

# 2009/2010 Winter Newsletter QUEENS PRIDE HOUSE



As the LGBTQ Center of Queens, we strive to create a safe and nurturing space in the Borough of Queens where lesbian, gay, bisexual, and transgender people will be empowered to reach their full potential. Pride House offers social services and referral in areas of counseling, youth services, substance abuse, immigration, employment, health care, and legal assistance. Pride House also offers a Library / Media Center with material about or of interest to the LGBT communities, and sponsors social, cultural and multicultural events and activities.

## Survivors of Anti-Transgender Violence Speak Out!



Violence against transgender people occurs at an alarming rate, and over the summer we were alarmed by the increase in violence against transgender women in Queens. On June 19, 2009, Leslie Mora was attacked by two men while walking home along Roosevelt Avenue. During the attack the men yelled homophobic slurs at her, and she was beaten with a belt. On July 8, 2009 Carmella Etienne (center picture above) was brutally assaulted by several men in St. Albans when walking home. When she threatened to call the police the men responded “The police don’t care about you, they won’t do anything to us.”

Partnering with the Transgender Legal Defense and Education Fund, NYAGRA, The Anti-Violence Project, The Empire State Pride Agenda, and Make the Road New York we created two public forums to raise awareness around the violence, to stand in solidarity with survivors of violent attacks, and provide transgender people with information on how to protect themselves. The first event occurred at the Brooklyn Law School on Wednesday October 7th and in addition to local community leaders the mother, brother, and friends of Latisha Green a transgender woman from Syracuse who was murdered in November 2008 spoke about Latisha and her murder trial. The evening focused on looking at the culture of violence against transgender women of color within the state of New York.

The second event a week later on Tuesday October 13<sup>th</sup> was here at Queens Pride House and was focused on the violence in the borough, and providing transgender and other gender nonconforming individuals with strategies and knowledge to help protect themselves when interacting with the police, and the legal system. Carmella one of the attacked Queens residents spoke about the attack, the aftermath, and called the Queens community to come together to speak out against violence against transgender people.

The Queens District Attorney will be prosecuting both Leslie and Carmella’s attacks as hate crimes.

## a note from the program coordinator:

2009 has been a busy year for us here at Queens Pride House. We've added new groups like The 20's a social group for young gay/bi/queer men, and our Trans Empowerment group, expanded our drop in hours to over 40 hours each week, and started offering a monthly professional development training for service providers to gain skills to better serve our community.

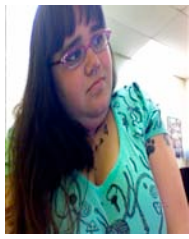
This year has also brought with it some incredible events and partnerships, like the forums you read about on the previous page, or a workshops on issues like LGBT immigration, marriage equality, domestic violence, hate crimes, the Queens Queer Cultural Festival, National Latino AIDS Awareness Day (see pg. 7) and the completion of the 2009 Queens LGBT Health Needs Assessment which you can read more about on the next page. Happy Holidays from all of us here at Queens Pride House & we look forward to seeing you next year!

-Sassafras Lowrey  
Program Coordinator

## Queens Pride House Staff



**Daniel Castellanos**  
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## Queens Pride House Board of Directors



### Queens Pride House Board of Directors:

(left to right) Rolston Watts (Executive Member), Charles Ober (Treasurer), Audwin Edwards, Antoine B. Craigwell (Secretary), Claudia Cortes.

(not pictured) Mark Ahumada LCSW (President), Connie Idavoy (Vice President), Sam Esposito.

# 2009 Queens LGBT Health Needs Assessment

This year Queens Pride House completed a Health Needs Assessment of LGBT Queens residents and service providers. This project was made possible by a grant from the New York State Lesbian, Gay, Bisexual and Transgender Health and Human Services Network as well as support from New York City Council Honorable Members Helen Sears and John C. Liu, members of the Health Committee.

This needs assessment is the result of the team work of a committed group of individuals in academia and in the community: Columbia University faculty members Drs. Mari Millery, Ilan H. Meyer, Theo Sandfort, and Patrick A. Wilson; Columbia University students Sara Shoener, Eustace Hsu, Jason Kwong, and Joey Nicholson; Hunter College, City University of New York graduate student Erica Sullivan; Lehman College, City University of New York student Briana Urbina; QPH staff Daniel Castellanos, Sassafra Lowrey, Refugio Ramos, Mauricio Fino, and Henry Peralta.


