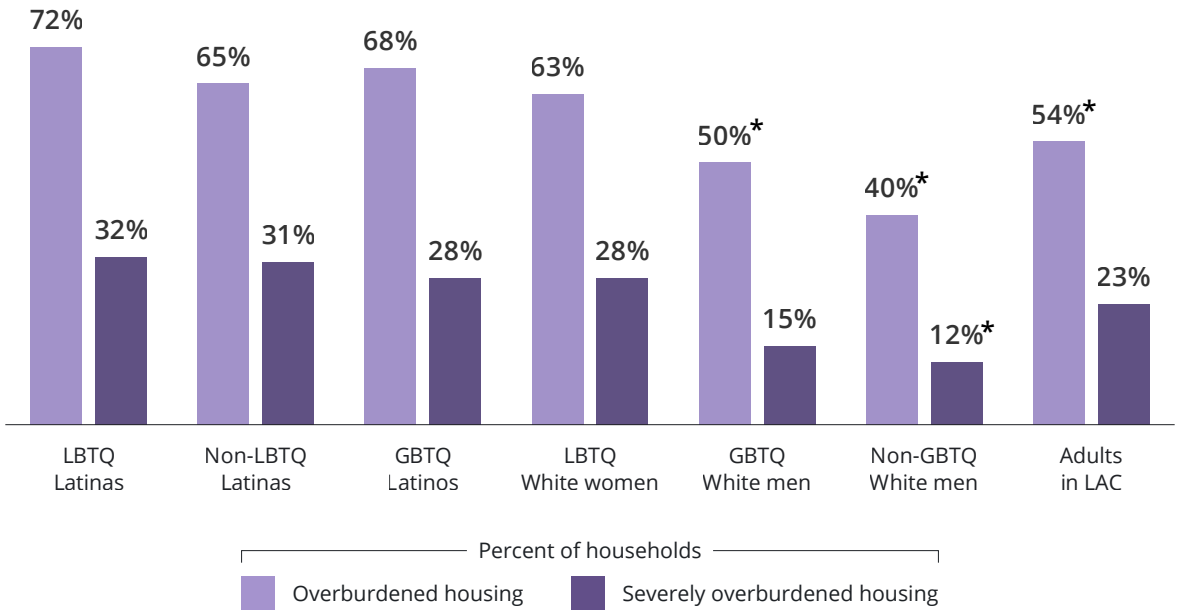
[241] "Other" in the chart reflects the percentages of respondents reporting "other housing arrangement" or "being homeless." Rates of being unhoused among LBTQ Latinas and the other groups are discussed further below.

Housing Insecurity

Following the thresholds used by the U.S. Department of Housing and Urban Development, for this study, we defined "cost-burdened" households as those that spend over 30% of household income on rent or mortgage payments, and "severely cost-burdened" as those who spend over 50% of their household income on housing costs.[242]

Almost three-fourths (72%) of LBTQ Latinas lived in households that were housing cost-burdened, and almost a third (32%) lived in households that were severely housing cost-burdened. LBTQ Latinas were more likely to live in households that were housing cost-burdened than adults overall in Los Angeles (54%), GBTQ White men (50%), and non-GBTQ White men (40%). LBTQ Latinas were also more than twice as likely to live in households that were severely housing cost-burdened as non-GBTQ White men (32% vs. 12%).

Figure 37. Housing cost-burden among adults in LA County, LACHS, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas

These high rates of cost-burdened and severely cost-burdened LBTQ Latina households are consistent with other research focused more generally on Latinx adults in Los Angeles.[243] Prior

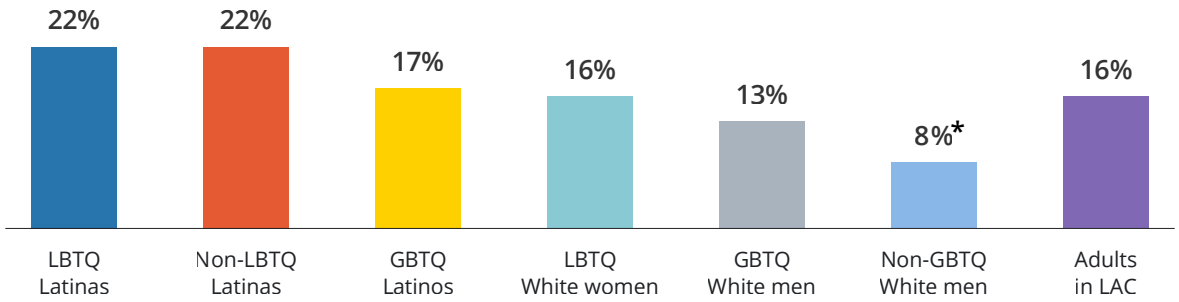
[242] Our measure did not include the cost of utilities and in that way differs slightly from how housing costs are defined by the US Department of Housing and Urban Development. *See CHAS Background*, U.S. Dep't Hous. & Urb. Dev.: Off. Pol'y Dev. & Rsch., https://www.huduser.gov/portal/datasets/cp/CHAS/bg_chas.html (last visited Sept. 2, 2025). If our measure included utility costs, even more households would be defined as cost-burdened and severely cost-burdened. *See* Sean Angst et al., *How Do Renters Survive Unaffordability? Household-level Impacts of Rent Burden in Los Angeles*, 47 J. Urb. Affs. 1639 (2023).

[243] *See, e.g.*, Danielle M. Manzella, Cal. Hous. P'ship, Los Angeles County 2023: Affordable Housing Needs Report (2023), https://chpc.net/wp-content/uploads/2023/05/Los-Angeles-County_Housing-Report_2023.pdf; Mariah Bonilla & Jie Zong, Latino Data Hub, Facts About Latino Renters in Los Angeles County (2024), https://latinodatahub.org/#/research/facts-about-latino-renters-in-los-angeles-county.

research has also shown that people in households that are cost- or rent-burdened reduce consumption of basic necessities, work more hours, and are more likely to take in additional residents to help meet housing costs.[244] For example, a recent study that focused on residents of South Central Los Angeles found that "two thirds of rent-burdened households cut back on food, half cut back on clothing, half cut back on entertainment or family activities, half deferred bill payments and/or took on more debt, one-third decreased their transportation costs, and one-fifth went without medicine or seeing a doctor."[245]

Twenty-two percent of LBTQ Latinas lived in households that delayed paying or had been unable to pay their mortgage or rent at least once in the prior two years, which is over twice the rate of non-GBTQ White men (8%). This result is consistent with prior findings that LGBTQ adults in Los Angeles County were more likely to have had this experience than non-LGBTQ adults, and that more LGBTQ adults of color have had difficulty paying for housing than White LGBTQ adults.[246]

Figure 38. Percent of households delayed paying or unable to pay mortgage or rent in the past two years in LA County, LACHS, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas

Sixteen percent of LBTQ Latinas in Los Angeles County have been unhoused at some time in the prior five years. In a write-in response, one respondent shared:

> *Cuando estuve en la situación de calle, eso es lo más terrible que le puede pasar a uno. Discriminación, agresión sexual, y violación sexual es lo que me paso a mi … Eso y mucho mas.*
>
> *Being homeless was the worst thing that ever happened to me. I experienced discrimination, sexual harassment, and rape. That, and much more.*
>
> — Transgender Latina lesbian in her 50s

The percentage of LBTQ Latinas who have been unhoused (16%) was over double the rate for all adults in Los Angeles County (7%), four times the rate of non-GBTQ White men (4%), and five times

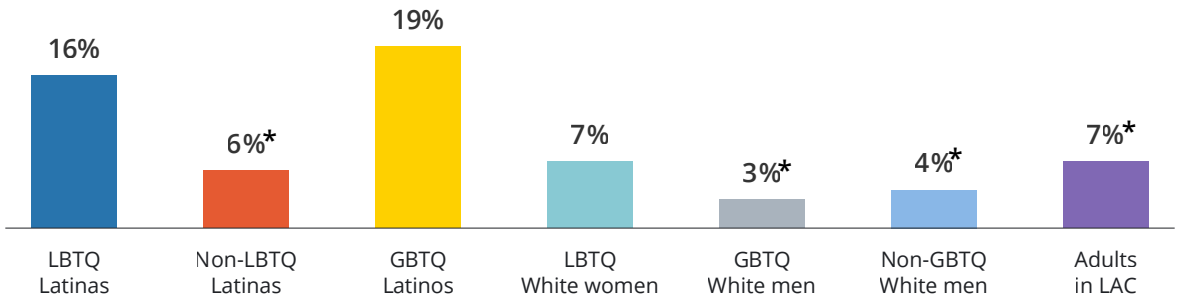
[244] *See, e.g.*, Angst et al., *supra* note 242; Aileen Qin, *Renter Vulnerabilities in Los Angeles*, Neighborhood Data Soc. Change (May 2021), https://la.myneighborhooddata.org/2021/05/renter-vulnerabilities-in-los-angeles/.

[245] Angst et al., *supra* note 242.

[246] Sears et al., *supra* note 12.

the rate of GBTQ White men (3%) in Los Angeles County. It was also higher than the rate of non-LBTQ Latinas being unhoused in the past five years (6%).

Figure 39. Unhoused at some point in the prior five years, LACHS, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas

Prior research suggests even higher rates of housing instability for Latinx transgender and nonbinary people and those who are younger. A Williams Institute survey of transgender and nonbinary residents of Los Angeles County found that current rates of homelessness were higher among women and transfeminine individuals (33%) and Latino/a/x/e individuals (39%) compared to the overall sample (25%).[247] This study also found higher rates of eviction for women and transfeminine individuals and Latino/a/x/e individuals than for the overall sample.[248] Research by the Trevor Project found higher rates of homelessness among Latinx LGBTQ youth in comparison to LGBTQ youth overall. [249] Those who are multiracial Latinx (22%) and transgender and nonbinary young people reported even higher rates of homelessness.[250]

Unfair Treatment and Verbal Harassment

In addition to not being able to afford adequate and safe housing, LBTQ Latinas also face discrimination and harassment from landlords, realtors, other tenants, and neighbors. For example, approximately one in five LBTQ Latinas (21%) reported having had a landlord or realtor in Los Angeles County refuse to sell or rent to them because of their sexual orientation or gender identity, with most (64%) reporting that they had their most recent experience within the past five years. More than one in 10 (12%) LBTQ Latinas reported verbal harassment from their landlord, other tenants, or neighbors, with most (73%) reporting that they had their most recent experiences within the past five years.

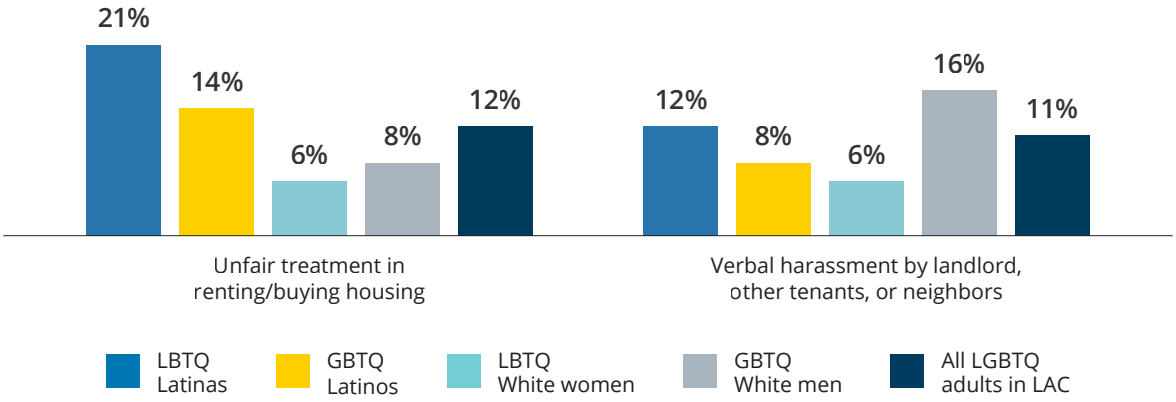
[247] Herman et al., *supra* note 195.

[248] *Id.*

[249] Price et al., *supra* note 49.

[250] *Id.*

Figure 40. LGBTQ adults' experiences of unfair treatment and verbal harassment because of sexual orientation or gender identity from landlord or realtor, other tenants, and neighbors in LA County, LELAC, 2023



Note: No statistically significant differences as compared to LBTQ Latinas

Prior Williams Institute research based on national data found that, since they were 18 years old, 11% of LBQ Latinas were prevented from moving into or buying a house or apartment by a landlord.[251] Additionally, a survey conducted by the Center for American Progress found that discrimination affected 43% of Hispanic LGBTQ people's ability to rent or purchase a home as compared to 32% of White LGBTQ people.[252]

In addition to discrimination by a landlord or realtor, prior research has indicated that barriers to acquiring and maintaining housing stability for LBQ Latinas include affordability,[253] having the necessary documentation, immigration status,[254] and unemployment.[255] LGBTQ Latinx youth may experience homelessness due to family rejection and being evicted by their parents or families.[256] For transgender and nonbinary Latinas, safety concerns, unfair treatment, long wait times, lack of privacy, and limited capacity may also limit access to shelters.[257] Suggestions for fostering a supportive homeless shelter environment include hiring additional staff and security personnel, as well as creating shelters that are welcoming to individuals of all gender identities.[258]

RECOMMENDATIONS

- Support inclusion of LBTQ Latina youth in schools, after-school programs, and youth-service organizations, particularly in underserved neighborhoods.

[251] Wilson et al., *supra* note 48.

[252] Mahowald, *supra* note 169; *see also* Frank H. Galvan et al., *Violence Inflicted on Latina Transgender Women Living with HIV: Rates and Associated Factors by Perpetrator Type*, 25 AIDS & Behav. 116 (2021) (finding that 150 Latina transgender women living with HIV had experienced discrimination in housing because of their gender identity).

[253] Herman et al., *supra* note 195.

[254] Guardado, Fuentes Carreño & Conron, *supra* note 44.

[255] Wilson, Bouton & Mallory, *supra* note 8.

[256] Price et al., *supra* note 49.

[257] Herman et al., *supra* note 195.

[258] *Id*.

- Address barriers to pursuing graduate degrees for LBTQ Latinas through counseling, outreach programs by graduate departments, and financial aid.
- Increase employment opportunities for LBTQ Latinas, including by connecting them to LA County Economic & Workforce Development Department resources. [259]
- Increase community outreach and education to ensure that LBTQ Latinas in Los Angeles County are familiar with and can enroll in available public benefits, including General Relief and CalFresh.[260]
- Support community-based organizations serving LBTQ Latinas in providing workforce development, job placement, and job retention activities;[261] and food pantries and e-gift cards to support food purchase.[262]
- Expand access to legal services and immigration support for undocumented or mixed-status LBTQ Latinas.
- Prevent eviction by conducting outreach to LBTQ Latinas about housing resources, including assistance with vouchers for rental assistance and emergency and legal assistance in case of eviction or foreclosure.[263]
- Continue to increase minimum wage levels and support rent control policies, new housing development, and transitional housing programs with wraparound services that support all Los Angeles County residents, including LBTQ Latinas.
- Provide mandatory training for landlords, housing authorities, and shelter staff on anti-discrimination laws and cultural competency related to LBTQ Latinas, especially those who are transgender or undocumented.
- Provide financial literacy programs, down payment assistance, and homebuyer education tailored to LBTQ Latinas, especially first-time and first-generation buyers.

[259] L.A. Cnty. Econ. & Workforce Dev. Dep't, https://ewddlacity.com/index.php/employment-services (last visited Aug. 29, 2025).

[260] *See Fighting LGBTQI Food Insecurity*, N.Y.C. Hum. Res. Admin.: Dep't Soc. Servs. https://www.nyc.gov/site/hra/help/fighting_food_insecurity_in_the_lgbtq_community.page (last visited Aug. 29, 2025) (NYC Department of Social Service's LGBTQ outreach effort to promote use of food benefits (SNAP)).

[261] Elana Redfield, Moses Viveros & Kerith Conron, Williams Inst., Employment as a Path Towards Greater Food Security for LGBTQ+ Youth: Convening Report (2024), https://williamsinstitute.law.ucla.edu/wp-content/uploads/No-Kid-Hungry-Convening-Jan-2024.pdf.

[262] Kerith Conron et al., Williams Inst., The Role of LGBTQ+ Youth Organizations in Addressing Food Insufficiency (2024), https://williamsinstitute.law.ucla.edu/wp-content/uploads/No-Kid-Hungry-Survey-Feb-2024.pdf.

[263] *See* L.A. Hous. Dep't, https://housing.lacity.org/ (last visited Aug. 29, 2025) (eviction Help for L.A. City Renters and other resources at the Los Angeles Housing Department).

HEALTH DISPARITIES

When LBTQ Latina respondents in Los Angeles County were asked about their biggest concerns, almost one in five (18%) mentioned issues related to their health or their family's health, including "staying healthy," "COVID-19," "generalized anxiety," and "not having enough money and getting sick."

