



Biden Administration Bisexual Health Policy Briefing

September 20, 2022 11am-12pm

US Department of Health and Human Services



Honoring Indigenous Peoples

We meet today on the unceded territory of the Piscataway and Nacotchtank (Anacostan) People.

The harms of colonization have resulted not only in the theft of ancestral lands and erasure of ancient cultures but also the marginalization of people based on gender expression, gender identity, and sexual orientation.

As we work to address the health disparities that impact the bisexual community, we acknowledge the intersectionality of Indigenous peoples in what we now call the United States who are also disproportionately impacted by a lack of health care funding, programming, and assistance.

White House Welcome

Hannah Bristol

Associate Director at
The White House Office of Public
Engagement



Bi+ Community Welcome and Introductions



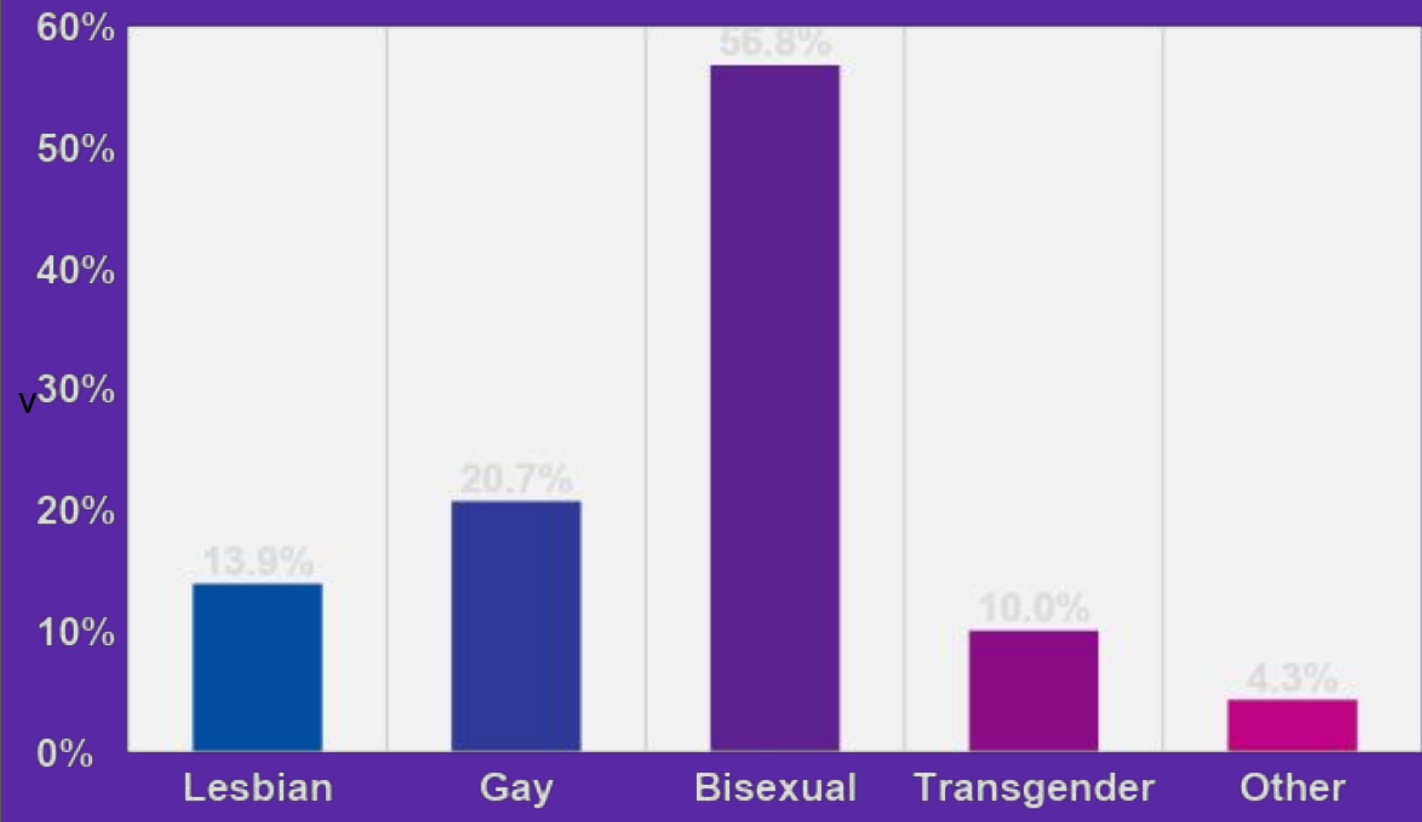


Bi+ Identity Defined

Ochs Definition: The potential to be attracted, romantically and/or sexually, to people of more than one gender, not necessarily at the same time, in the same way, or to the same degree.