This project would not have been possible without the participation of the following organizations: SAGE/Queens, the Hispanic AIDS Forum (HAF)/Queens, APICHA (Asian & Pacific Islander Coalition on HIV/AIDS), the LGBT Community Center, Callen-Lorde Community Health Center, Queens College (City University of New York), and MIC-Women's Health Services (Public Health Solutions). QPH would like to extend a special thank you to the management at the Albatross, Friends Tavern, Bar Los Recuerdos, Music Box, Lavish Lounge and Crescent Lounge.

Bellow is the Executive Summary of the Needs Assessment, along with some of the key findings. A PDF version of the full report is available for download at our website [www.QueensPrideHouse.org](http://www.QueensPrideHouse.org)

## **Executive Summary:**

It is the mission of Queens Pride House (QPH) to create a safe and nurturing space where LGBT persons could aspire to their full potential. To achieve this goal, QPH seeks to address the impact of social, economic, and legal barriers to basic needs that underlies health disparities related to sexual orientation or gender identity (GLMA, 2001). QPH recognizes that to do so requires systematic information about the health and social experiences of the LGBT communities. This needs assessment reflects the priority and value QPH places on evidence-based research to develop and advocate for more services and funding and to assist in the formulation of specific policy agendas.

In 1999, QPH conducted the first needs assessment specifically for LGB residents of Queens County and found lack of awareness of available services and the perceived absence of services to be the main barriers to accessing health and social services. One decade later, QPH presents findings on the health and social status of LGB Queens residents, the health and social service needs of LGB Queens residents, consumer and provider perspectives on barriers to accessing services in Queens, the characteristics of LGB appropriate services, as defined by LGB residents and service providers in Queens, and the organizational capacity of agencies to provide LGB appropriate services.



The 2009 Needs Assessment prioritized community partnerships where representatives from community-based organizations, LGBT Queens residents, health care organizations, and New York City Council provided input as community stakeholders. This document reports on major findings of the needs assessment study, generously funded by the New York State Department of Health through the New York State Lesbian, Gay, Bisexual, and Transgender Health and Human Services Network, and supported by New York City Council Members Helen Sears and John C. Liu.

The project was comprised of three primary data collection components and two secondary data components. The primary data collection components were a community forum of stakeholders in Queens, a survey of LGBT residents in Queens (QPH09), and a survey of service providers. The secondary data collection consisted of an analysis of data from the New York City 2007 Community Health Survey (CHS07) and previous health and health behavior community surveys administered by QPH in 2007 and 2008 on LGBT Queens residents' health literacy, specifically regarding HIV/STI testing, hepatitis A, B and C, and knowledge of the NYC Department of Health and Mental Hygiene testing clinics (QPH07-08). These data sources were complemented with information from the Centers for Disease Control, the Gay and Lesbian Medical Association, and other scholarly sources of health information.

Though there is a dearth of information on the health and social needs of LGBT persons, findings presented here confirm previous studies that demonstrate health disparities related to sexual orientation or gender identity. Additionally, the unique needs of Queens LGBT communities are visible in the intersections of race/ethnicity, sexual orientation, gender identity, nationality status and other demographic factors. Emphasizing the dynamism and diversity among LGBT communities, findings affirm differences by gender and nationality status. For example, there were differences by gender on services considered most important to be specifically designed for LGBT individuals, such as couples counseling and HIV testing. Although our study design and sample preclude us from extrapolating our results to the entirety of LGBT Queens residents, respondents were representative of QPH's current clients. In fact, half of the participants (50.0%) in the QPH09 survey lived in Jackson Heights, Woodside, Astoria, Elmhurst, Forest Hills, or Long Island City, QPH's service area. Despite these limitations, findings can provide baseline information for the development of targeted interventions for LGBT subgroups currently served by QPH.

While LGBT persons present health, social, and cultural needs similar to those of heterosexual and gender normative individuals, there are barriers to meeting health and social needs, such as discrimination, lack of health provider sensitivity, and outright hostility. For example, LGBT individuals often report experiencing discrimination when attempting to access health care services, and among LGBT Queens residents, 13.8% of participants reported having been treated inappropriately by health care providers based on their sexual orientation and/or gender identity (QPH09). Moreover, issues of cultural competency cause many LGBT individuals to avoid or delay care or to receive inappropriate or inferior care. QPH09 Needs Assessment data confirmed that a considerable percentage of individuals do not disclose their sexual orientation to their primary care physician as a standard practice, particularly among lesbian, bisexual or queer women (36%) (QPH09).