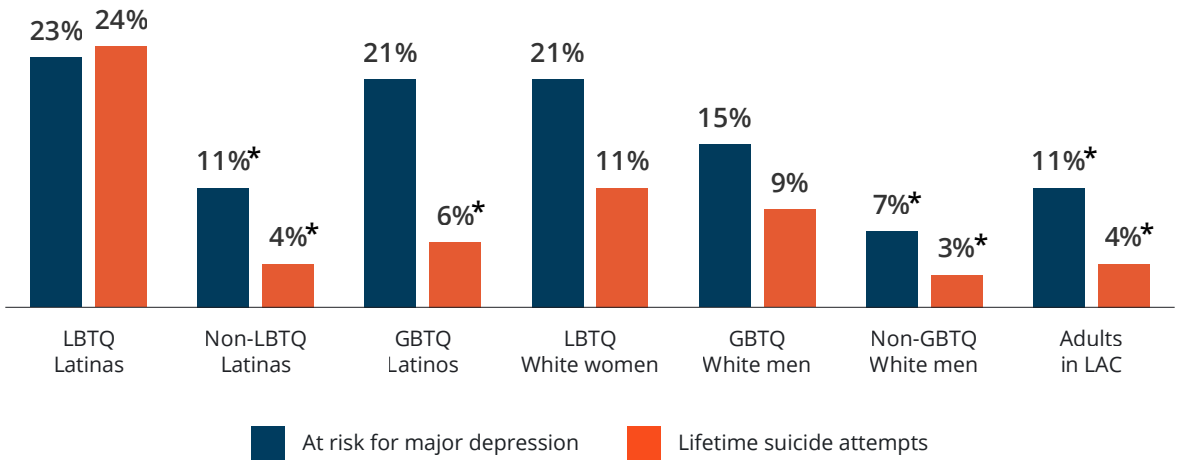
Prior Williams Institute research has found that Latinx LBT women had higher prevalence for a number of chronic health conditions than Latinx non-LBT women, including asthma, heart attack, cancer, high blood pressure, and depression.[264] Other research has shown that transgender Latinas were more likely to be HIV positive than transgender White women.[265] Williams Institute research has also found that, compared to non-LBQ Latinas, LBQ Latinas were less likely to have a personal doctor and more likely to be receiving Medicaid. When compared to White LBQ women, LBQ Latinas were more likely to be uninsured.[266]

We focus our discussion here on health disparities that prior research has indicated particularly impact LBTQ Latinas, including in mental health outcomes, intimate partner violence, substance use, and being overweight or living with obesity. We also consider barriers to accessing health care, including discrimination and harassment.

MENTAL HEALTH

Almost one in four (23%) LBTQ Latinas reported symptoms that indicated they were at major risk of depression. Symptoms of depression were over twice as common among LBTQ Latinas than among all adults in Los Angeles County (11%), non-LBTQ Latinas (11%), and non-GBTQ White men (7%).

Figure 41. Symptoms of depression and lifetime suicide attempt among adults in LA County, LACHS, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas

[264] WILSON ET AL., *supra* note 38.

[265] Paul Wesson et al., *Intercategorical and Intracategorical Experiences of Discrimination and HIV Prevalence Among Transgender Women in San Francisco, CA: A Quantitative Intersectionality Analysis*, 111 AM. J. PUB. HEALTH 446 (2021).

[266] WILSON ET AL., *supra* note 48.

About one in four LBTQ Latinas (24%) have attempted suicide at some point in their lives. LBTQ Latinas were much more likely to report a suicide attempt than all adults overall in Los Angeles County (4%), non-GBTQ White men (3%), non-LBTQ Latinas (4%), and GBTQ Latinos (6%). The higher rate of attempted suicide among LBTQ Latinas is consistent with a higher rate of suicide attempts among LGBTQ adults compared to non-LGBTQ adults in Los Angeles County (13% vs. 3%)[267] and among bisexual women in Los Angeles County (21%) compared to cisgender bisexual men (6%), cisgender lesbians (5%), and cisgender gay men (8%).[268]

These findings are consistent with prior Williams Institute research based on national data, finding that Latinx LBT women (35%) were more likely to report being diagnosed with depression than Latinx non-LBT women (20%), Latinx GBT men (24%), and Latinx non-GBT men (12%).[269]

However, another Williams Institute study found that LBQ Latinas had lower rates of having ever been diagnosed with depression than White LBQ women,[270] although this difference in diagnosis could be due to differences in encountering barriers to accessing healthcare services, as discussed more fully below. Other studies have found that while LBQ Latinas had lower rates of reported lifetime depression compared to White LBQ women, they had higher reported rates of depression compared to Black LBQ women.[271]

An earlier study suggests that future research should consider bisexual and lesbian Latinas separately. The study found that while Hispanic bisexual women had statistically significant higher rates of frequent mental health distress than Hispanic heterosexual women, Hispanic lesbians did not. It also found statistically significant differences between Hispanic and White bisexual women, but not between Hispanic and White lesbians.[272] The study concluded that "among Hispanic bisexual women, cumulative risk related to multiple marginalized statuses appears to lead to greater mental distress."[273] The authors suggested that due to bisexual erasure and discrimination against bisexuals, Hispanic bisexual women may distance themselves from LBQ communities, resulting in less social support to help cope with mental distress.[274]

Research focused on LGBTQ Latinx youth and younger adults has also found high rates of depression and suicidality. For example, a prior Williams Institute analysis found that 44% of LBTQ Latina girls have considered suicide.[275] A 2023 community survey of youth and young adults aged 13-24 in the United States, which included over 6,800 Latinx LGBTQ youth,[276] found that 59% of Latinx LGBTQ youth reported experiencing symptoms of depression, 41% reported having seriously considered

[267] Sears et al., *supra* note 12.

[268] *Id*.

[269] Wilson et al., *supra* note 38.

[270] Wilson et al., *supra* note 48.

[271] *See, e.g.*, Yoo Mi Jeong et al., *Racial/Ethnic Differences in Unmet Needs for Mental Health and Substance Use Treatment in a Community-Based Sample of Sexual Minority Women*, 25 J. Clinical Nursing 3557 (2016).

[272] Kim & Fredriksen-Goldsen, *supra* note 10.

[273] *Id*.

[274] *Id*.

[275] Wilson et al., *supra* note 48.

[276] Price et al., *supra* note 49.

suicide in the past year, and 16% had attempted suicide in the past year.[277] All these rates were higher for Latinx LGBTQ youth than the entire LGBTQ sample, with even higher rates for Latinx transgender and non-binary youth.[278]

Researchers have linked higher rates of depression and suicidality among LBQ Latinas to racism, homophobia, and transphobia; experiences of and concerns about discrimination and being physically attacked; concerns about being "outed;" and negative views of their bodies and their future opportunities.[279] Studies focused on LGBTQ Latinx youth and young adults have also linked higher rates of depression and suicidality to family rejection[280] and cultural norms that may make it more difficult for LGBTQ Latinx youth to come out to their family and friends.[281] For example, among some Latinx families, there are expectations related to cultural values and gendered norms, including familismo, machismo, and marianismo, which emphasize loyalty to family, independence in men, and self-sacrifice and conformity in women, respectively. These values and norms may lead some LBTQ Latinx youth to conceal their sexual orientation and gender identity from their families, which may contribute to minority stress and ultimately lead to depressive symptoms.[282] Further, research suggests that LGBTQ Latinx youth and younger adults who feel alienated both from U.S. mainstream culture and their heritage cultural values also have higher rates of depressive symptoms.[283]

The 2023 community survey by the Trevor Project, which included over 6,800 Latinx LGBTQ youth, found that being exposed to formal conversion therapy, housing instability, and food insecurity led to higher rates of depression and suicidality among Latinx LGBTQ young people.[284] The study also found that higher rates of depression and suicidality were linked to experiencing discrimination based on immigration status. Those who were immigrants or had immigrant parents and were concerned about themselves or their family members facing detainment or deportation had higher rates of depression and suicidality.[285] The study identified protective characteristics from depression and suicidality for Latinx LGBTQ young people, including having higher levels of parental, family, and social support; living in LGBTQ-affirming homes; and attending LGBTQ-supportive schools.[286]

Similarly, in a qualitative study of Latina lesbian students at Hispanic-Serving Institutions, participants identified a number of factors impacting their mental health including their families avoiding speaking about or acknowledging their sexual orientation even after they came out; gender roles in Latinx culture, including marianismo for women and machismo for men, homophobia, and people questioning their "Latina-ness;" negative religious messages from church, family and peers; sexual

[277] *Id*.

[278] *Id*.

[279] Perez & Torres, *supra* note 6; Santos et al., *supra* note 126.

[280] Caitlin Ryan et al., *Family Rejection as a Predictor of Negative Health Outcomes in White and Latino Lesbian, Gay, and Bisexual Young Adults*, 123 Pediatrics 346 (2009).

[281] Alyssa Lozano et al., *Intersecting Identities Among Hispanic Sexual Minority Youth and Their Relationship with Substance Use and Depressive Symptoms*, 77 J. Adolescent Health 292 (2025).

[282] *Id*.

[283] *Id*.

[284] Price et al., *supra* note 49.

[285] *Id*.

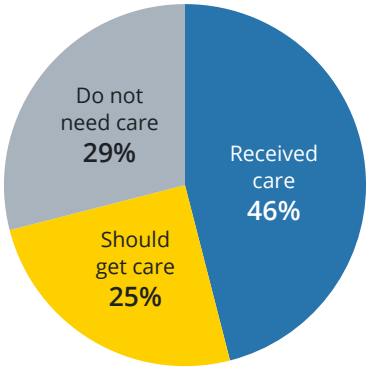
[286] *Id*.

objectification of Latina lesbians; and lack of Latina lesbian visibility in the media and popular culture.[287] Participants also noted the pressures of having an intersecting lesbian Latina identity, which made it "difficult to feel whole" and created "the need to be multiple different people at once" and to "constantly try to redefine themselves for acceptance."[288] Protective factors identified in this study include having supportive family, friends, peers, and mentors.[289]

Mental Health Care

Almost half (46%) of LBTQ Latinas had received mental health care in the past 12 months; however, one in four (25%) indicated that they "should get" care but were not currently receiving care (Figure X). The remainder (29%) did not feel that they needed care. LBTQ Latinas did not differ significantly from the other comparison groups in this report on these measures.

Figure 42. Received mental health care in the past 12 months or should get such care among LBTQ Latinas, LELAC, 2023



Prior research has also found that Latina sexual minority women were significantly less likely to use mental health treatment services than sexual minority White women (38% vs. 59%) and that among all racial and ethnic groups, Latina sexual minority women had the highest unmet needs for mental health treatment.[290] The same study found that substance use treatment was used significantly less by Latina sexual minority women (8%) when compared to African American (19%) and White (16%) sexual minority women.[291] Similar to mental health treatment, Latina sexual minority women had the highest unmet needs for substance abuse treatment among all racial and ethnic groups.[292]

Likewise, the 2023 Trevor Project survey that included over 6,800 Latinx LGBTQ youth and young adults found that Latinx LGBTQ youth were more likely to report not receiving the mental health care they wanted as compared to the whole LGBTQ sample.[293] The study found that factors preventing

[287] Vega, *supra* note 49.

[288] *Id*.

[289] *Id*.

[290] Jeong et al., *supra* note 271.

[291] *Id*.

[292] *Id* (Latina sexual minority women (78%) were more likely to have unmet needs for substance use treatment than White women (59%) and significantly more likely than African American women (43%)).

[293] PRICE ET AL., *supra* note 49.

Latinx LGBTQ youth from receiving mental health care included fear of discussing mental health issues with others, not wanting to get parental permission, fears of not being taken seriously by providers, concerns about affordability, and doubts about treatment effectiveness.[294]

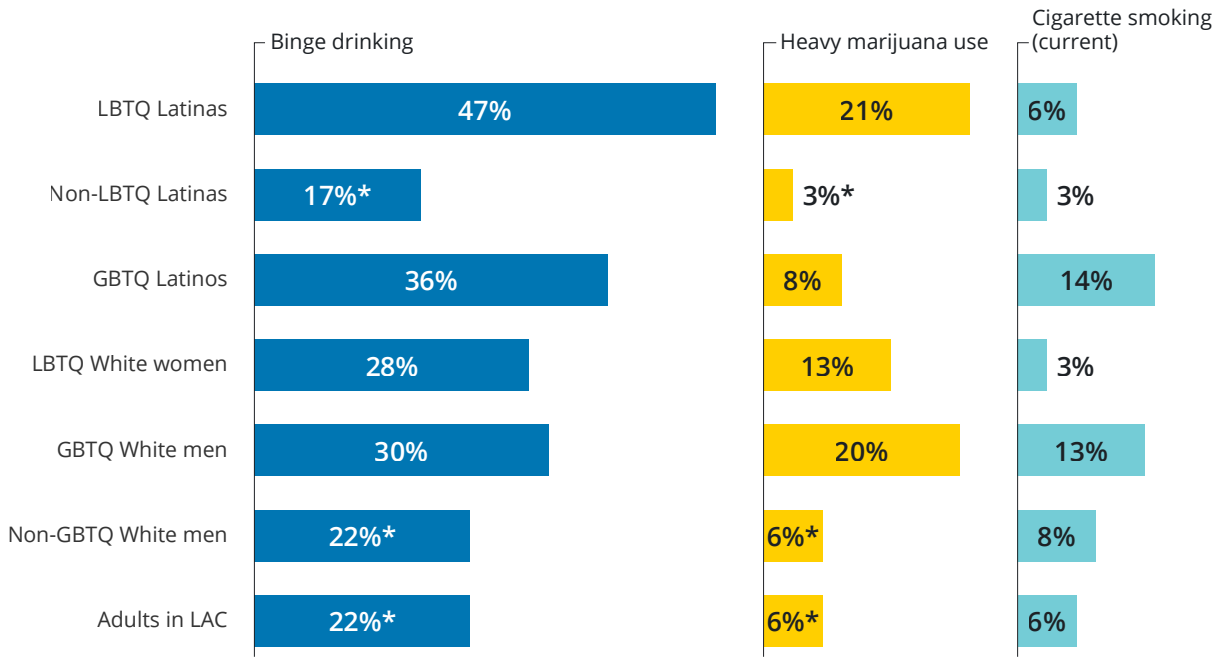
BINGE DRINKING, MARIJUANA USE, AND SMOKING

LBTQ Latinas in Los Angeles County were much more likely to engage in binge drinking and heavy marijuana use than non-LBTQ Latinas. Almost half (47%) of LBTQ Latinas reported binge drinking[295] in the prior month compared to 22% of adults overall in Los Angeles County, 17% of non-LBTQ Latinas, and 22% of non-GBTQ White men.

Heavy marijuana use, meaning daily or near daily use in the prior month,[296] was reported by seven times as many LBTQ Latinas as non-LBTQ Latinas (21% vs. 3%). LBTQ Latinas were also more likely to report heavy marijuana use (21%) than adults overall in Los Angeles County (6%) and non-GBTQ White men (6%).

Six percent of LBTQ Latinas reported that they currently smoke, similar to all adults in Los Angeles County (6%).

Figure 43. Binge drinking, daily/near daily marijuana use, and current smoking among adults in LA County, LACHS, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas

[294] *Id*.

[295] The LACHS 2023 survey asked anyone identified as female at their time of birth if they had four or more drinks "on the same occasion" in the past 30 days, and all other respondents (sex assigned male at birth, "other" sex assigned at birth, and "prefer not to answer"), if they had 5 or more drinks "on the same occasion" in the past 30 days. For further background, *see, e.g.*, *Understanding Binge Drinking*, Nat'l Inst. Health: Nat'l Inst. Alcohol Abuse & Alcoholism (Feb. 2025), https://www.niaaa.nih.gov/publications/brochures-and-fact-sheets/binge-drinking.

[296] Daily or near daily marijuana use was operationalized as use on 20 or more of the prior 30 days.

These findings are consistent with prior Williams Institute research that found that LBT Latinas were more likely than non-LBT Latinas to engage in heavy drinking[297] but were similar to GBT Latinos.[298] Another Williams Institute study found that LBTQ Latinas had higher rates of binge drinking [299] and heavy drinking [300] in the past month than LBTQ White women.[301] Similarly, prior research focused on Los Angeles County found that Latina lesbians and bisexual women had higher rates of being current smokers and former smokers than Latina heterosexual women.[302]

Prior research has suggested that the higher prevalence of excessive alcohol use among Latina sexual minority women may be influenced by discrimination, including that based on their gender, racial minority identity, and sexual minority identity.[303] A study based on national data concluded that intersectionality played a role in disparities relating to drinking: "disparities in excessive alcohol consumption for Black and Hispanic sexual minority women, compared with White heterosexual women, were larger than what would be expected when considering differences by race or sexual identity individually."[304] In addition, being an immigrant and having barriers to acculturation of the U.S. dominant White culture has been linked to substance use among Latina sexual minority women.[305] Differences in excessive alcohol use between LBTQ and straight women may also be related to variations in social norms around alcohol use. Prior studies have identified that LBTQ women have higher rates of substance use because they use alcohol as a coping mechanism to deal with minority stress[306] and because LBTQ culture is more centered around drinking and bars than non-LBTQ culture.[307] Prior research has also suggested that for some LBTQ women, choosing "manly drinks" and drinking excessively is a way to subvert traditional feminine stereotypes and reinforce their LBTQ identity.[308]

[297] Wilson et al., *supra* note 38.

[298] *Id*.

[299] Having four or more drinks on one occasion for women.

[300] Averaging more than seven drinks per week in the past month.

[301] Wilson et al., *supra* note 48. *See also* Jeong et al., *supra* note 271.

[302] *See, e.g.*, Vickie M. Mays et al., *Heterogeneity of Health Disparities Among African American, Hispanic, and Asian American Women: Unrecognized Influences of Sexual Orientation*, 92 Am. J. Pub. Health 632 (2002); *See also* Santos et al., *supra* note 126; Kim & Fredriksen-Goldsen, *supra* note 10.