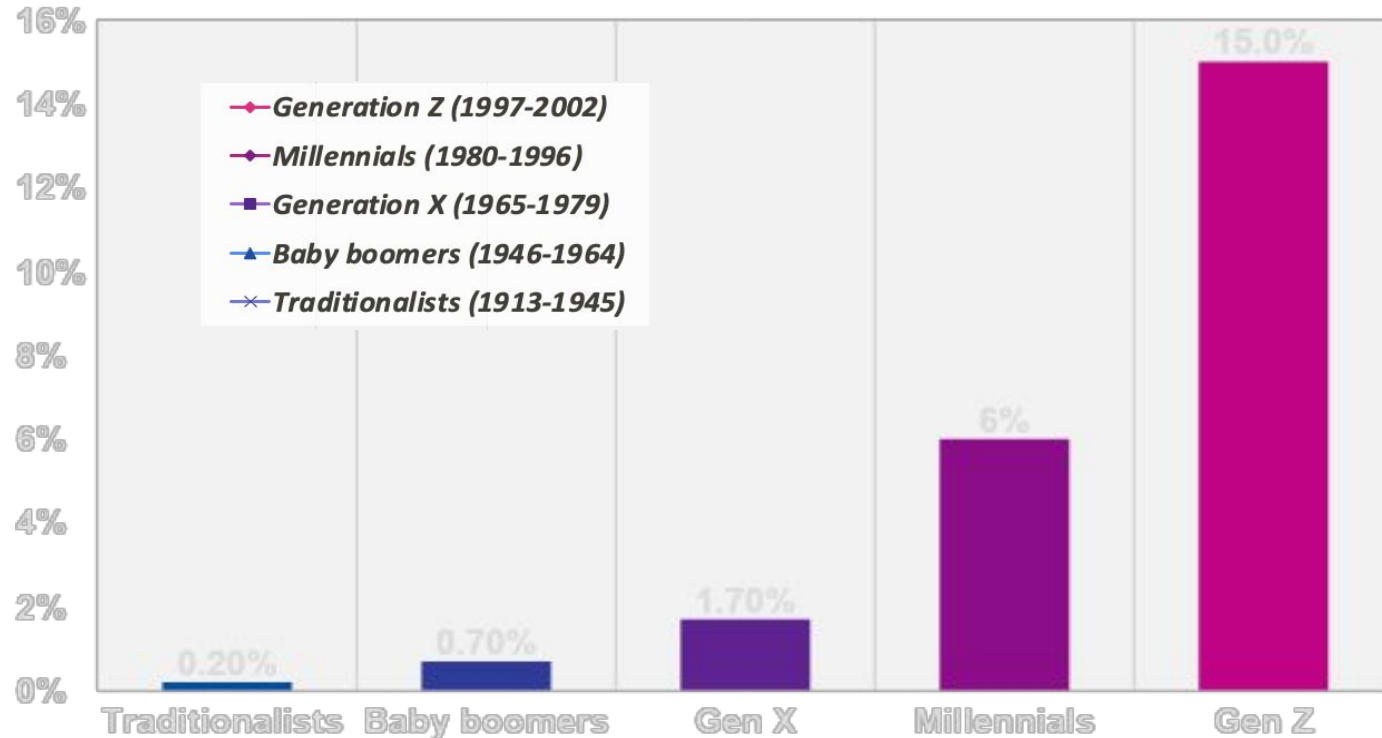
The “+” in “Bi+” holds space for other multisexual peoples who may identify as pansexual, omnisexual, etc.

Bisexuals
compose
the majority
of the
LGBTQ+
community



Gallup, 2021. Based on telephone interviews w a random sample of over 12,000 U.S. adults, aged 18 and older, living in all 50 states & DC. Each sample of national adults includes a minimum quota of 70% cellphone respondents and 30% landline respondents, with additional minimum quotas by time zone within region. Some respondents identify with multiple sexual orientations or gender identities.