Findings from this needs assessment indicate health and social service areas for improvement and further research, as well as opportunities to improve quality of life and health outcomes for LGBT Queens residents. For example, this report identifies gaps in access to health services that address risk factors for leading causes of premature death and life threatening situations, e.g., suicide prevention, nutrition, and HIV testing. Additionally, services found to have high levels of unmet need among LGBT Queens residents were the same services more likely to be accessed outside Queens, e.g., mental health services, legal services, couples counseling and HIV/STI testing. It is a goal of QPH that these findings provide a starting point for developing community standards of practice to serve Queens LGBT individuals and an opportunity to enhance the quality of life and health outcomes of LGBT persons by providing evidence-based research upon which further advocacy and policy development can be grounded.



## Key Findings

### SOCIAL STATUS

- Men who identified as gay, bisexual, queer or had same sex sexual behavior in the last 12 months (MSM) had higher education and income than women who identified as gay, bisexual, queer or had same sex sexual behavior in the last 12 months (WSW), heterosexual men and heterosexual women (CHS07; QPH09).
- Over a third (35.2%) of respondents were born outside the US, representing 28 different countries and Puerto Rico, predominantly in Latin America (QPH09).
- Substantial percentages of respondents did not rely on their parents or siblings for social support and had never talked about sexual orientation with their fathers (46.7%), mothers (27%), or siblings (18.9%) (QPH09).
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### ACCESS TO HEALTH CARE

- WSW were more likely to be uninsured in the previous 12 months than MSM and less likely to have private insurance than MSM, heterosexual men and heterosexual women (CHS07).
- MSM were more dependent on Medicare while WSW were more dependent on Medicaid than MSM, heterosexual men and heterosexual women (CHS07).
- WSW were significantly less likely to have visited their primary care provider in the previous 12 months than heterosexual women (CHS07).
- WSW were also more likely not to receive needed medical care, dental care, or prescriptions in the previous 12 months than MSM, heterosexual men and heterosexual women (CHS07).

A considerable percentage of individuals do not disclose their sexual orientation to their primary care provider as a standard practice, particularly among WSW (36%) (QPH09).

### HEALTH STATUS

- MSM reported better general health status than heterosexual men (CHS07).
- WSW had a significantly lower health status than MSM (QPH09).
- WSW born in the USA were significantly more likely to be obese than their immigrant counterparts (27.5% versus 11.4%) (CHS07).
- WSW were significantly less likely to have a pap smear in the past three years than heterosexual women (CHS07).
- HIV testing was significantly more common among LGB individuals than among heterosexuals, but close to 20% of MSM and 30% of WSW had never taken an HIV test (CHS07).
- US-born MSM were significantly more likely to have ever taken an HIV test than non-US-born MSM (84.0% versus 66.7%) (CHS07).
- WSW and MSM reported slightly higher levels of mental distress and depression diagnosis compared to their heterosexual peers (CHS07).
- WSW reported more frequent mental distress than MSM (23.0% versus 13.7%) (CHS07).
- Over one-quarter of LGB reported a history of diagnosed depression (CHS07).



## SERVICE UTILIZATION AND UNMET NEEDS

- Nearly half of respondents reported accessing primary care outside Queens (QPH09).
- More than twice as many respondents reported utilizing mental health services outside of Queens (22.9%) than in Queens (QPH09).
- Some of the services with higher levels of unmet need were the same services more likely to be accessed outside Queens, e.g., mental health services, legal services, couples counseling and HIV/STI testing (QPH09).

## BARRIERS

- Both LGBT Queens residents and Queens service providers identified lack of awareness, lack of LGBT-specific services, and concerns over privacy as the main barriers to accessing health and social services in Queens (QPH09).
- Lack of awareness and the perceived absence of services were the same barriers to access identified by QPH's 1999 Needs Assessment.

## IMPORTANCE OF LGBT-SPECIFIC SERVICES (QPH09)

- Overall, WSW considered having LGBT-specific services more important than MSM.
- Among MSM, findings indicate HIV/STI testing, HIV/STI treatment, sex education, sexual orientation support, primary care, and mental health services are important services to be specifically designed for LGBT individuals.
- Among WSW, gynecology services, HIV/STI testing, sexual orientation support, couples counseling, sex education and gender identity counseling are important services to be specifically designed for LGBT individuals.
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## CHARACTERISTICS OF LGBT APPROPRIATE SERVICES (QPH09)

- LGBT Queens residents prioritized staff knowledge and skills to provide LGBT appropriate services and LGBT appropriate organizational protocols and guidelines as important characteristics for services.
- Service providers mostly agreed on the importance staff knowledge and skills to provide LGBT appropriate services and had mixed priorities in terms of organizational policies, physical environment and program characteristics.