[303] Alicia Matthews et al., *The Influence of Acculturation on Substance Use Behaviors Among Latina Sexual Minority Women: The Mediating Role of Discrimination*, 49 Substance Use & Misuse 1888 (2014).

[304] Naomi Greene, John W. Jackson & Lorraine T. Dean, *Examining Disparities in Excessive Alcohol Use Among Black and Hispanic Lesbian and Bisexual Women in the United States: An Intersectional Analysis*, 81 J. Stud. Alcohol Drugs 462 (2020).

[305] Matthews et al., *supra* note 303.

[306] Laurie Drabble & Karen F. Trocki, *Alcohol in the Life Narratives of Women: Commonalities and Differences by Sexual Orientation*, 22 Addiction Rsch. & Theory 186 (2014).

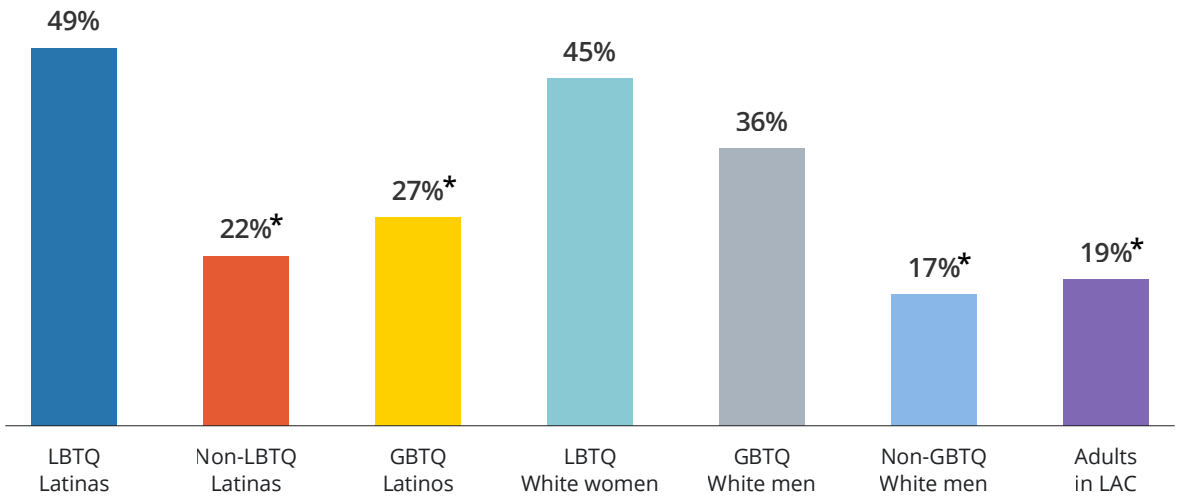
[307] Megan Condit et al., *Sexual Minority Women and Alcohol: Intersections Between Drinking, Relational Contexts, Stress and Coping*, 23 J. Gay & Lesbian Soc. Servs. 351 (2011).

[308] Carol Emslie, Jemma Lennox & Lana Ireland, *The Role of Alcohol in Identity Construction Among LGBT People: A Qualitative Study*, 39 Socio. of Health & Illness 1465 (2017).

INTIMATE PARTNER VIOLENCE

Over twice as many LBTQ Latinas as adults overall in Los Angeles County (49% vs. 19%) reported any lifetime intimate partner violence (IPV).[309] More specifically, LBTQ Latinas (49%) were much more likely to report IPV than non-LBTQ Latinas (22%), GBTQ Latinos (27%), and non-GBTQ White men (17%).

Figure 44. Lifetime IPV among adults in Los Angeles County, LACHS, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas

These findings are consistent with findings that in Los Angeles, half (50%) of bisexual women had experienced IPV, compared to 28% of cisgender gay men, 32% of bisexual men, and 33% of lesbians.[310] These findings are also consistent with prior research using national data that has shown higher rates of intimate partner violence for LGBTQ people overall,[311] bisexual women,[312] transgender women,[313] and those who are Latinx.[314]

Prior research indicates that discrimination and fear of discrimination can prevent LBTQ Latina IPV survivors from accessing the services they need. Latina survivors of IPV, regardless of LGBTQ status,

[309] IPV was defined as including physical or sexual violence; stalking; being insulted, humiliated, or intimidated; and having an intimate partner attempt to control you.

[310] *See generally* Taylor N.T. Brown & Jody L. Herman, Williams Inst., Intimate Partner Violence and Sexual Abuse Among LGBT People: A Review of Existing Research (2015), https://williamsinstitute.law.ucla.edu/wp-content/uploads/IPV-Sexual-Abuse-Among-LGBT-Nov-2015.pdf.

[311] *See generally Reports*, NYC Anti-Violence Project, https://avp.org/reports/ (last visited Sept. 2, 2025).

[312] *See, e.g.*, Matthew Joseph Breiding, Jieru Chen & Mikel L. Walters, U.S. Ctrs. Disease Control & Prevention: Nat'l Ctr. Injury Prevention & Control, The National Intimate Partner and Sexual Violence Survey (NISCS); 2010 Findings on Victimization by Sexual Orientation (2013), https://stacks.cdc.gov/view/cdc/12362.
Ilan H. Meyer, *Sexual Orientation Disparities in History of Intimate Partner Violence: Resu.lts from the California Health Interview Survey*, 28 J. Interpersonal Violence 1109 (2013).

[313] *See, e.g.*, James et al., *supra* note 187; Beverly Tillery et al., Nat'l Coal. Anti-Violence Programs, Lesbian, Gay, Bisexual, Transgender, Queer and HIV-Affected Hate & Intimate Partner Violence in 2017 (2018), http://avp.org/wp-content/uploads/2019/01/NCAVP-HV-IPV-2017-report.pdf.

[314] *Id*.

can experience racism and discrimination when accessing IPV services, as well as additional barriers if they are immigrants.[315] Many LGBTQ IPV survivors reported being turned away by IPV shelters and services created to serve straight women.[316] Due to knowledge of such experiences, LGBTQ people may be reluctant to seek out shelters and services.[317]

A study based on interviews with Latina lesbians in New York City who had experienced IPV found that most never reported their IPV to friends, family, or service providers.[318] Barriers identified to reporting or seeking shelter or services included fear of being discriminated against based on Latina ethnicity, sexual orientation, and gender identity; cultural norms around loyalty to family and partners (familismo); feelings of loyalty to the broader Latinx community; cultural norms that frame asking for help as being "weak;" fears of family rejection based on their LGBTQ identity; and lack of knowledge about LGBTQ-friendly shelters and services.[319] Further, LBTQ Latinas may be reluctant to report IPV to law enforcement due to the history of racism and homophobia of the police, historical patterns of law enforcement agents not taking complaints of violence against LBTQ women seriously, and fears related to immigration status.[320]

WEIGHT AND OBESITY

Two-thirds of LBTQ Latinas (67%) met the CDC's definition of being overweight or obese, with almost half (48%) meeting the CDC's definition of obesity.[321] While these rates were similar to those for non-LBTQ Latinas (70% and 41%), they were higher than rates for all adults in Los Angeles County (63% and 30%). LBTQ Latinas were over twice as likely to be obese (48%) as LBTQ White women (24%), GBTQ White men (19%), and non-GBTQ White men (23%).

[315] Angelica S. Reina & Brenda J. Lohman, *Barriers Preventing Latina Immigrants from Seeking Advocacy Services for Domestic Violence Victims: A Qualitative Analysis*, 30 J. Fam. Violence 479 (2015).

[316] For example, a 2017 report found that 43% of LGBTQ IPV survivors who sought shelter services reported that they were turned away or experienced discrimination. Nearly one-third (32%) of those who were denied services reported that they were turned away because of their gender identity. Tillery et al., *supra* note 313. An analysis of data from the 2010 National Transgender Discrimination Survey found that transgender people of color were more likely to experience unequal treatment when accessing IPV services than white respondents. Kristie L. Seelman, *Unequal Treatment of Transgender Individuals in Domestic Violence and Rape Crisis Programs*, 41 J. Soc. Sci. Rsch. 307 (2015).

[317] *See, e.g.*, Brown & Herman, *supra* note 310.

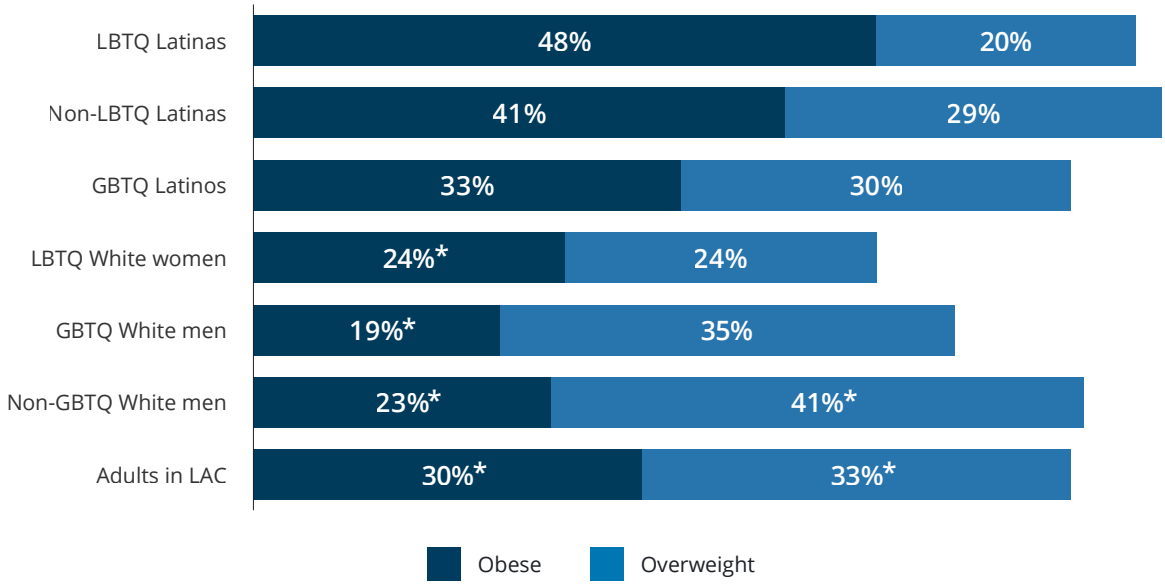
[318] Patricia Cepero, The Experiences of Seeking Help for Intimate Partner Violence in Latin Lesbian Relationships (June 13, 2024) (Ph.D. dissertation, Walden University) (https://scholarworks.waldenu.edu/cgi/viewcontent.cgi?article=17405&context=dissertations).

[319] *Id*.

[320] Perez & Torres, *supra* note 6.

[321] A body mass index (BMI) > 25 is considered to exceed a healthy weight for a person's height by the Centers of Disease Control and Prevention (CDC). A BMI of 25.0 to 29.9 is considered overweight by the CDC and a BMI of 30.0 or greater is referred to as obesity by the CDC. *See How Overweight and Obesity Impacts Your Health*, U.S. Ctrs. Disease Control & Prevention (Jan. 4, 2024), https://www.cdc.gov/healthy-weight-growth/food-activity/overweight-obesity-impacts-health.html.

Figure 45. Body mass measurement among adults in LA County, LACHS, 2023



*Statistically significant difference as compared to LBTQ Latinas

These findings are consistent with research based on national samples that showed that lesbian and bisexual women, relative to straight women, had a significantly increased likelihood of being overweight or living with obesity,[322] and that Latina lesbians and bisexual women had significantly increased odds for obesity and diabetes compared to their non-Latina counterparts.[323] Similarly, prior research focused on Los Angeles County found that, overall, Latinas in Los Angeles County had higher rates of being overweight and obese than White women,[324] and that Latina lesbians and bisexual women had higher rates of being overweight than Latina heterosexual women.[325]

Mental health disparities, economic insecurity, residence patterns, LBTQ cultural norms, and barriers to accessing health care may contribute to LBTQ Latinas' higher rates of obesity in Los Angeles County. A number of studies suggest that mental health disparities, such as stress, depression, and anxiety; stigmatization based on LGBTQ status; and lower levels of family and social support, can result in maladaptive eating behaviors that contribute to higher levels of being overweight and obese.[326] Poverty and food insecurity are also positively associated with obesity risk, especially for Latinx adults and sexual and gender minorities.[327] Environmental factors, such as housing,

[322] *See, e.g.*, Elisabetta M. Ferrero et al., *Nutrition and Health in the Lesbian, Gay, Bisexual, Transgender, Queer/Questioning Community: A Narrative Review*, 14 Advances Nutrition 1297 (2023); Sunday Azagba, Lingpeng Shan & Keely Latham, *Overweight and Obesity Among Sexual Minority Adults in the United States*, 16 Int'l J. Env't Rsch. Pub. Health 1828 (2019); Kelley Newlin Lew et al., *Prevalence of Obesity, Prediabetes, and Diabetes in Sexual Minority Women of Diverse Races/Ethnicities: Findings From the 2014-2015 BRFSS Surveys*, 44 Diabetes Educ. 348 (2018).

[323] *See, e.g.*, Newlin Lew et al., *supra* note 322.

[324] *See, e.g.*, Mays et al., *supra* note 302.

[325] *See, e.g.*, *id*.

[326] Sylvia Herbozo et al., *A Call to Reconceptualize Obesity Treatment in Service of Health Equity: Review of Evidence and Future Directions*, 12 Current Obesity Reps. 24 (2023); Ferrero et al., *supra* note 322.

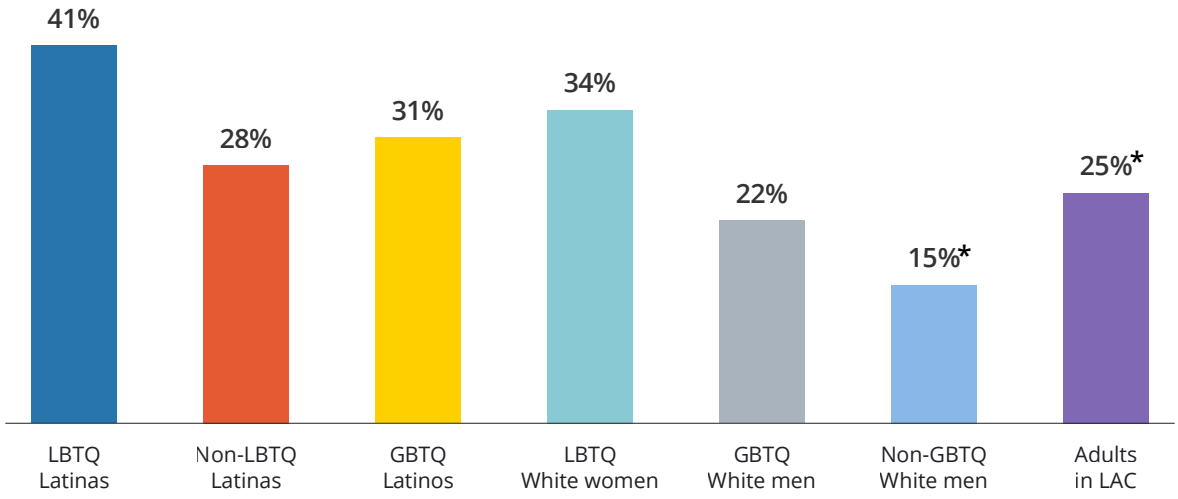
[327] *See, e.g.*, *id*.

transportation, and neighborhood design (e.g., the location of supermarkets, fast-food restaurants, parks, and recreational facilities), contribute to racial/ethnic disparities in obesity.[328] Weight stigma, LBTQ community norms around body image, and racial bias and LGBTQ-related discrimination also impact obesity treatment outcomes.[329] Additionally, lack of health insurance access impacts effective obesity treatment, making the higher costs of obesity treatment out of reach for many Latinas.[330] For transgender people, weight gain associated with hormone therapy and a lack of understanding about the nutritional needs of those receiving gender-affirming care may also contribute to higher rates of obesity.[331]

ACCESS, DISCRIMINATION, AND HARASSMENT

LBTQ Latinas (41%) reported more difficulty in accessing medical care than all adults in Los Angeles County (25%) and non-GBTQ White men (15%).

Figure 46. Very or somewhat difficult to access needed medical care among adults in LA County, LACHS, 2023



Note: *Statistically significant difference as compared to LBTQ Latinas.

Prior Williams Institute research based on national data has also found that Latinx LBQ women (39%) had the highest prevalence of lacking a regular source of health care among all LBQ racial and ethnic groups considered in the study, including White women (26%).[332] Prior Williams Institute research has also shown that Latinx LBT women were less likely to have a personal doctor than Latinx non-LBT women.[333] Similarly, an earlier study focused on health care for women in Los Angeles County found that Hispanic lesbian and bisexual women were more likely to be uninsured and report that they had no regular source of health care than Hispanic heterosexual women.[334] The study also found that

[328] Herbozo et al., *supra* note 326.

[329] Herbozo et al., *supra* note 326.

[330] *Id*.

[331] *See, e.g.*, Ferrero et al., *supra* note 322.

[332] WILSON ET AL., *supra* note 48.

[333] WILSON ET AL., *supra* note 38.

[334] Mays et al., *supra* note 302.