An increasing percentage of people are identifying as bisexual with each generation



The Bi+ Community is Diverse

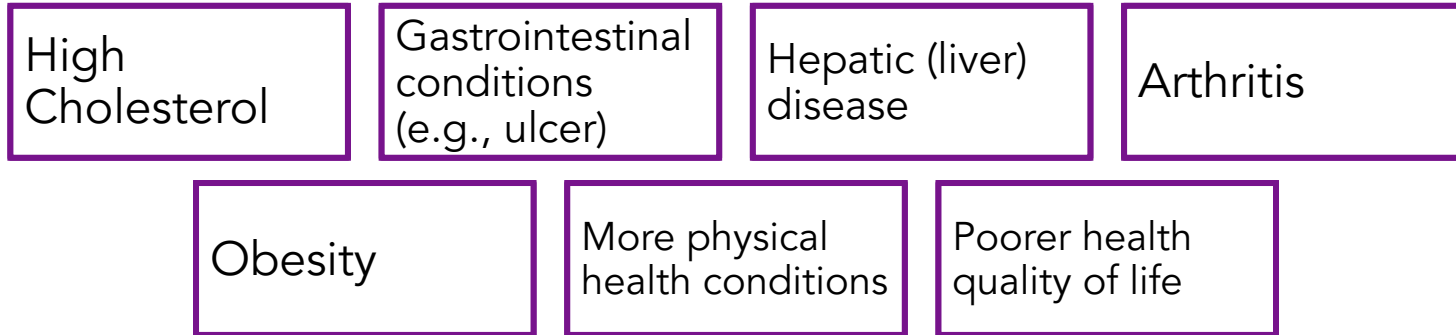




Bi+ Health Disparities

Bi+ Physical Health Disparities

Bisexual attractions, behavior, and identity are associated with poorer health compared to heterosexual people, including:



Bisexual transgender people have poorer health than bisexual cisgender people:



(Dyar, et al., 2019; Katz-Wise, Mereish, & Woulfe, 2017)

Bi+ Psychological / Behavioral Health Disparities

Depression

Anxiety

Suicidality

Substance use (heavy drinking, marijuana and other drug use, dependence)

HIV and other STIs

Well-being

(Bostwick, et al., 2010; Feinstein & Dyar, 2017; Ross, et al., 2018)

Why Are There Bi+ Health Disparities?

External Stressors

- Violence
- Discrimination
- Poverty
- Bi-erasure
- Binegativity
- Isolation

Internalized Stress

- Alienation
- Loneliness
- Internalized stigma
- Concealment

Health Disparities

- Physical health
- Psychological distress and disorders

(Feinstein, et al., 2020; Hatzenbuehler & Link, 2014; Katz-Wise, et al., 2017; Mereish, et al.; 2017; Meyer, 2003; Pachankis, et al., 2015; Rogers, et al., 2017; Ross, et al., 2010; Vencill, et al., 2017)

Why Are There Bi+ Health Disparities?

Structural Biphobia Leads
to Lack of Resources and
Data to Respond



Gaps in Bi+ Funding and Data

Bi+ Funding Gaps

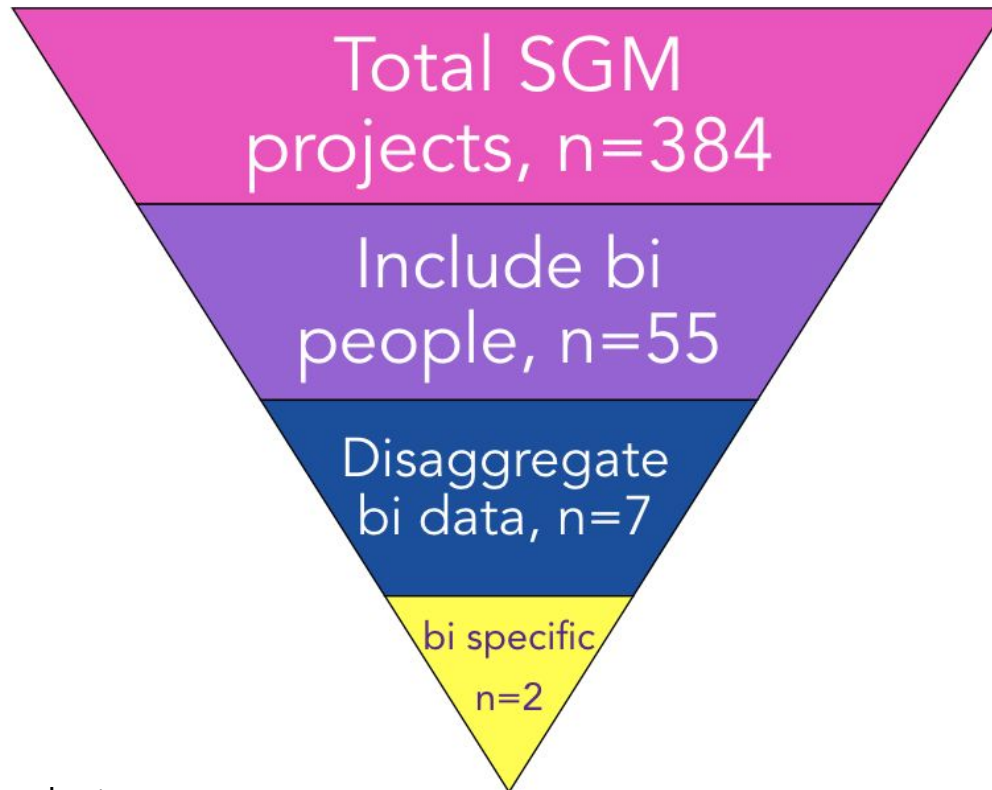
Distribution of Domestic Grant Dollars by Sexual Orientation, Gender Identity, and Sex Characteristics, 2019-2020