# El Tren 7 en via a la salud...



## Datos relevantes acerca del VIH/SIDA en las Comunidades Latinas

- Los residentes de Queens provenientes de América del Sur representan el grupo mayor de personas viviendo con VIH/SIDA en comparación con otras regiones
- Personas viviendo con VIH/SIDA en Queens por region de nacimiento : Europa, 168 (5%) ; Africa, 241 (7%); Asia, 270 (8%); América Central, 510 (15%); El Caribe, 907 (27%); América de Sur, 1,141 (35%); Oto, 83 (2%); Medio Oriente, 20 (1%)
- De los 14,285 residentes de Queens viviendo con VIH/SIDA al final de 2007, el 23% de ellos (3,340 personas) nacieron fuera de los Estados Unidos.

On Thursday October 15<sup>th</sup> Queens Pride House participated in the 7<sup>th</sup> annual National AIDS Awareness Day (NLAAD). Founded by, The Latino Commission on AIDS (LCOA), the Hispanic Federation NLAAD marks an opportunity to increase awareness of the devastating and disproportionate effects of AIDS in the Latino community.

Latinos, who represent approximately 13% of the total U.S. population, make up 18% of new HIV infections. Among Latinos, men make up the vast majority of new HIV infections (76%), but Latino women are also at disproportionate risk for HIV. They are infected with HIV at a rate four times greater than white women.

The Queens Event (cosponsored by: Positive Life, The Hispanic Federation, Latino Commission on AIDS, Hispanic Aids Form, AIDS Center of Queens County, and the Office of Assemblyman Jose Peralta) was called El Tren 7 En Via A Tu Salud, and focused along the 7 train line. In order to encourage testing amongst commuters testing vans were placed at the busiest subway stops, and was offered at local organizations like Elmhurst Hospital, and Queens Pride House.

In a press conference at the Roosevelt train station Assemblyman Jose Peralta was joined by members of the clergy, organizational leaders like QPH Executive Director Daniel Castellanos, as well as Miss Mundo Colombia to help spread the word to commuters about the importance of getting tested.

Over the course of the day a total of 213 people were tested!

## Queer Links Drop-in Center & Hotline:

Tuesday & Wednesday 10-6pm, Thursday & Friday 1-9pm,  
Saturday 1-7pm

Browse our library, use our computers & wifi, get health referrals & learn about upcoming events!

### Discussion Groups:

#### **Men's Group (English)**

Open to all English speaking  
Gay/Bi/Queer men  
1<sup>st</sup> & 3<sup>rd</sup> Thursdays 7-9pm

#### **Men's Group (Spanish)**

Open to all Spanish speaking  
Gay/Bi/Queer men  
2<sup>nd</sup> & 4<sup>th</sup> Thursdays 7-9pm

#### **Charla**

Latina Lesbian discussion group in  
partnership with Las Buenas Amigas  
3<sup>rd</sup> Tuesdays 7-9pm

#### **Trans Empowerment**

Open to all people of Transgender  
experience  
2<sup>nd</sup> & 4<sup>th</sup> Tuesdays 7-9pm

### Social Events

#### **Movie Night:**

Come enjoy an LGBTQ  
themed movie with your  
friends. Popcorn & Soda  
Provided  
2<sup>nd</sup> Fridays 7-9pm

#### **Queer TV:**

Come watch your favorite  
queer shows with your  
friends! Popcorn & Soda  
Provided Mondays 7:30-9pm

#### **Men's Potluck**

Bring your favorite dish to  
share, and eat dinner with  
your friends from the QPH  
men's groups.  
4<sup>th</sup> Friday 7-9pm

#### **The 20's**

Open to all Gay/Bi/Queer  
men aged 18-32.  
1<sup>st</sup> Tuesday 7-9pm

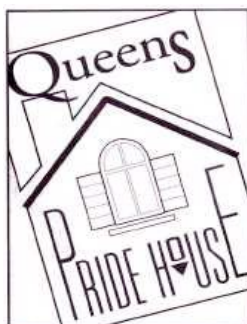
### Health & Education:

#### **Stay ALERT:**

Monthly professional  
development training  
for service providers  
Last Thursdays  
10am-noon

In this tough economic climate we can only continue our work with financial support from individuals like you. Help change the lives of LGBT individuals living in Queens. Checks can be made to "Queens Pride House" and contributions are tax-deductible.

**Please send donations to:**  
**Queens Pride House**  
**76-11 37<sup>th</sup> Ave. Suite 206**  
**Jackson Heights, New York**  
**11372**



**76-11 37<sup>th</sup> Ave. Suite 206**  
**Jackson Heights, New York**  
**718-429-5309**  
**[www.QueensPrideHouse.org](http://www.QueensPrideHouse.org)**