Hispanic lesbians and bisexual women were less likely to receive preventive health care than Hispanic heterosexual women in Los Angeles County, an indicator of health care quality.[335]

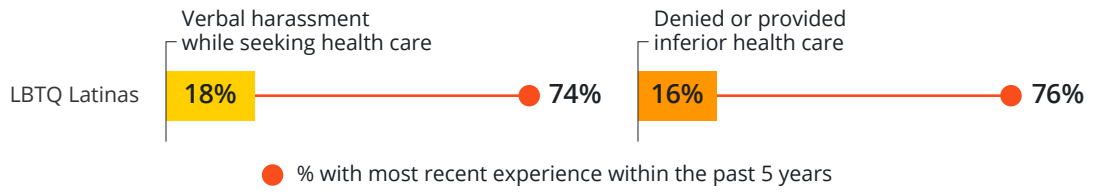
Williams Institute research highlights that barriers LBQ Latinas face in accessing health care include being uninsured and their immigration status. A prior Williams Institute analysis based on national data found that almost one in four LBQ Latinas (24%) were uninsured compared to 11% of White women.[336] In comparison to Latinx LGBT U.S.-born people, Latinx LGBT immigrants without Green Cards were much more likely to be uninsured (44% vs. 11%) and have no usual source of health care (46% vs. 21%).[337]

A 2016 qualitative study of Latinx young adults in the Rio Grande Valley found that participants avoided health care because of the high cost, disruptions in health insurance, and prior bad experiences with health care providers based on their ethnic and LGBTQ+ identities, which led to apprehension about discussing their sexuality with care providers.[338] The study recommended that providers actively create inclusive care environments and be sensitive to how prior negative experiences may deter patients from seeking care or revealing personal details about their LGBTQ+ identities.[339] The following sections look further at discrimination and harassment that LBTQ Latinas in Los Angeles County face when accessing health care and the extent to which they are out to health care providers.

Verbal Harassment and Discrimination

Almost one in five (18%) LBTQ Latinas reported having been verbally harassed because of their sexual orientation or gender identity while accessing health care in Los Angeles County. About three-quarters (74%) of LBTQ Latinas who experienced this harassment had their most recent experience within the past five years. Sixteen percent of LBTQ Latinas reported that they had been denied medical care or provided inferior care because of their sexual orientation or gender identity while living in Los Angeles County. About three-quarters (76%) of these LBTQ Latinas had their most recent experiences within the past five years.

Figure 47. LBTQ Latinas who experienced verbal harassment and were denied or provided inferior health care because of sexual orientation or gender identity in LA County by year of most recent experience, LELAC, 2023



[335] *Id*.

[336] Wilson et al., *supra* note 48.

[337] Guardado, Fuentes Carreño & Conron, *supra* note 44.

[338] Rachel M. Schmitz & Jennifer Tabler, *Traversing Barriers to Health Care Among LGBTQ+ Latinx Emerging Adults: Utilizing Patient Experiences to Model Access*, 8 Patient Experience J. 33 (2021).

[339] *Id*.

About one in 10 (11%) LBTQ Latinas in Los Angeles County had not gone to health care providers in the prior year to avoid unfair treatment because of their sexual orientation or gender identity, and 5% had not gone to avoid being threatened or physically attacked because of their sexual orientation or gender identity.

These findings are consistent with prior research. A 2023 national survey conducted by the Kaiser Family Foundation found that Hispanic LGBT adults were more likely than Hispanic non-LGBT adults to report being treated unfairly or with disrespect by health care providers for any reason in the past three years, including based on their race and ethnicity and for a reason other than their race or ethnicity – such as their gender, health insurance status, or ability to pay for care.[340] The study also found that Hispanic LGBT adults were more likely than non-Hispanic LGBT adults to prepare in advance for insults during their visits with health care providers.[341] Similarly, a 2020 study by the Center for American Progress, based on national data, found that Hispanic LGBTQ people were twice as likely as White LGBTQ people to report negative or discriminatory treatment from a health care provider in the prior year and that a doctor had refused to see them, or was visibly uncomfortable with them, because of their sexual orientation.[342] A 2022 study by the Center for American Progress found that 23% of LGBTQ respondents had avoided getting needed medical care in the past year due to discrimination or disrespect by providers.[343]

A community survey of LGBTQ+ patients with a serious illness and their spouses and partners underscores how harmful discrimination in the health care setting can be. LGBTQ+ Hispanic patients with a serious illness were two to three times more likely than non-Hispanic White LGBTQ+ patients to report being denied or refused care by a provider, feeling judged negatively for being LGBTQ+, having their treatment decisions disregarded, and having their health care providers' religious beliefs imposed upon them.[344] Partners of Hispanic LGBTQ+ patients with a serious illness were over four times as likely as those of non-Hispanic White LGBTQ+ patients to report that they were denied access to the intensive care unit or emergency room, that their visiting hours were limited, or that their treatment decisions were not followed.[345]

Outness

Fewer than one-third of LBTQ Latinas (31%) reported being out to all their healthcare providers, while over one-third (39%) reported not being out to any of their healthcare providers. In contrast, almost three-fourths of GBTQ White men (74%) in Los Angeles County were out to all their healthcare providers, and only 9% were not out to any of their healthcare providers.

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[340] Alex Montero et al., *LGBT Adults' Experiences With Discrimination and Health Care Disparities: Findings from the KFF Survey of Racism, Discrimination, and Health*, Kaiser Fam. Found. (Apr. 2, 2024), https://www.kff.org/report-section/lgbt-adults-experiences-with-discrimination-and-health-care-disparities-findings/.

[341] *Id*.

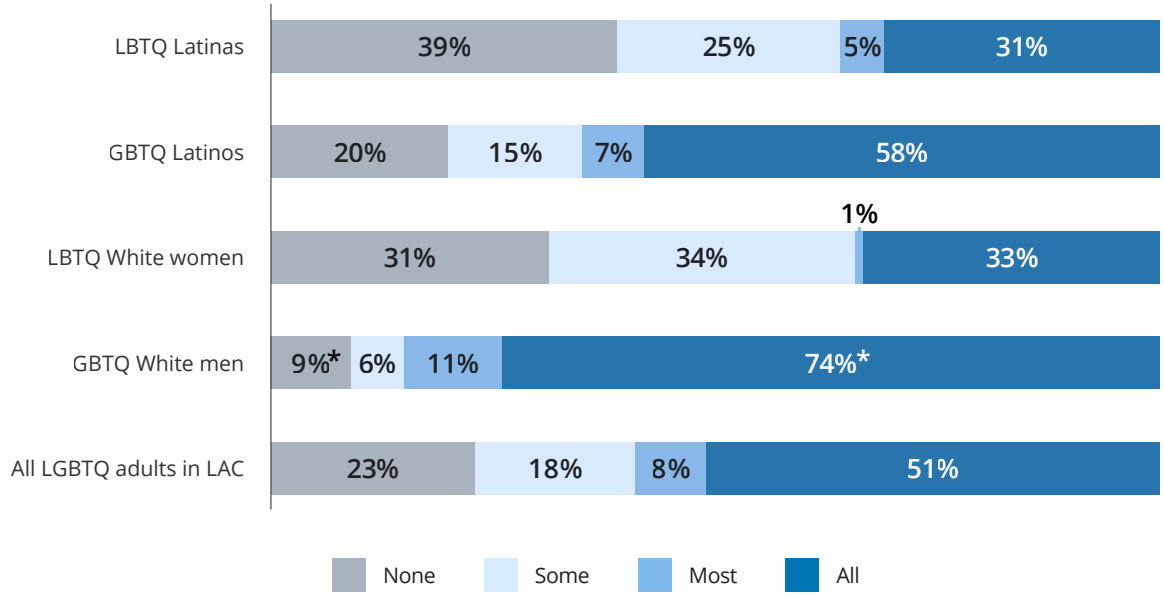
[342] Mahowald, *supra* note 169.

[343] Caroline Medina & Lindsay Mahowald, *Discrimination and Barriers to Well-Being: The State of the LGBTQI+ Community in 2022*, Ctr. Am. Progress (Jan. 12, 2023), https://www.americanprogress.org/article/discrimination-and-barriers-to-well-being-the-state-of-the-lgbtqi-community-in-2022/.

[344] Gary L. Stein et al., *Project Respect: Experiences of Seriously Ill LGBTQ+ Patients and Partners with their Health Care Providers*, 1 Health Affs. Scholar 1 (2023).

[345] *Id*.

Figure 48. Level of outness to health care providers among LGBTQ adults in LA County, LELAC, 2023



Note: *Statistically significant as compared to LBTQ Latinas. These percentages are based on responses of "none," "some," "most," or "all." They do not include respondents who selected that the question did not apply to them or who did not know their level of outness to providers. Analysis on file with authors.

These findings are consistent with findings that, among LGBTQ people in Los Angeles County more generally, cisgender bisexual women are much less likely to be out to their health care providers than cisgender lesbians and gay men, and LGBTQ people of color are less likely to be out than White LGBTQ people.[346] Further, a prior Williams Institute analysis based on national data has shown that only 59% of Latinx LBQ women were out to their health care providers and that, overall, LBQ women were less likely to be out to their health care providers than GBQ men.[347] This study also found that over half of Latinx LBQ women worried that their LBQ identity would mean that health care providers would judge them or would negatively affect evaluations of their health.[348] Over a third worried that they might confirm their health care providers' negative stereotypes about LGBT people.[349]

One reason LBQ Latinas may avoid health care, experience more discrimination or harassment, or not be out to their health care provider may be that they are less likely to go to an LGBT-specific service provider. A Williams Institute study found that most Latinx LBQ women (90%) had not gone to an LGBT-specific health care provider in the past five years.[350] However, 59% felt it was somewhat important or very important to see an LGBT-specific clinic or provider in the next year.[351]

[346] SEARS ET AL., *supra* note 12.

[347] WILSON ET AL., *supra* note 48.

[348] *Id.*

[349] *Id.*

[350] *Id.*

[351] *Id.*

RECOMMENDATIONS

- Increase access to affordable and culturally competent health care services—especially mental and behavioral health care services—for LBTQ Latinas that are tailored to their unique needs.
- Screen LBTQ Latinas for social determinants of health in health care settings, including experiences with IPV, housing and food insecurity, family rejection, depression, and discrimination.
- Increase LBTQ Latinas' access to culturally competent IPV shelters and services, and require training for law enforcement responding to IPV complaints by LBTQ Latinas. Increase access to trained interpreters who understand LGBTQ issues to ensure that health care and IPV services are offered in Spanish and, where needed, in Indigenous Latin American languages.
- Require data collection by gender identity, sexual orientation, and race/ethnicity in all relevant public health and service programs to better understand and respond to the needs of LBTQ Latinas.
- Support and expand the development of community-based health care providers that are focused on LBTQ Latinas, including AltaMed,[352] Bienestar,[353] Trans Latin@ Coalition,[354] Latino Equality Alliance,[355] The Wall Las Memorias,[356] the Trans Wellness Center,[357] and Promotoras Comunitarias.[358]
- Create and support public education campaigns that encourage LBTQ Latinas, including bisexual and transgender Latinas, to access routine and necessary health care, to be out to their health care providers, and address risks related to drinking, smoking, obesity, and IPV.
- Educate providers about and enforce laws that prohibit discrimination in health care based on race/ethnicity, gender, sexual orientation, and gender identity.
- Provide access to affordable and culturally competent health care to LBTQ Latinas who are not citizens.
- Fund culturally and linguistically appropriate telehealth and mobile care options that reach LGBT Latinas who face transportation, mobility, or immigration-related barriers.

[352] *Women's Health*, AltaMed, https://www.altamed.org/womens-health (last visited Sept. 2, 2025).

[353] *Trans Health*, Bienestar, https://www.bienestar.org/community/trans-health/ (last visited Sept. 2, 2025).

[354] TransLatin@ Coal., https://www.translatinacoalition.org/ (last visited Sept. 2, 2025).

[355] *About Us*, Latino Equal. All., https://www.somoslea.org/about-us/ (last visited Sept. 2, 2025).

[356] Wall Las Memorias, https://www.thewalllasmemorias.org/ (last visited Sept. 2, 2025).

[357] Trans Wellness Ctr., https://mytranswellness.org/ (last visited Sept. 2, 2025).

[358] *Promotoras Comunitarias*, Planned Parenthood L.A., https://www.plannedparenthood.org/planned-parenthood-los-angeles/local-education-training/promotoras-comunitarias (last visited Sept. 2, 2025).

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RESEARCH THAT MATTERS

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APPENDIX

METHODS

This report is one of a series using data collected from 1,006 LGBTQ Los Angelenos who completed the Los Angeles County Department of Public Health's 2023 Los Angeles County Health Survey (LACHS) and 504 LGBTQ Angelenos who also completed the Lived Experiences in Los Angeles County (LELAC) Survey, which was a call-back study to LACHS developed by the Williams Institute. The LACHS survey respondents included 136 LBTQ Latinas, of whom 68 responded to the LELAC follow-up survey. Please refer to "Communities of Resilience: The Lived Experiences of LGBTQ Adults in Los Angeles County" for details on the study.[359]

LBTQ Latinas were defined as cisgender or transgender respondents whose current gender identity was female and who selected "Hispanic, Latino, or Spanish origin" as their race or ethnicity, regardless of whether they selected another race. Accordingly, nonbinary Latinx people are not included among LBTQ Latinas.

Respondents were classified as transgender or cisgender based on their responses to LACHS questions about gender identity and sex assigned at birth. After the following introductory text, "We want to ask you about your gender identity and your sex assigned at birth. Gender identity refers to how you identify yourself, which may not be the same as the sex you were at birth," respondents were asked "What is your current gender identity?" followed by "What was your sex that was designated at your time of birth?." Respondents who selected gender identity options (male or female) that were the same as their sex assigned at birth (male or female) were classified as cisgender. Respondents who selected female as their gender identity and male as their sex assigned at birth were classified as transgender women. Respondents who selected "gender non-binary, gender non-conforming" as their gender identity were classified as nonbinary and not included among LBTQ Latinas, regardless of their response to sex assigned at birth. Respondents who selected "another gender category or another identity" and provided a write-in that corresponded to a female transgender gender identity (e.g., female) were classified as transgender women if they had selected male as their sex assigned at birth. Respondents who provided write-in responses that did not reflect a gender identity (e.g., gay, pansexual) or who selected "prefer not to state" as their response to the gender identity question were excluded from classification.

Sexual orientation was measured on the LACHS with the question, "Do you consider yourself to be …?" Respondents (cisgender and TNB) were classified as gay or lesbian if they selected "gay or lesbian" as their response option, or as bisexual if they selected "bisexual" or provided a write-in response to "something else" that indicated a non-monosexual orientation (i.e., pansexual, queer, or "flexible"). Most (84%) non-monosexual respondents selected "bisexual" as their sexual orientation identity, and 16% used other terms. Accordingly, we use "bisexual" in this report to refer to all non-monosexuals, and we use specific write-in identity terms provided by non-monosexual respondents, when available, in quote attributions. Transgender respondents who selected "straight or heterosexual" or "not sure," who identified with other terms (e.g., asexual) via a write-in response, or who did not answer the question formed a third, heterogeneous group.

[359] Sears et al., *supra* note 12.

Respondents answered one question about their race and Hispanic ethnicity: "What is your race or ethnicity? Please select all that apply." Respondents who selected "Hispanic, Latino, or Spanish origin" were categorized as Latinx. All non-Hispanic single-race respondents were then classified based on their selection as White, Black, or African American, Asian, American Indian or Alaska Native, Native Hawaiian, or Pacific Islander, or "some other race." Non-Hispanic respondents who selected more than one race response were classified as multiracial.

Descriptive analyses of quantitative data were conducted using STATA v18.0 SE, SAS v9.4, and R statistical software[360] and included design-based F-tests (Rao-Scott chi-square tests) of differences in proportions to assess whether outcomes varied across demographic groups at an alpha of 0.05.[361] Confidence intervals (95% CI) were included in the Appendix tables to communicate the degree of uncertainty around an estimate due to sampling error. All LELAC analyses were weighted using sampling weights developed for the 2023 Los Angeles County Health Survey and adjusted to account for nonconsent, noncontact, and nonresponse given contact, and nonconsent on the LELAC Survey. Weight benchmarks were derived from all LGBTQ respondents to the Los Angeles County Health Survey (LACHS) and included sex assigned at birth, age, race/ethnicity, marital status, educational attainment, economic status, and homeownership. Unfortunately, citizenship, nativity, and immigration status are not taken into account in the weighting procedure for LACHS. So, immigrant populations may be underrepresented in the sample. That said, the LACHS survey sampling method, which includes address-based sampling, aimed to select survey respondents, including immigrants, randomly. The weighted LELAC sample represents the adult LGBTQ population of Los Angeles County at the time that the survey was administered. Analyses of LACHS 2023 data used weights developed by RTI International for LACHS 2023.

Qualitative data gathered on the LELAC survey were also analyzed descriptively. Text responses to open-ended questions were coded in NVivo109[362] or Excel by main emic themes using a content analysis approach.[363] Responses that indicated no response (e.g., don't know, no opinion) were excluded from analysis.

Examples of quotes provided in the text were copy edited to correct spelling and grammatical errors. After the beginning of the excerpted text, deleted words are indicated by "…" and added words for clarity are indicated by "[]." Word clouds for each question were created in Adobe Illustrator using the remaining write-in responses. Terms used in the question, filler words (a, the, with, some), and words that were used less frequently were excluded from word clouds. Bubbles in the word clouds are sized proportionally to the frequency of the word's use in responses.

The study protocol was reviewed and approved by the Institutional Review Board at UCLA.