	2019		2020	
Trans People	\$36,121,652	24%	\$30,996,642	20%
Gay Men/Queer Men/MSM	\$4,720,338	3%	\$9,386,675	6%
Lesbians/Queer Women	\$7,738,595	5%	\$3,737,266	2%
GNC/Nonbinary People	\$5,376,891	4%	\$3,483,995	2%
Allies	\$5,409,019	4%	\$1,343,434	1%
Intersex People	\$2,057,195	1%	\$746,500	<1%
Two Spirit People	\$63,913	<1%	\$90,227	<1%
Bisexual People	\$301,608	<1%	\$58,333	<1%
Asexual People	\$10,000	<1%	\$0	0%

**This table excludes funds awarded for the purpose of regranting.*

Bi+ Funding Disparities



2022 Bi+ Policy Benchmarks: Health Equity Funding

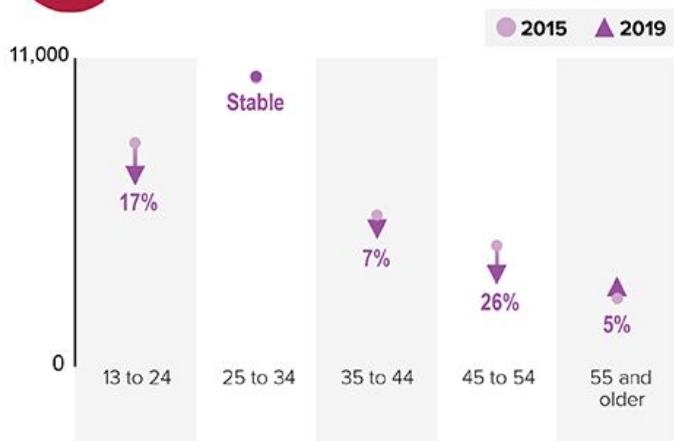
- Financial review to assess each HHS agency's budget for bisexual health and health disparities
- NIH RFA for intersectional community engaged bisexual health research
- HRSA RFA for bi+ trainings for health providers + systems
- Training to eliminate bias in NIH review process

Lack of Disaggregated Bi+ Health Data

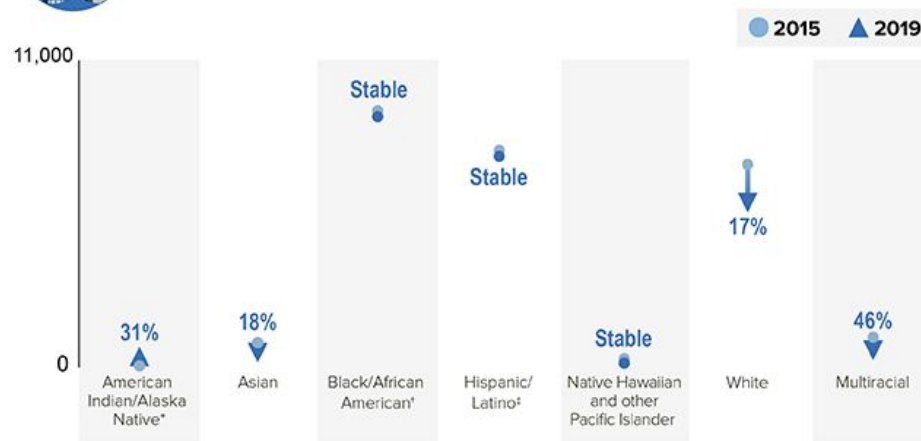
HIV Diagnoses Among Gay and Bisexual Men in the US and Dependent Areas, 2015-2019



Trends by Age



Trends by Race and Ethnicity



* Changes in subpopulations with fewer HIV diagnoses can lead to a large percentage increase or decrease.