[360] R Dev. Core Team, *R*, https://www.R-project.org (last visited Sept. 2, 2025).

[361] J. N. K. Rao, & A. J. Scott, *On Chi-Squared Tests for Multiway Contingency Tables with Cell Proportions Estimated from Survey Data*, 12 Annals Stat. 46 (1984).

[362] Lumivero, *NVivo*, www.lumivero.com (last visited Sept. 2, 2025).

[363] Michael Quinn Patton, Qualitative Research and Evaluation Methods (3d ed. 2002).

TABLES

Adult LGBTQ Demographics

Table A1a. Demographics of selected adult subgroups (aged 18+) in Los Angeles County, LACHS, 2023[364]

	LBTQ LATINAS[365]			NON-LBTQ LATINAS[366]			GBTQ LATINOS[367]			LBTQ WHITE WOMEN[368]		
	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #
LA County	100.0%		106,000	100.0%		1,340,000	100.0%		128,000	100.0%		76,000
Unweighted (sample size)	100.0%		136	100.0%		1,484	100.0%		147	100.0%		151
AGE GROUP												
18-34	63.2%	[52.2, 74.2]	67,000	36.2%	[32.9, 39.5]	485,000	43.5%	[31.7, 55.2]	56,000	32.3%	[22.4, 42.2]	25,000
35-64	35.7%	[24.7, 46.6]	38,000	51.4%	[48.1, 54.8]	689,000	48.1%	[36.5, 59.7]	62,000	56.0%	[45.5, 66.5]	43,000
65+	-	-	-	12.4%	[10.3, 14.4]	166,000	8.4%*	[0.0, 17.5]	11,000	11.7%	[6.3, 17.1]	9,000
DISABILITY STATUS												
Yes	52.5%	[41.0, 63.9]	56,000	29.0%	[25.9, 32.0]	387,000	33.9%	[23.4, 44.4]	43,000	37.5%	[27.3, 47.7]	29,000
No	47.5%	[36.1, 59.0]	51,000	71.0%	[68.0, 74.1]	949,000	66.1%	[55.6, 76.6]	85,000	62.5%	[52.3, 72.7]	48,000
GENDER IDENTITY[369]												
Cisgender	96.1%	[92.1, 100.0]	102,000	100.0%	[100.0, 100.0]	1,340,000	90.8%	[84.3, 97.4]	117,000	95.5%	[92.0, 99.0]	73,000
Transgender	3.9%*	[0.0, 7.9]	4,000				9.2%*	[2.6, 15.7]	12,000	4.5%*	[1.0, 8.0]	3,000
Prefer not to state	-	-	-				-	-	-	-	-	-
SEXUAL ORIENTATION AND GENDER IDENTITY												
Cisgender Gay Man	-	-	-	-	-	-	57.5%	[45.6, 69.5]	74,000	-	-	-
Cisgender Lesbian	29.3%	[19.3, 39.3]	31,000	-	-	-	-	-	-	32.3%	[22.9, 41.7]	25,000

[364] Source: 2023 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

[365] LBTQ Latinas include adults of Hispanic, Latino, or Spanish origin who are 1) cisgender females with sexual orientation reported as lesbian or bisexual+ or 2) transgender females. Bisexual+ includes bisexual, pansexual, sexually fluid, heteroflexible, homoflexible, or queer.

[366] Non-LBTQ Latinas include adults of Hispanic, Latino, or Spanish origin who are cisgender females with sexual orientation reported as straight.

[367] GBTQ Latinos include adults of Hispanic, Latino, or Spanish origin who are 1) cisgender males with sexual orientation reported as gay or bisexual+ or 2) transgender males. Bisexual+ includes bisexual, pansexual, sexually fluid, heteroflexible, homoflexible, or queer.

[368] LBTQ White women include non-Hispanic White alone adults who are 1) cisgender females with sexual orientation reported as lesbian or bisexual+ or 2) transgender females. Bisexual+ includes bisexual, pansexual, sexually fluid, heteroflexible, homoflexible, or queer.

[369] Cisgender is defined as a person whose internal sense of gender corresponds with the sex the person was identified as having at birth.

	LBTQ LATINAS[365]			NON-LBTQ LATINAS[366]			GBTQ LATINOS[367]			LBTQ WHITE WOMEN[368]		
	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #
Cisgender Bisexual Man	-	-	-	-	-	-	33.3%	[21.3, 45.3]	43,000	-	-	-
Cisgender Bisexual Woman	66.8%	[56.4, 77.2]	71,000	-	-	-	-	-	-	63.2%	[53.4, 73.0]	48,000
Transgender or Gender Non-binary/ Non-conforming/Queer	3.9%*	[0.0, 7.9]	4,000	-	-	-	9.2%*	[2.6, 15.7]	12,000	4.5%*	[1.0, 8.0]	3,000
Prefer not to state	-	-	-	-	-	-	-	-	-	-		-
Cisgender Heterosexual	-	-	-	100.0%	[100.0, 100.0]	1,340,000	-	-	-			-
AGE GROUP (5 CATEGORIES)												
18-24	32.7%	[20.6, 44.8]	35,000	13.7%	[11.1, 16.3]	183,000	21.3%	[9.9, 32.8]	27,000	7.7%*	[0.2, 15.2]	6,000
25-34	30.5%	[21.3, 39.7]	32,000	22.5%	[19.8, 25.2]	302,000	22.1%	[13.6, 30.7]	28,000	24.6%	[16.3, 32.8]	19,000
35-49	24.6%	[14.9, 34.3]	26,000	26.4%	[23.5, 29.3]	354,000	32.2%	[22.0, 42.4]	41,000	34.1%	[23.0, 45.2]	26,000
50-64	11.1%*	[3.8, 18.3]	12,000	25.0%	[22.0, 28.0]	335,000	15.9%	[8.9, 22.9]	20,000	21.9%	[13.8, 30.0]	17,000
65+	-	-	-	12.4%	[10.3, 14.4]	166,000	8.4%*	[0.0, 17.5]	11,000	11.7%	[6.3, 17.1]	9,000
CITIZENSHIP STATUS												
U.S.-born	80.2%	[70.5, 90.0]	85,000	61.4%	[58.1, 64.8]	820,000	71.2%	[60.2, 82.1]	91,000	89.2%	[82.5, 95.9]	68,000
Naturalized	6.6%	[1.5, 11.6]	7,000	19.2%	[16.6, 21.8]	257,000	17.1%	[7.1, 27.1]	22,000	9.3%*	[3.0, 15.6]	7,000
Non-citizen	13.2%	[4.2, 22.1]	14,000	19.3%	[16.5, 22.2]	258,000	11.7%	[5.0, 18.3]	15,000	-		-
MARITAL STATUS												
Married/domestic partnership	28.5%	[18.5, 38.5]	30,000	44.5%	[41.1, 47.8]	595,000	26.7%	[16.8, 36.7]	34,000	34.7%	[23.8, 45.5]	26,000
Unmarried, cohabitating	10.9%*	[3.9, 17.9]	12,000	7.8%	[5.9, 9.7]	105,000	14.9%*	[4.7, 25.0]	19,000	8.5%	[3.7, 13.4]	7,000
Widowed, divorced, or separated	6.4%*	[2.0, 10.9]	7,000	16.5%	[14.1, 18.8]	220,000	6.4%*	[1.8, 11.0]	8,000	9.9%	[5.3, 14.5]	8,000
Never married	54.1%	[42.8, 65.5]	58,000	31.3%	[28.1, 34.4]	418,000	52.0%	[40.3, 63.7]	67,000	46.9%	[36.1, 57.6]	36,000
EDUCATION (AMONG THOSE AGES 25 AND UP)												
≤ HS/GED	33.2%	[20.5, 45.9]	24,000	50.6%	[47.1, 54.2]	586,000	36.2%	[23.1, 49.3]	37,000	16.1%*	[4.3, 28.0]	11,000
Some college or associates	32.1%	[21.1, 43.0]	23,000	28.9%	[25.9, 32.0]	334,000	33.7%	[23.1, 44.3]	34,000	23.3%	[14.6, 32.1]	16,000
Four-year college	27.8%	[17.5, 38.0]	20,000	12.7%	[10.8, 14.6]	147,000	18.9%	[10.8, 27.0]	19,000	34.3%	[24.8, 43.9]	24,000
Graduate degree	7.0%*	[2.1, 11.8]	5,000	7.7%	[6.3, 9.2]	90,000	11.1%	[5.7, 16.6]	11,000	26.2%	[18.0, 34.5]	18,000
B.A. or higher	34.7%	[23.8, 45.7]	25,000	20.5%	[18.1, 22.8]	237,000	30.0%	[20.4, 39.7]	30,000	60.6%	[49.0, 72.1]	43,000
EMPLOYMENT STATUS												
Employed (for pay)	68.7%	[58.2, 79.2]	73,000	58.9%	[55.6, 62.3]	790,000	74.0%	[64.3, 83.8]	95,000	70.4%	[60.7, 80.2]	54,000

	LBTQ LATINAS[365]			NON-LBTQ LATINAS[366]			GBTQ LATINOS[367]			LBTQ WHITE WOMEN[368]		
	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #
Unemployed (looking for work)	14.6%	[7.4, 21.9]	16,000	8.1%	[6.2, 10.1]	109,000	12.5%*	[5.1, 19.9]	16,000	7.7%*	[2.4, 12.9]	6,000
Not in workforce	16.7%	[7.8, 25.6]	18,000	32.9%	[29.8, 36.1]	441,000	13.5%	[6.2, 20.8]	17,000	21.9%	[12.9, 30.9]	17,000
COUNTY SUPERVISORIAL DISTRICT												
1st	25.0%	[15.8, 34.2]	27,000	25.2%	[22.5, 27.9]	338,000	20.2%	[12.2, 28.1]	26,000	15.1%	[8.1, 22.1]	12,000
2nd	13.3%	[6.0, 20.6]	14,000	17.8%	[15.2, 20.4]	239,000	15.2%	[7.5, 22.8]	19,000	11.4%	[5.5, 17.2]	9,000
3rd	21.0%	[10.1, 32.0]	22,000	15.1%	[12.2, 18.0]	203,000	36.6%	[24.2, 49.1]	47,000	36.6%	[25.8, 47.5]	28,000
4th	28.7%	[18.6, 38.7]	30,000	28.4%	[25.4, 31.4]	380,000	21.2%	[12.6, 29.8]	27,000	14.7%	[8.4, 21.0]	11,000
5th	12.0%*	[4.2, 19.8]	13,000	13.5%	[11.3, 15.7]	181,000	6.8%*	[2.0, 11.6]	9,000	22.2%	[12.6, 31.8]	17,000

Source: 2023 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Note: Estimates are based on self-reported data by a random sample of 9,372 Los Angeles County adults, representative of the adult population in Los Angeles County. The 95% confidence intervals (CI) represent the variability in the estimate due to sampling; the actual prevalence in the population, 95 out of 100 times sampled, would fall within the range provided.

* The estimate is statistically unstable (relative standard error >30%) and therefore may not be appropriate to use for planning or policy purposes.

- For purposes of confidentiality, results with cell sizes less than 5 are not reported.

Table A1b. Demographics of selected adult subgroups (aged 18+) in Los Angeles County, LACHS, 2023

	GBTQ WHITE MEN[370]			NON-GBTQ WHITE MEN[371]			LA COUNTY		
	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #
LA County	100.0%		150,000	100.0%		937,000	100.0%		7,850,000
Unweighted (sample size)	100.0%		263	100.0%		1,105	100.0%		9,372
AGE GROUP									
18-34	21.6%	[14.2, 29.0]	32,000	17.9%	[14.6, 21.2]	167,000	30.3%	[28.9, 31.6]	2,376,000
35-64	60.9%	[52.7, 69.1]	91,000	50.8%	[46.9, 54.6]	476,000	51.4%	[50.0, 52.8]	4,034,000
65+	17.5%	[11.6, 23.4]	26,000	31.4%	[28.0, 34.7]	294,000	18.3%	[17.4, 19.3]	1,440,000
DISABILITY STATUS									
Yes	35.1%	[26.3, 43.9]	53,000	22.1%	[18.8, 25.4]	206,000	27.2%	[26.0, 28.4]	2,131,000

[370] GBTQ White men include non-Hispanic White alone adults who are 1) cisgender males with sexual orientation reported as gay or bisexual+ or 2) transgender males. Bisexual+ includes bisexual, pansexual, sexually fluid, heteroflexible, homoflexible, or queer.

[371] Non-GBTQ White men include non-Hispanice White adults who are cisgender males with sexual orientation reported as straight.

	GBTQ WHITE MEN[370]			NON-GBTQ WHITE MEN[371]			LA COUNTY		
	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #
No	64.9%	[56.1, 73.7]	97,000	77.9%	[74.6, 81.2]	728,000	72.8%	[71.6, 74.0]	5,703,000
GENDER IDENTITY[372]									
Cisgender	93.6%	[87.5, 99.7]	140,000	100.0%	[100.0, 100.0]	937,000	96.3%	[95.7, 96.8]	7,556,000
Transgender	6.4%*	[0.3, 12.5]	10,000				1.1%	[0.9, 1.4]	90,000
Prefer not to state	-	-	-				2.6%	[2.2, 3.0]	204,000
SEXUAL ORIENTATION AND GENDER IDENTITY									
Cisgender Gay Man	75.6%	[67.9, 83.3]	114,000	-		-	3.2%	[2.8, 3.6]	252,000
Cisgender Lesbian	-		-	-		-	0.9%	[0.7, 1.1]	72,000
Cisgender Bisexual Man	18.0%	[11.9, 24.0]	27,000	-		-	1.1%	[0.8, 1.4]	83,000
Cisgender Bisexual Woman	-		-	-		-	2.0%	[1.7, 2.4]	160,000
Transgender or Gender Non-binary/ Non-conforming/Queer	6.4%*	[0.3, 12.5]	10,000	-		-	1.1%	[0.9, 1.4]	90,000
Prefer not to state	-		-	-		-	13.2%	[12.3, 14.2]	1,038,000
Cisgender Heterosexual			-	100.0%	[100.0, 100.0]	937,000	78.4%	[77.3, 79.6]	6,156,000
AGE GROUP (5 CATEGORIES)									
18-24	8.0%*	[1.6, 14.4]	12,000	6.8%	[4.0, 9.5]	63,000	11.8%	[10.7, 12.8]	925,000
25-34	13.6%	[8.5, 18.6]	20,000	11.1%	[8.9, 13.3]	104,000	18.5%	[17.4, 19.6]	1,451,000
35-49	22.9%	[15.8, 30.0]	34,000	20.5%	[17.5, 23.4]	192,000	25.4%	[24.2, 26.6]	1,994,000
50-64	38.0%	[30.2, 45.8]	57,000	30.3%	[26.6, 34.0]	284,000	26.0%	[24.8, 27.2]	2,040,000
65+	17.5%	[11.6, 23.4]	26,000	31.4%	[28.0, 34.7]	294,000	18.3%	[17.4, 19.3]	1,440,000
CITIZENSHIP STATUS									
U.S.-born	90.3%	[83.9, 96.7]	136,000	83.8%	[81.0, 86.7]	786,000	65.8%	[64.4, 67.1]	5,150,000
Naturalized	8.1%*	[1.8, 14.4]	12,000	12.9%	[10.2, 15.5]	120,000	21.6%	[20.5, 22.8]	1,695,000
Non-citizen	1.6%*	[0.3, 2.9]	2,000	3.3%	[2.0, 4.6]	31,000	12.6%	[11.6, 13.6]	986,000
MARITAL STATUS									
Married/domestic partnership	34.5%	[26.5, 42.6]	52,000	55.7%	[51.9, 59.6]	522,000	46.3%	[44.9, 47.7]	3,625,000
Unmarried, cohabitating	7.5%	[3.4, 11.5]	11,000	6.6%	[4.6, 8.5]	61,000	7.4%	[6.6, 8.2]	578,000
Widowed, divorced, or separated	3.9%	[1.9, 5.9]	6,000	11.0%	[9.1, 12.9]	103,000	12.3%	[11.5, 13.0]	960,000

[372] Cisgender is defined as a person whose internal sense of gender corresponds with the sex the person was identified as having at birth.

	GBTQ WHITE MEN[370]			NON-GBTQ WHITE MEN[371]			LA COUNTY		
	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #
Never married	54.1%	[45.9, 62.4]	81,000	26.7%	[23.0, 30.5]	250,000	34.1%	[32.7, 35.4]	2,671,000
EDUCATION (AMONG THOSE AGES 25 AND UP)									
≤ HS/GED	16.4%	[7.2, 25.5]	23,000	22.6%	[18.5, 26.7]	197,000	39.3%	[37.8, 40.8]	2,718,000
Some college or associates	22.0%	[15.6, 28.4]	30,000	27.4%	[24.1, 30.8]	240,000	25.8%	[24.7, 27.0]	1,789,000
Four-year college	31.7%	[24.9, 38.6]	44,000	29.6%	[26.4, 32.7]	258,000	20.6%	[19.6, 21.5]	1,424,000
Graduate degree	29.9%	[23.3, 36.4]	41,000	20.4%	[17.8, 23.0]	179,000	14.3%	[13.5, 15.1]	989,000
B.A. or higher	61.6%	[52.8, 70.4]	85,000	50.0%	[46.2, 53.8]	437,000	34.9%	[33.7, 36.1]	2,413,000
EMPLOYMENT STATUS									
Employed (for pay)	61.0%	[52.2, 69.8]	92,000	58.4%	[54.5, 62.2]	545,000	61.7%	[60.4, 63.0]	4,840,000
Unemployed (looking for work)	14.7%	[7.7, 21.6]	22,000	6.8%	[4.8, 8.8]	64,000	8.8%	[8.0, 9.6]	692,000
Not in workforce	24.4%	[16.0, 32.7]	37,000	34.8%	[31.1, 38.6]	326,000	29.5%	[28.2, 30.7]	2,312,000
COUNTY SUPERVISORIAL DISTRICT									
1st	13.0%	[6.6, 19.4]	20,000	8.6%	[6.6, 10.6]	81,000	19.1%	[18.0, 20.1]	1,499,000
2nd	11.2%	[6.9, 15.4]	17,000	9.8%	[7.8, 11.9]	92,000	18.1%	[17.1, 19.2]	1,422,000
3rd	43.5%	[35.7, 51.2]	65,000	35.4%	[31.7, 39.0]	331,000	21.9%	[20.7, 23.1]	1,719,000
4th	12.6%	[5.7, 19.5]	19,000	17.6%	[14.7, 20.5]	165,000	22.3%	[21.1, 23.4]	1,749,000
5th	19.7%	[12.1, 27.3]	30,000	28.6%	[24.9, 32.3]	268,000	18.6%	[17.6, 19.7]	1,461,000

Source: 2023 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Note: Estimates are based on self-reported data by a random sample of 9,372 Los Angeles County adults, representative of the adult population in Los Angeles County. The 95% confidence intervals (CI) represent the variability in the estimate due to sampling; the actual prevalence in the population, 95 out of 100 times sampled, would fall within the range provided.

* The estimate is statistically unstable (relative standard error >30%) and therefore may not be appropriate to use for planning or policy purposes.

- For purposes of confidentiality, results with cell sizes less than 5 are not reported.

Table A2a. Health indicator estimates among selected adult subgroups (aged 18+) in Los Angeles County, LACHS 2023

	LBTQ LATINAS			NON-LBTQ LATINAS			GBTQ LATINOS			LBTQ WHITE WOMEN		
	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #
ECONOMIC INDICATORS												
Below 100% FPL[373]	23.3%	[13.9, 32.8]	25,000	17.5%	[15.2, 19.7]	234,000	15.5%	[8.8, 22.1]	20,000	5.4%*	[1.7, 9.1]	4,000
Below 200% FPL	52.7%	[41.2, 64.1]	56,000	51.4%	[48.0, 54.7]	688,000	45.5%	[33.7, 57.3]	58,000	22.7%	[13.1, 32.4]	17,000
Food insecurity within the past 12 months (percent of adults)[374]	47.9%	[36.4, 59.4]	51,000	33.0%	[29.8, 36.2]	443,000	31.8%	[21.8, 41.8]	41,000	22.0%	[12.5, 31.5]	17,000
Food insecurity within the past 12 months (percent of households)	51.3%	[39.7, 62.9]	18,000	34.9%	[31.5, 38.3]	195,000	34.4%	[23.9, 44.9]	14,000	18.6%	[10.3, 26.8]	8,000
HOUSING												
Home ownership (rent)[375]	64.3%	[52.6, 76.1]	68,000	56.0%	[52.6, 59.4]	746,000	66.3%	[54.9, 77.8]	85,000	63.9%	[53.4, 74.3]	49,000
Home ownership (own)	28.7%	[18.6, 38.9]	31,000	41.6%	[38.3, 44.9]	554,000	27.1%	[16.0, 38.2]	35,000	35.7%	[25.3, 46.2]	27,000
Overburdened housing (percent of adults)[376]	71.7%	[61.7, 81.7]	76,000	64.6%	[61.4, 67.8]	861,000	69.9%	[60.4, 79.3]	90,000	61.1%	[50.4, 71.8]	47,000
Overburdened housing (percent of households)	72.0%	[61.8, 82.3]	25,000	65.3%	[61.9, 68.6]	363,000	68.1%	[57.9, 78.3]	27,000	63.0%	[52.9, 73.2]	28,000
Severely overburdened housing (percent of adults)	30.3%	[18.7, 41.9]	32,000	29.1%	[26.0, 32.2]	388,000	30.1%	[19.5, 40.7]	39,000	24.9%	[14.8, 35.0]	19,000
Severely overburdened housing (percent of households)	32.2%	[20.4, 44.0]	11,000	30.8%	[27.4, 34.1]	171,000	27.9%	[18.1, 37.6]	11,000	28.1%	[16.9, 39.2]	12,000
Unhoused - at any time in the past five years	15.7%	[8.3, 23.0]	17,000	6.3%	[4.7, 7.9]	85,000	19.3%	[8.3, 30.3]	25,000	6.7%*	[2.2, 11.3]	5,000
Housing unaffordability (percent of adults)[377]	24.3%	[14.5, 34.2]	26,000	19.6%	[16.9, 22.2]	262,000	16.8%	[9.0, 24.6]	22,000	14.7%	[7.1, 22.2]	11,000
Housing unaffordability (percent of households)	21.8%	[12.8, 30.8]	7,000	22.0%	[19.0, 25.1]	123,000	17.1%	[9.0, 25.2]	7,000	15.6%*	[5.7, 25.5]	7,000
BUILDING FAMILIES												
Married or in a domestic partnership	28.5%	[18.5, 38.5]	30,000	44.5%	[41.1, 47.8]	595,000	26.7%	[16.8, 36.7]	34,000	34.7%	[23.8, 45.5]	26,000
Caregiving[378]	-	[-, -]	-	17.5%	[10.4, 24.7]	248,000	-	[-, -]	-	-	[-, -]	-
Living alone	14.5%	[7.7, 21.3]	15,000	9.0%	[7.5, 10.6]	121,000	19.0%	[12.1, 25.8]	24,000	34.7%	[25.7, 43.6]	26,000

[373] Based on U.S. Census 2022 Federal Poverty Level (FPL) thresholds which for a family of four (2 adults, 2 dependents) correspond to annual incomes of $27,750 (100% FPL), $55,500 (200% FPL), and $83,250 (300% FPL). [These thresholds were the values at the time of survey interviewing.]

[374] Food insecurity is a scaled variable based on a series of five questions. [Ref: SJ Blumberg, K Bialostosky, WL Hamilton, and RR Briefel. The effectiveness of a short form of the Household Food Security Scale. Am J Public Health; 1999(89): 1231-1234]

[375] A small percentage of respondents reported “other housing arrangement” or “being homeless.” These categories are not presented in the table.

[376] Overburdened housing is defined as spending more than 30% of total household income on rent or mortgage, while severely overburdened housing is defined as spending more than 50% of total household income on rent or mortgage.

[377] Households delayed or were unable to pay mortgage or rent in the past 2 years.

[378] Estimates for caregiving are based on self-reported data by a random subsample of 1,172 Los Angeles County adults, representative of the adult population in Los Angeles County. The 95% confidence intervals (CI) represent the variability in the estimate due to sampling; the actual prevalence in the population, 95 out of 100 times sampled, would fall within the range provided.

	LBTQ LATINAS			NON-LBTQ LATINAS			GBTQ LATINOS			LBTQ WHITE WOMEN		
	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #
Living alone (50 years and older)	47.2%*	[14.8, 79.6]	6,000	13.4%	[10.4, 16.4]	67,000	29.3%*	[11.6, 47.1]	9,000	40.7%	[26.2, 55.1]	10,000
Experiencing loneliness[379]	45.0%	[33.7, 56.3]	48,000	22.2%	[19.4, 24.9]	297,000	37.5%	[26.7, 48.3]	48,000	50.9%	[40.1, 61.7]	39,000
Always/usually receiving social and emotional support	49.8%	[38.3, 61.4]	53,000	58.9%	[55.6, 62.3]	790,000	54.0%	[42.4, 65.5]	69,000	55.6%	[44.6, 66.6]	42,000
HEALTHCARE												
At risk for major depression[380]	22.9%	[13.5, 32.3]	24,000	10.6%	[8.5, 12.6]	142,000	20.7%	[11.9, 29.4]	27,000	20.8%	[11.8, 29.9]	16,000
Lifetime suicide attempts	24.1%	[12.8, 35.5]	26,000	3.8%	[2.6, 5.0]	51,000	5.7%*	[1.6, 9.7]	7,000	11.3%*	[3.3, 19.4]	9,000
Lifetime IPV[381]	49.0%	[37.5, 60.6]	52,000	21.8%	[19.1, 24.4]	291,000	27.1%	[17.4, 36.7]	35,000	45.1%	[34.5, 55.7]	34,000
Binge drinking[382]	47.1%	[35.5, 58.7]	50,000	17.2%	[14.8, 19.6]	230,000	35.6%	[24.1, 47.1]	45,000	27.6%	[19.0, 36.1]	21,000
Heavy marijuana use[383]	21.0%	[10.1, 32.0]	22,000	2.5%	[1.5, 3.5]	33,000	7.9%*	[1.7, 14.1]	10,000	12.5%	[6.6, 18.4]	10,000
Cigarette smoking (Current)[384]	6.0%*	[1.1, 10.9]	6,000	3.0%	[1.8, 4.1]	40,000	14.2%	[6.1, 22.4]	18,000	2.9%*	[0.4, 5.5]	2,000
Overweight[385]	19.6%	[10.5, 28.7]	21,000	28.8%	[25.8, 31.8]	383,000	29.6%	[18.8, 40.3]	38,000	23.6%	[15.5, 31.6]	18,000
Obesity	47.7%	[36.2, 59.2]	51,000	41.2%	[37.9, 44.5]	549,000	32.9%	[22.7, 43.0]	42,000	24.1%	[13.2, 34.9]	18,000
Difficulty accessing medical care	40.8%	[29.2, 52.5]	43,000	28.2%	[25.1, 31.3]	378,000	31.0%	[20.5, 41.5]	40,000	34.3%	[23.8, 44.8]	26,000

Source: 2023 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Note: Estimates are based on self-reported data by a random sample of 9,372 Los Angeles County adults, representative of the adult population in Los Angeles County. The 95% confidence intervals (CI) represent the variability in the estimate due to sampling; the actual prevalence in the population, 95 out of 100 times sampled, would fall within the range provided.

* The estimate is statistically unstable (relative standard error >30%) and therefore may not be appropriate to use for planning or policy purposes.

- For purposes of confidentiality, results with cell sizes less than 5 are not reported.

[379] Loneliness is defined by the UCLA Three-Item Loneliness Scale (Ref: Hughes, M. E., Waite, L. J., Hawkley, L. C. and Cacioppo, J. T. 2004. A Short Scale for Measuring Loneliness in Large Surveys: Results from two population-based studies. Research on Ageing. 26(6) pp.655-672).

[380] The Patient Health Questionnaire-2 (PHQ-2) is used as the initial screening test for major depressive episode. [Ref: Kroenke K, Spitzer RL, Williams JB. The Patient Health Questionnaire-2: validity of a two-item depression screener. Med Care 2003; 41:1284-92.]

[381] Intimate partner violence (IPV) was assessed based on experiencing any of the physical violence, sexual violence, stalking, being called names/insulted/humiliated/intimidated, or being controlled by a current or former intimate partner.

[382] Binge drinking is defined as drinking 4 or more drinks for females and 5 or more drinks for males on one occasion at least one time in the past month. [Ref: BRFSS]

[383] Heavy marijuana use was operationalized as using marijuana on 20 or more of the prior 30 days.

[384] Adults who have smoked at least 100 cigarettes in their lifetime and currently smoke are considered as current smokers.

[385] Weight status is based on Body Mass Index (BMI) calculated from self-reported weight and height. According to NHLBI clinical guidelines, a BMI < 18.5 is underweight, a BMI ≥ 18.5 and < 25 is normal weight, a BMI ≥ 25 and < 30 is overweight, and a BMI ≥ 30 is obese. [Ref: National Heart, Lung, and Blood Institute (NHLBI) https://www.nhlbi.nih.gov/health-topics/overweight-and-obesity.]

Table A2b. Health indicator estimates among selected adult subgroups (aged 18+) in Los Angeles County, LACHS 2023

	GBTQ WHITE MEN			NON-GBTQ WHITE MEN			LA COUNTY		
	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #
ECONOMIC INDICATORS									
Below 100% FPL	8.6%*	[2.9, 14.2]	13,000	4.0%	[2.7, 5.3]	38,000	12.8%	[12.0, 13.6]	1,005,000
Below 200% FPL	21.4%	[13.4, 29.3]	32,000	14.4%	[11.6, 17.2]	135,000	36.4%	[35.0, 37.7]	2,855,000
Food insecurity within the past 12 months (percent of adults)	15.7%	[8.7, 22.7]	24,000	10.1%	[7.8, 12.4]	95,000	26.3%	[25.0, 27.6]	2,059,000
Food insecurity within the past 12 months (percent of households)	16.2%	[9.5, 22.9]	10,000	10.5%	[8.2, 12.8]	45,000	25.4%	[24.2, 26.6]	848,000
HOUSING									
Home ownership (rent)	51.4%	[43.1, 59.8]	77,000	35.3%	[31.7, 38.8]	330,000	48.8%	[47.5, 50.2]	3,823,000
Home ownership (own)	48.6%	[40.2, 56.9]	73,000	63.4%	[59.8, 67.1]	594,000	48.9%	[47.6, 50.3]	3,830,000
Overburdened housing (percent of adults)	46.4%	[38.2, 54.5]	70,000	36.7%	[33.0, 40.4]	343,000	54.8%	[53.4, 56.1]	4,267,000
Overburdened housing (percent of households)	49.6%	[41.1, 58.1]	30,000	39.8%	[36.2, 43.4]	168,000	54.2%	[52.8, 55.5]	1,798,000
Severely overburdened housing (percent of adults)	13.1%	[8.0, 18.1]	20,000	10.8%	[8.4, 13.3]	101,000	22.7%	[21.5, 23.9]	1,770,000
Severely overburdened housing (percent of households)	14.8%	[8.2, 21.4]	9,000	11.6%	[9.2, 14.0]	49,000	22.5%	[21.4, 23.7]	748,000
Unhoused - at any time in the past five years	3.4%*	[0.8, 5.9]	5,000	4.3%	[2.7, 5.9]	40,000	6.7%	[6.0, 7.4]	524,000
Housing unaffordability (percent of adults)	13.2%	[6.3, 20.0]	20,000	7.1%	[5.2, 9.0]	66,000	16.1%	[15.0, 17.2]	1,263,000
Housing unaffordability (percent of households)	12.6%	[6.3, 18.9]	8,000	7.8%	[5.8, 9.8]	33,000	16.3%	[15.2, 17.3]	544,000
BUILDING FAMILIES									
Married or in a domestic partnership	34.5%	[26.5, 42.6]	52,000	55.7%	[51.9, 59.6]	522,000	46.3%	[44.9, 47.7]	3,625,000
Caregiving	-	[-, -]	-	23.9%	[11.0, 36.7]	211,000	17.7%	[14.2, 21.2]	1,389,000
Living alone	43.1%	[35.2, 51.0]	65,000	19.7%	[17.3, 22.2]	185,000	16.8%	[16.0, 17.6]	1,318,000
Living alone (50 years and older)	48.7%	[38.4, 59.0]	41,000	20.7%	[17.5, 23.9]	119,000	21.5%	[20.1, 22.8]	747,000
Experiencing loneliness	46.4%	[38.0, 54.8]	70,000	19.7%	[16.8, 22.7]	185,000	25.8%	[24.6, 27.0]	2,020,000
Always/usually receiving social and emotional support	56.5%	[47.9, 65.0]	85,000	72.6%	[69.2, 76.1]	681,000	61.8%	[60.4, 63.1]	4,847,000
HEALTHCARE									
At risk for major depression	15.2%	[8.9, 21.4]	23,000	7.3%	[5.3, 9.2]	68,000	11.2%	[10.3, 12.0]	875,000
Lifetime suicide attempts	8.6%*	[2.8, 14.5]	13,000	2.8%	[1.5, 4.1]	26,000	4.1%	[3.5, 4.7]	320,000
Lifetime IPV	36.2%	[28.3, 44.2]	54,000	17.2%	[14.4, 20.0]	161,000	19.3%	[18.2, 20.3]	1,509,000
Binge drinking	29.8%	[23.0, 36.6]	45,000	21.7%	[18.8, 24.7]	203,000	22.1%	[20.9, 23.3]	1,733,000
Heavy marijuana use	20.2%	[12.1, 28.2]	30,000	6.4%	[4.5, 8.3]	60,000	5.8%	[5.1, 6.5]	456,000

	GBTQ WHITE MEN			NON-GBTQ WHITE MEN			LA COUNTY		
	%	95% CI	EST. #	%	95% CI	EST. #	%	95% CI	EST. #
Cigarette smoking (Current)	12.8%	[7.3, 18.4]	19,000	8.0%	[5.9, 10.0]	75,000	6.0%	[5.3, 6.7]	470,000
Overweight	34.6%	[27.2, 42.0]	52,000	41.0%	[37.2, 44.8]	384,000	33.2%	[31.9, 34.5]	2,594,000
Obesity	19.3%	[11.5, 27.1]	29,000	23.1%	[19.9, 26.3]	216,000	29.5%	[28.2, 30.8]	2,302,000
Difficulty accessing medical care	22.4%	[15.3, 29.6]	34,000	14.6%	[12.0, 17.2]	137,000	25.4%	[24.1, 26.6]	1,992,000

Source: 2023 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Note: Estimates are based on self-reported data by a random sample of 9,372 Los Angeles County adults, representative of the adult population in Los Angeles County. The 95% confidence intervals (CI) represent the variability in the estimate due to sampling; the actual prevalence in the population, 95 out of 100 times sampled, would fall within the range provided.

* The estimate is statistically unstable (relative standard error >30%) and therefore may not be appropriate to use for planning or policy purposes.

- For purposes of confidentiality, results with cell sizes less than 5 are not reported.

Table A3. Parenting and building families among LGBTQ adults (aged 18+) in Los Angeles County by race/ethnicity and gender, LELAC 2023[386]

	LBTQ LATINAS		GBTQ LATINOS		LBTQ WHITE WOMEN		GBTQ WHITE MEN		ALL LGBTQ ADULTS	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
FAMILY										
Lifetime parent	14.9%	[7.4, 27.6]	13.9%	[5.8, 29.7]	21.4%	[10.6, 38.4]	16.6%	[9.2, 27.9]	18.1%	[13.4, 23.9]
Among lifetime parents, those with										
Biological children	70.4%	[29.0, 93.3]	87.9%	[52.9, 97.9]	71.6%	[33.6, 92.6]	70.0%	[32.6, 91.9]	79.8%	[65.3, 89.2]
Stepchildren	2.2%	[0.2, 18.0]	65.8%	[26.9, 91.0]	32.8%	[8.0, 73.3]	31.0%	[8.7, 67.9]	24.2%	[12.8, 41.1]
Adopted/foster children	20.5%	[2.6, 71.2]	49.6%	[12.4, 87.3]	8.1%	[1.4, 35.6]	2.8%	[0.3, 20.7]	15.0%	[6.1, 32.2]
Children under 18 in household	71.7%	[36.4, 91.8]	56.1%	[17.4, 88.6]	41.6%	[12.9, 77.5]	29.0%	[7.6, 66.8]	41.3%	[26.1, 58.3]
Very much or somewhat want to have children (any or more) among those under 50	74.2%	[55.5, 86.9]	70.9%	[55.3, 82.8]	83.9%	[69.4, 92.2]	32.9%	[18.9, 50.9]	61.8%	[54.2, 68.9]
METHODS CONSIDERED AMONG THOSE WHO WANT CHILDREN										
Intercourse	68.0%	[46.4, 83.9]	36.5%	[17.3, 61.2]	62.2%	[37.4, 81.9]	31.5%	[15.1, 54.2]	53.3%	[43.5, 62.9]
ART (including surrogacy)	40.5%	[22.4, 61.6]	59.2%	[36.2, 78.7]	41.9%	[20.6, 66.6]	56.6%	[33.6, 77.1]	48.5%	[38.8, 58.4]
Adoption	52.3%	[32.2, 71.7]	66.5%	[41.9, 84.5]	66.1%	[39.6, 85.3]	73.8%	[51.1, 88.4]	61.8%	[51.4, 71.1]
Fostering	30.8%	[15.3, 52.3]	36.2%	[17.6, 60.0]	17.1%	[7.6, 34.1]	27.9%	[11.6, 53.3]	29.8%	[21.7, 39.5]
PREFFERED METHOD AMONG THOSE WHO WANT CHILDREN										

[386] Source: 2023 Lived Experiences in Los Angeles County Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

	LBTQ LATINAS		GBTQ LATINOS		LBTQ WHITE WOMEN		GBTQ WHITE MEN		ALL LGBTQ ADULTS	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Intercourse	59.0%	[38.1, 77.0]	30.9%	[13.6, 56.1]	67.3%	[43.6, 84.6]	20.7%	[8.1, 43.8]	47.5%	[37.7, 57.5]
ART (including surrogacy)	30.8%	[14.9, 53.3]	46.4%	[26.2, 67.8]	23.6%	[9.6, 47.5]	48.1%	[27.5, 69.3]	35.8%	[26.8, 45.9]
Adoption/Fostering	10.2%	[3.5, 26.5]	22.7%	[9.4, 45.3]	9.1%	[3.1, 23.6]	31.2%	[13.1, 57.7]	16.7%	[11.1, 24.5]
LIKELIHOOD OF HAVING A CHILD THROUGH PREFFERED METHOD AMONG THOSE WHO WANT CHILDREN										
Not at all	24.9%	[10.2, 49.2]	29.6%	[13.2, 53.7]	20.6%	[8.3, 42.8]	0.2%	[10.1, 44.9]	25.2%	[17.0, 35.6]
Somewhat likely	33.5%	[18.4, 52.9]	51.6%	[30.2, 72.4]	27.0%	[12.1, 49.8]	0.7%	[52.2, 87.6]	43.3%	[34.1, 53.1]
Very likely	41.6%	[23.6, 62.2]	18.8%	[6.6, 43.3]	52.4%	[28.3, 75.5]	0.0%	[0.7, 13.0]	31.5%	[22.7, 41.9]
BARRIERS TO HAVING CHILDREN THROUGH PREFERRED METHOD AMOND THOSE WHO WANT CHILDREN										
Do not have one or more of the needed parts (sperm, egg, or uterus)	9.9%	[3.8, 23.4]	8.9%	[3.1, 22.9]	13.3%	[5.2, 30.3]	3.5%	[0.8, 14.0]	11.6%	[7.5, 17.7]
Fertility problems	13.2%	[4.1, 35.4]	12.8%	[3.0, 40.6]	8.9%	[2.1, 30.9]	0.0%	[0.0, 0.0]	9.9%	[5.0, 18.5]
Other health problems	2.5%	[0.5, 11.1]	5.6%	[1.0, 25.5]	7.3%	[1.4, 31.3]	2.2%	[0.3, 15.1]	6.9%	[3.1, 14.7]
Cost	27.0%	[12.5, 48.8]	40.2%	[21.7, 62.1]	32.1%	[15.2, 55.4]	69.2%	[47.5, 84.8]	35.7%	[27.2, 45.2]
No partner/spouse	14.5%	[5.2, 34.5]	27.2%	[12.0, 50.7]	19.5%	[8.7, 38.1]	57.5%	[35.6, 76.7]	26.5%	[19.2, 35.5]
Partner/spouse is opposed	2.9%	[0.6, 12.6]	5.2%	[1.2, 19.6]	4.3%	[0.6, 26.4]	5.6%	[1.7, 17.1]	3.4%	[1.6, 7.2]
Some other reason	9.8%	[3.7, 23.8]	13.4%	[4.1, 36.0]	0.0%	[0.0, 0.0]	27.2%	[11.0, 53.1]	11.8%	[7.2, 19.0]

Source: 2023 Lived Experiences in Los Angeles County Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Note: Estimates are based on self-reported data by a random sample of 9,372 Los Angeles County adults, representative of the adult population in Los Angeles County. The 95% confidence intervals (CI) represent the variability in the estimate due to sampling; the actual prevalence in the population, 95 out of 100 times sampled, would fall within the range provided.

Table A4. Outness among LGBTQ adults (aged 18+) in Los Angeles County by race/ethnicity and gender where relevant, LELAC 2023

	LBTQ LATINAS	GBTQ LATINOS	LBTQ WHITE WOMEN	GBTQ WHITE MEN	ALL LGBTQ ADULTS
	%	%	%	%	%
OUT TO IMMEDIATE FAMILY					
None	9.9%	20.0%	14.2%	10.4%	14.4%
Some	31.5%	17.1%	31.3%	7.7%	19.5%
Most	13.8%	23.6%	9.2%	7.2%	13.7%
All	44.8%	39.3%	45.2%	74.7%	52.4%
OUT TO NON-LGBTQ FRIENDS					

	LBTQ LATINAS	GBTQ LATINOS	LBTQ WHITE WOMEN	GBTQ WHITE MEN	ALL LGBTQ ADULTS
	%	%	%	%	%
None	7.7%	15.6%	3.1%	5.0%	7.5%
Some	25.6%	29.0%	29.0%	15.8%	23.2%
Most	21.1%	11.1%	31.6%	22.9%	19.0%
All	45.7%	44.2%	36.4%	56.4%	50.3%
OUT TO SUPERVISOR					
Yes	48.4%	47.5%	44.6%	70.0%	51.5%
No	51.6%	52.5%	55.4%	30.0%	48.5%
OUT TO COWORKERS					
None	37.0%	25.6%	16.9%	14.5%	23.9%
Some	19.2%	33.1%	47.2%	12.0%	26.2%
Most	14.9%	10.9%	2.1%	16.4%	11.9%
All	28.9%	30.4%	33.7%	57.1%	38.0%
OUT TO HEALTH CARE PROVIDERS					
None	38.7%	19.8%	30.7%	9.2%	23.4%
Some	25.3%	14.8%	34.5%	5.8%	17.9%
Most	5.1%	7.1%	1.5%	10.8%	7.9%
All	31.0%	58.2%	33.3%	74.3%	50.8%
OUT TO PEOPLE IN RELIGIOUS AND/ OR SPIRTUAL COMMUNITY					
None	65.2%	53.5%	42.8%	27.7%	47.9%
Some	14.1%	20.7%	28.8%	8.6%	19.0%
Most	0.0%	0.0%	0.0%	9.8%	2.5%
All	20.7%	25.8%	28.4%	53.9%	30.6%

Source: 2023 Lived Experiences in Los Angeles County Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Note: Estimates are based on self-reported data by a random sample of 9,372 Los Angeles County adults, representative of the adult population in Los Angeles County.

Table A5. LGBTQ adults (aged 18+) experiences with discrimination and harassment based on sexual orientation and gender identity in Los Angeles County by race/ethnicity and gender, LELAC 2023

	LBTQ LATINAS		GBTQ LATINOS		LBTQ WHITE WOMEN		GBTQ WHITE MEN		ALL LGBTQ ADULTS	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI		95% CI
HOUSING										
Unfair treatment in renting or buying housing										
Lifetime	20.6%	[9.9, 37.8]	14.2%	[7.0, 26.8]	6.3%	[1.8, 19.2]	7.7%	[3.5, 15.9]	11.9%	[8.3, 16.7]
Less than 1 year	42.8%	[10.5, 82.8]	13.5%	[1.4, 63.1]	21.5%	[1.5, 83.0]	12.8%	[2.1, 49.9]	19.7%	[7.4, 42.9]
1 to 5 years	21.2%	[4.7, 59.4]	10.4%	[1.6, 44.9]	57.1%	[5.6, 96.8]	53.3%	[16.5, 86.8]	22.3%	[11.2, 39.5]
More than 5 years ago	36.0%	[9.8, 74.4]	76.0%	[35.5, 94.8]	21.4%	[1.5, 83.3]	33.8%	[9.1, 72.4]	58.1%	[38.7, 75.2]
Verbally harassed by landlord, tenants, or neighbors										
Lifetime	11.7%	[3.9, 30.3]	8.3%	[3.3, 19.2]	6.2%	[2.1, 16.8]	15.7%	[9.1, 25.8]	11.2%	[7.8, 15.7]
Less than 1 year	7.5%	[0.8, 44.5]	0.0%	[0.0, 0.0]	39.8%	[3.5, 92.3]	17.8%	[4.8, 48.0]	23.9%	[10.7, 45.1]
1 to 5 years	65.5%	[11.4, 96.6]	100.0%	[100.0, 100.0]	9.6%	[0.4, 72.4]	33.4%	[11.8, 65.3]	45.4%	[27.8, 64.2]
More than 5 years ago	26.9%	[1.9, 87.8]	0.0%	[0.0, 0.0]	50.7%	[5.1, 95.1]	48.8%	[21.6, 76.6]	30.7%	[16.8, 49.2]
WORKPLACE										
Fired or denied a promotion										
Lifetime	12.8%	[4.6, 30.9]	9.2%	[4.2, 18.9]	10.3%	[4.2, 23.1]	11.3%	[6.2, 19.7]	12.0%	[8.8, 16.2]
Less than 1 year	6.2%	[0.8, 34.8]	8.0%	[1.4, 34.7]	22.9%	[4.2, 66.7]	2.6%	[0.3, 20.3]	20.1%	[11.1, 33.7]
1 to 5 years	93.8%	[65.2, 99.2]	38.8%	[11.5, 75.6]	13.4%	[1.1, 68.4]	15.7%	[4.4, 43.1]	38.8%	[23.9, 56.1]
More than 5 years ago	0.0%	[0.0, 0.0]	53.2%	[17.9, 85.6]	63.7%	[20.0, 92.4]	81.7%	[54.5, 94.3]	41.1%	[26.9, 57.0]
Not hired										
Lifetime	14.3%	[5.4, 32.6]	4.3%	[1.8, 9.8]	8.7%	[3.3, 21.0]	12.4%	[5.7, 24.9]	11.3%	[8.0, 15.8]
Less than 1 year	50.3%	[7.9, 92.3]	34.9%	[5.4, 83.4]	28.2%	[4.5, 76.4]	50.8%	[14.4, 86.4]	33.6%	[18.2, 53.6]
1 to 5 years	49.7%	[7.7, 92.1]	24.9%	[3.7, 74.2]	62.4%	[16.4, 93.4]	25.2%	[6.7, 61.4]	39.3%	[23.4, 57.9]
More than 5 years ago	0.0%	[0.0, 0.0]	40.2%	[8.1, 83.7]	9.4%	[0.7, 62.3]	24.0%	[4.9, 65.9]	27.0%	[15.0, 43.8]
Verbally harassed at work by coworkers or supervisor										
Lifetime	13.7%	[5.7, 29.4]	25.7%	[14.2, 42.0]	13.7%	[6.9, 25.4]	14.0%	[8.5, 22.3]	19.4%	[14.9, 24.9]
Less than 1 year	17.2%	[1.3, 76.2]	23.5%	[7.2, 54.7]	25.2%	[7.9, 57.1]	12.5%	[3.6, 35.5]	24.4%	[14.3, 38.6]
1 to 5 years	38.4%	[6.4, 85.1]	46.8%	[17.6, 78.3]	54.5%	[22.0, 83.5]	46.1%	[22.1, 72.1]	38.9%	[26.1, 53.6]
More than 5 years ago	44.4%	[7.9, 88.1]	29.7%	[9.2, 63.9]	20.3%	[4.1, 60.3]	41.4%	[18.8, 68.3]	36.6%	[23.6, 52.0]

	LBTQ LATINAS		GBTQ LATINOS		LBTQ WHITE WOMEN		GBTQ WHITE MEN		ALL LGBTQ ADULTS	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI		95% CI
Verbally harassed at work by customers or clients										
Lifetime	15.8%	[6.3, 34.3]	16.1%	[8.6, 27.9]	14.6%	[7.4, 26.8]	24.3%	[15.6, 35.8]	18.7%	[14.3, 24.2]
Less than 1 year	12.5%	[1.5, 58.0]	33.9%	[11.7, 66.5]	29.1%	[6.3, 71.7]	14.1%	[5.4, 32.2]	26.5%	[15.9, 40.7]
1 to 5 years	67.5%	[18.5, 95.0]	36.6%	[12.6, 69.8]	53.8%	[20.8, 83.7]	41.8%	[19.4, 68.3]	41.8%	[28.1, 56.9]
More than 5 years ago	20.0%	[1.7, 78.9]	29.5%	[9.0, 63.8]	17.1%	[4.3, 48.8]	44.1%	[21.6, 69.2]	31.7%	[19.4, 47.2]
HEALTH CARE										
Verbally harassed while accessing health care										
Lifetime	18.2%	[7.9, 36.6]	11.7%	[5.5, 23.2]	1.4%	[0.3, 5.7]	8.7%	[4.9, 15.0]	11.1%	[7.4, 16.2]
Less than 1 year	41.9%	[7.8, 86.1]	15.8%	[2.2, 61.0]	39.5%	[25.1, 56.0]	9.2%	[1.7, 37.5]	29.5%	[12.8, 54.3]
1 to 5 years	31.7%	[5.2, 79.6]	37.2%	[8.5, 79.0]	0.0%	[0.0, 0.0]	43.2%	[16.9, 74.0]	30.9%	[15.7, 51.7]
More than 5 years ago	26.4%	[4.4, 73.7]	47.0%	[13.8, 83.0]	60.5%	[44.0, 74.9]	47.6%	[20.9, 75.8]	39.6%	[21.5, 61.2]
Denied or provided inferior health care										
Lifetime	16.4%	[7.2, 33.1]	6.4%	[2.6, 14.7]	3.5%	[1.3, 9.5]	13.0%	[7.8, 20.8]	11.7%	[8.5, 16.0]
Less than 1 year	41.9%	[8.4, 85.0]	20.1%	[3.0, 66.7]	74.1%	[6.7, 99.1]	45.8%	[22.0, 71.7]	37.8%	[22.9, 55.4]
1 to 5 years	33.6%	[8.8, 72.6]	79.9%	[33.3, 97.0]	25.9%	[0.9, 93.3]	30.3%	[10.3, 62.2]	37.4%	[23.5, 53.7]
More than 5 years ago	24.5%	[3.9, 72.1]	0.0%	[0.0, 0.0]	0.0%	[0.0, 0.0]	23.9%	[9.4, 48.9]	24.8%	[12.3, 43.7]
Avoided health care provider in past 12 months to avoid…										
Being threatened or attacked	5.0%	[1.2, 18.5]	16.0%	[6.1, 35.5]	6.4%	[2.0, 18.6]	3.7%	[1.0, 12.0]	7.5%	[4.6, 12.2]
Unfair treatment	11.4%	[4.3, 27.2]	16.6%	[7.6, 32.4]	6.9%	[2.3, 19.0]	6.1%	[2.6, 13.8]	10.9%	[7.6, 15.3]
RELIGIOUS AND SPIRITUAL COMMUNITIES										
Discouraged from pursuing religion										
Lifetime	4.0%	[0.9, 16.3]	6.3%	[2.2, 16.8]	2.8%	[1.0, 7.9]	9.4%	[3.9, 20.9]	6.9%	[4.3, 11.0]
Less than 1 year	0.0%	[0.0, 0.0]	5.3%	[0.3, 51.5]	52.8%	[4.0, 96.8]	58.3%	[17.8, 90.0]	46.0%	[23.1, 70.7]
1 to 5 years	89.0%	[2.9, 100.0]	58.9%	[9.5, 95.2]	17.7%	[0.5, 89.7]	11.1%	[2.1, 42.7]	25.9%	[10.7, 50.4]
More than 5 years ago	11.0%	[0.0, 97.1]	35.8%	[3.7, 88.9]	29.5%	[1.0, 94.5]	30.6%	[7.2, 71.6]	28.1%	[13.8, 48.8]
Avoided religious and spiritual practices in past 12 months to avoid…										
Being threatened or attacked	23.3%	[12.1, 40.3]	12.7%	[6.0, 24.8]	1.5%	[0.4, 6.3]	14.8%	[7.2, 28.0]	14.9%	[10.8, 20.3]
Unfair treatment	23.4%	[12.1, 40.3]	15.7%	[7.2, 30.9]	21.7%	[8.5, 45.2]	15.8%	[8.1, 28.7]	19.3%	[14.4, 25.2]

	LBTQ LATINAS		GBTQ LATINOS		LBTQ WHITE WOMEN		GBTQ WHITE MEN		ALL LGBTQ ADULTS	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI		95% CI
RACISM										
Treated unfairly or poorly as a person of color while living in Los Angeles County	45.7%	[29.5, 62.9]	25.0%	[13.4, 41.8]	-	-	-	-	-	-

Source: 2023 Lived Experiences in Los Angeles County Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.
Note: Estimates are based on self-reported data by a random sample of 9,372 Los Angeles County adults, representative of the adult population in Los Angeles County. The 95% confidence intervals (CI) represent the variability in the estimate due to sampling; the actual prevalence in the population, 95 out of 100 times sampled, would fall within the range provided.

Table A6. LGBTQ adults (ages 18+) experiences with harassment, violence, and law enforcement based on sexual orientation and gender identity in Los Angeles County by race/ethnicity and Gender, LELAC 2023

	LBTQ LATINAS		GBTQ LATINOS		LBTQ WHITE WOMEN		GBTQ WHITE MEN		ALL LGBTQ ADULTS	
	%	95%CI	%	95%CI	%	95%CI	%	95%CI	%	95%CI
VERBALLY HARASSED BY STRANGERS AT LGBTQ PLACE OR EVENT										
Lifetime	20.0%	[9.9, 36.4]	18.1%	[8.6, 34.1]	19.5%	[10.4, 33.5]	32.6%	[23.7, 42.9]	22.6%	[18.1, 27.8]
Less than 1 year	26.3%	[7.7, 60.3]	15.3%	[3.9, 44.7]	19.3%	[4.7, 53.6]	23.9%	[10.6, 45.4]	23.1%	[15.3, 33.3]
1 to 5 years	53.5%	[19.6, 84.4]	45.4%	[12.6, 82.8]	49.6%	[20.5, 79.0]	42.5%	[26.7, 60.1]	46.6%	[34.8, 58.7]
More than 5 years ago	20.2%	[3.5, 64.1]	39.2%	[11.3, 76.6]	31.1%	[11.2, 61.7]	33.6%	[19.0, 52.1]	30.3%	[20.9, 41.7]
VERBALLY HARASSED BY STRANGERS IN PUBLIC										
Lifetime	28.0%	[15.7, 44.8]	33.7%	[20.9, 49.3]	26.8%	[15.7, 41.7]	39.0%	[29.1, 49.7]	31.8%	[26.4, 37.7]
Less than 1 year	23.3%	[7.7, 52.6]	22.3%	[7.8, 49.4]	31.9%	[12.8, 59.8]	18.5%	[10.0, 31.7]	26.1%	[18.2, 35.9]
1 to 5 years	57.0%	[27.0, 82.6]	55.2%	[29.6, 78.4]	43.1%	[19.1, 70.9]	44.9%	[27.9, 63.1]	45.6%	[35.2, 56.4]
More than 5 years ago	19.7%	[4.8, 54.3]	22.5%	[7.6, 50.6]	25.0%	[9.2, 52.3]	36.6%	[22.1, 54.0]	28.3%	[19.6, 39.0]
VICTIMIZATION										
Mugged, threatened with a weapon, or assaulted (lifetime)	33.2%	[16.6, 55.5]	40.4%	[22.7, 61.2]	22.6%	[3.1, 72.7]	55.5%	[25.8, 81.7]	38.7%	[28.8, 49.6]
Had household property intentionally damaged or destroyed (lifetime)	43.0%	[24.4, 63.9]	50.2%	[31.0, 69.4]	19.3%	[2.2, 71.9]	14.5%	[4.5, 38.2]	42.1%	[32.0, 52.9]
LOCATIONS AVOIDED IN PAST 12 MONTH TO AVOID THREATS TO SAFETY										
LGBTQ bars, nightclubs or events, including Pride	10.7%	[3.7, 27.2]	14.0%	[4.4, 36.3]	3.3%	[0.2, 31.4]	28.2%	[5.2, 73.8]	16.0%	[9.6, 25.3]
Other LGBTQ organizations or businesses	8.0%	[2.1, 26.2]	1.2%	[0.2, 5.4]	0.0%	[0.0, 0.0]	28.2%	[5.2, 73.8]	8.1%	[4.0, 15.8]
Restaurants or stores	21.6%	[10.6, 38.9]	17.5%	[8.2, 33.3]	3.0%	[0.6, 14.0]	13.1%	[6.4, 24.8]	14.3%	[10.3, 19.4]

	LBTQ LATINAS		GBTQ LATINOS		LBTQ WHITE WOMEN		GBTQ WHITE MEN		ALL LGBTQ ADULTS	
	%	95%CI	%	95%CI	%	95%CI	%	95%CI	%	95%CI
Public parks or beaches	13.0%	[6.1, 25.5]	11.7%	[4.3, 27.9]	16.0%	[8.6, 27.9]	12.2%	[5.7, 24.2]	15.7%	[11.5, 21.0]
Other places of entertainment, including theatres, stadiums, and amusement parks	6.5%	[2.1, 18.6]	16.9%	[7.8, 32.9]	3.6%	[0.9, 13.6]	12.9%	[6.1, 25.3]	13.2%	[9.2, 18.5]
Public transportation	9.5%	[4.0, 21.1]	12.0%	[4.6, 27.6]	17.2%	[9.4, 29.2]	15.9%	[8.3, 28.3]	13.7%	[9.9, 18.8]
HOW OFTEN DO YOU FEEL SAFE IN YOUR NEIGHBORHOOD										
None of the time	0.8%	[0.1, 5.7]	12.0%	[3.6, 33.2]	0.0%	[0.0, 0.0]	1.1%	[0.3, 4.4]	3.9%	[1.8, 8.3]
Some of the time	45.9%	[30.3, 62.3]	36.7%	[23.2, 52.8]	22.4%	[12.3, 37.1]	10.2%	[5.8, 17.1]	25.1%	[20.1, 30.8]
Most of the time	36.5%	[22.4, 53.3]	34.2%	[22.5, 48.2]	67.2%	[51.6, 79.8]	67.8%	[57.9, 76.3]	51.5%	[45.4, 57.5]
All of the time	16.8%	[7.5, 33.3]	17.1%	[9.0, 30.2]	10.4%	[4.4, 22.8]	21.0%	[14.1, 30.1]	19.5%	[15.0, 25.0]
Most or all of the time	53.3%	[37.0, 68.9]	51.3%	[36.2, 66.2]	77.6%	[62.9, 87.7]	88.8%	[81.7, 93.3]	71.0%	[65.0, 76.4]
INTERACTION WITH LAW ENFORCEMENT										
Verbally harassed	11.5%	[4.7, 25.4]	16.5%	[6.8, 34.6]	3.7%	[1.3, 9.9]	12.2%	[5.9, 23.6]	16.7%	[12.2, 22.5]
Physically harassed	4.8%	[1.1, 19.2]	7.7%	[1.6, 29.3]	2.8%	[1.0, 7.8]	4.9%	[2.2, 10.6]	5.8%	[3.4, 9.7]
Sexually harassed/assaulted	5.3%	[1.4, 18.5]	0.0%	[0.0, 0.0]	2.0%	[0.6, 6.5]	1.5%	[0.3, 6.6]	3.0%	[1.3, 6.8]
Solicited for sex	4.0%	[0.7, 18.8]	1.9%	[0.3, 12.9]	0.0%	[0.0, 0.0]	1.0%	[0.1, 7.2]	2.6%	[1.0, 6.6]

Source: 2023 Lived Experiences in Los Angeles County Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Note: Estimates are based on self-reported data by a random sample of 9,372 Los Angeles County adults, representative of the adult population in Los Angeles County. The 95% confidence intervals (CI) represent the variability in the estimate due to sampling; the actual prevalence in the population, 95 out of 100 times sampled, would fall within the range provided.

Table A7. Religion and spirtuality, mental health care, and civic engagement among LGBTQ adults (ages 18+) in Los Angeles County by race/ethnicity and gender, LELAC 2023

	LBTQ LATINAS		GBTQ LATINOS		LBTQ WHITE WOMEN		GBTQ WHITE MEN		ALL LGBTQ ADULTS	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
RELIGION AND SPIRTUALITY										
Religious person	20.1%	[9.2, 38.4]	20.3%	[10.2, 36.6]	8.2%	[2.9, 20.9]	11.8%	[6.8, 19.9]	13.5%	[9.8, 18.4]
Spirtual person	67.6%	[49.4, 81.7]	74.4%	[60.1, 84.8]	73.9%	[59.0, 84.7]	55.4%	[44.8, 65.5]	67.7%	[61.8, 73.0]
Religion very or somewhat important in life	53.0%	[36.3, 69.1]	46.4%	[31.7, 61.8]	48.4%	[32.0, 65.2]	31.0%	[22.1, 41.5]	41.5%	[35.5, 47.7]
Frequency of attending services										
More than once a week	2.9%	[0.5, 14.7]	3.3%	[0.6, 15.0]	0.0%	[0.0, 0.0]	1.6%	[0.5, 5.0]	1.5%	[0.6, 3.7]
Once a week	4.2%	[0.6, 24.8]	2.3%	[0.8, 6.4]	1.4%	[0.3, 6.1]	3.5%	[1.4, 8.2]	3.2%	[1.7, 5.9]
Once or twice a month	11.5%	[4.3, 27.6]	4.8%	[1.9, 11.4]	7.0%	[2.0, 22.0]	2.4%	[0.7, 8.0]	5.3%	[3.2, 8.5]
At least once a month	18.6%	[8.5, 35.9]	10.4%	[5.1, 20.0]	8.4%	[2.9, 22.4]	7.4%	[3.9, 13.5]	9.9%	[7.0, 13.9]
A few times a year	16.8%	[6.8, 35.7]	27.2%	[14.6, 45.0]	33.9%	[18.4, 53.8]	7.6%	[3.7, 15.3]	16.7%	[12.3, 22.3]
Seldom	33.4%	[19.8, 50.4]	26.3%	[15.0, 42.1]	18.3%	[9.0, 33.5]	31.2%	[22.1, 42.2]	26.9%	[21.9, 32.6]
Never	31.2%	[18.3, 48.0]	36.1%	[23.3, 51.2]	39.4%	[25.4, 55.4]	53.7%	[43.0, 64.1]	46.5%	[40.3, 52.7]
MENTAL HEALTH CARE										
Received mental health care in past 12 months	45.9%	[30.0, 62.7]	40.3%	[26.2, 56.2]	59.0%	[42.6, 73.7]	41.5%	[31.3, 52.4]	46.1%	[40.0, 52.3]
Should get mental health care among those who did not receive in the past 12 months	46.4%	[25.3, 68.9]	41.3%	[23.9, 61.1]	31.7%	[15.1, 54.8]	42.7%	[29.9, 56.7]	47.6%	[39.2, 56.1]
CIVIC ENGAGEMENT										
Participated in at least one form of civic engagement	74.3%	[55.3, 87.1]	66.7%	[50.1, 79.9]	86.4%	[73.5, 93.5]	89.8%	[80.2, 95.0]	82.6%	[76.9, 87.1]
Donated money	38.7%	[24.5, 55.1]	37.6%	[25.0, 52.2]	73.5%	[58.2, 84.6]	66.1%	[55.1, 75.7]	55.1%	[48.7, 61.3]
Signed petition	40.4%	[25.4, 57.4]	32.3%	[19.9, 47.7]	42.7%	[26.9, 60.2]	51.8%	[41.1, 62.2]	47.9%	[41.7, 54.1]
Posted on social media	52.5%	[35.8, 68.7]	32.4%	[20.4, 47.1]	39.5%	[25.1, 56.0]	50.2%	[39.6, 60.8]	47.3%	[41.1, 53.4]
Volunteered	21.9%	[10.5, 39.9]	13.3%	[7.2, 23.5]	45.8%	[29.5, 63.0]	20.1%	[13.6, 28.6]	27.2%	[22.1, 33.0]
Participated in a protest or march	10.8%	[5.2, 21.1]	7.7%	[3.6, 15.8]	21.7%	[8.9, 44.0]	13.3%	[7.4, 22.6]	15.9%	[12.0, 20.9]
Contacted a public official	16.5%	[7.5, 32.4]	10.3%	[3.6, 26.3]	21.8%	[12.2, 35.9]	31.8%	[23.0, 42.1]	24.1%	[19.6, 29.3]
Worked on a campaign	7.8%	[2.1, 24.9]	6.0%	[1.1, 26.3]	3.0%	[1.0, 8.3]	2.4%	[0.7, 8.1]	4.2%	[2.2, 8.0]
LOS ANGELES COUNTY IS A GOOD PLACE FOR LGBTQ PEOPLE TO LIVE										
Strongly disagree	5.5%	[0.8, 30.5]	8.7%	[3.2, 21.4]	1.6%	[0.3, 6.8]	1.9%	[0.4, 8.0]	3.8%	[1.9, 7.4]
Somewhat disagree	1.6%	[0.3, 7.9]	15.1%	[5.6, 34.9]	0.0%	[0.0, 0.0]	1.4%	[0.5, 4.5]	5.0%	[2.5, 9.5]

	LBTQ LATINAS		GBTQ LATINOS		LBTQ WHITE WOMEN		GBTQ WHITE MEN		ALL LGBTQ ADULTS	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Somewhat or strongly disagree	7.0%	[1.5, 27.8]	23.8%	[12.0, 41.8]	1.6%	[0.3, 6.8]	3.4%	[1.3, 8.7]	8.7%	[5.4, 13.8]
Neither agree nor disagree	12.3%	[5.2, 26.5]	12.0%	[5.8, 23.2]	5.9%	[1.6, 19.6]	6.9%	[2.5, 17.6]	9.7%	[6.7, 13.7]
Somewhat agree	54.5%	[37.7, 70.4]	37.0%	[23.2, 53.2]	30.9%	[18.9, 46.1]	36.5%	[26.3, 48.1]	38.6%	[32.7, 44.8]
Strongly agree	26.1%	[14.6, 42.3]	27.2%	[17.1, 40.4]	61.7%	[45.7, 75.5]	53.2%	[42.2, 63.8]	43.0%	[37.1, 49.2]
Somewhat or strongly agree	80.7%	[63.2, 91.0]	64.2%	[47.8, 77.8]	92.6%	[79.9, 97.5]	89.7%	[79.7, 95.1]	81.6%	[76.0, 86.1]
ACCEPTANCE OF LGBTQ PEOPLE IN NEIGHBORHOOD										
A lot	40.0%	[25.4, 56.7]	36.1%	[23.5, 51.1]	45.0%	[30.0, 61.0]	60.8%	[49.4, 71.2]	46.2%	[40.3, 52.2]
Some	36.1%	[22.5, 52.4]	50.8%	[35.9, 65.6]	49.9%	[34.0, 65.8]	31.9%	[22.2, 43.5]	40.6%	[34.7, 46.8]
Only a little	18.7%	[8.5, 36.2]	11.2%	[4.3, 26.1]	5.1%	[1.8, 13.5]	6.9%	[2.5, 18.0]	11.9%	[8.4, 16.6]
None at all	5.1%	[0.7, 29.1]	1.9%	[0.3, 12.8]	0.0%	[0.0, 0.0]	0.3%	[0.0, 2.4]	1.3%	[0.3, 5.4]
Only a little or none at all	23.8%	[11.8, 42.4]	13.1%	[5.6, 27.8]	5.1%	[1.8, 13.4]	7.3%	[2.7, 18.1]	13.2%	[9.4, 18.3]

Source: 2023 Lived Experiences in Los Angeles County Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Note: Estimates are based on self-reported data by a random sample of 9,372 Los Angeles County adults, representative of the adult population in Los Angeles County. The 95% confidence intervals (CI) represent the variability in the estimate due to sampling; the actual prevalence in the population, 95 out of 100 times sampled, would fall within the range provided.