† Black refers to people having origins in any of the Black racial groups of Africa. African American is a term often used for people of African descent with ancestry in North America.

‡ Hispanic/Latino people can be of any race.

2022 Bi+ Policy Benchmarks: Health Equity Data

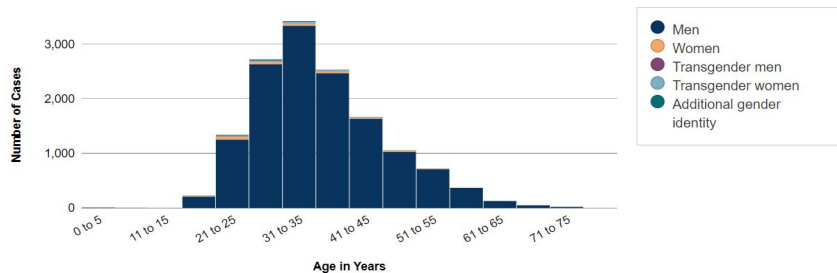
HHS to develop disaggregated sexual orientation and gender identity data reporting policy.



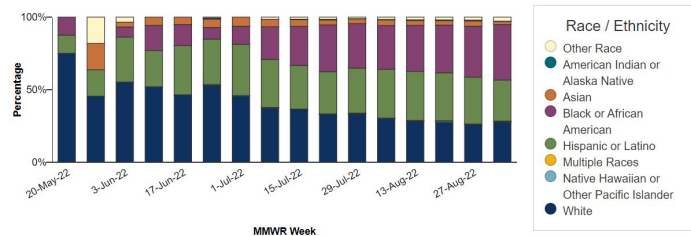
MPX: “Monkeypox” and Khafre Kujichagulia Abif’s Story

CDC MPX Reporting by Demographics

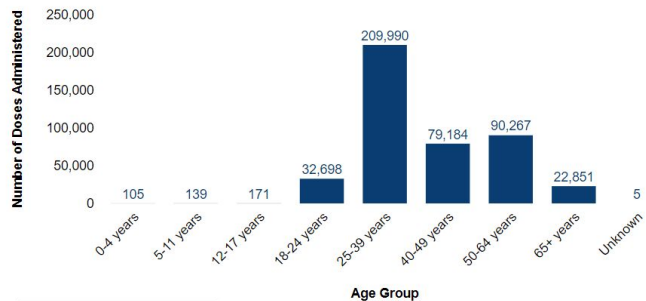
Monkeypox cases reported to CDC: Age and Gender



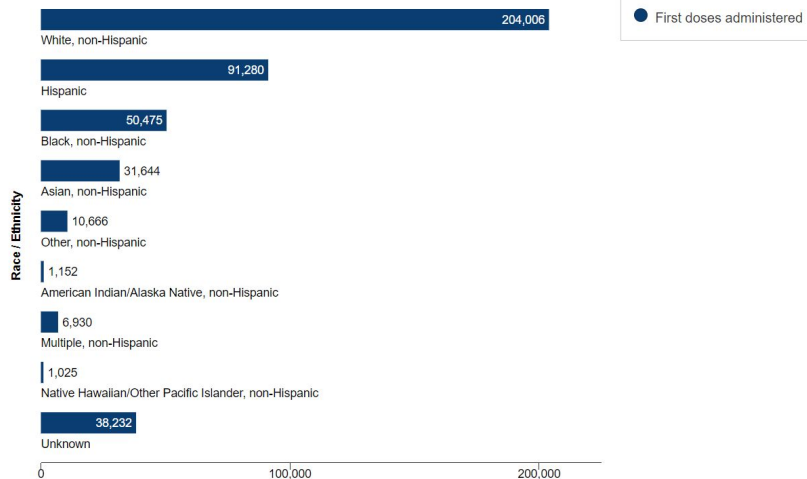
Monkeypox cases reported to CDC: Race/Ethnicity by Week



JYNNEOS Vaccine Doses Administered, by Age



JYNNEOS Vaccine Doses Administered, by Race/Ethnicity



Why We Need a Bi-specific MPX Approach

- HIV prevention, treatment, and care targeted to gay men or MSM (men who have sex with men) do not meet the needs of bisexual men.
- Lack of CDC monkeypox case and vaccination data reporting by disaggregated sexual orientation creates a gap in crucial epidemiological information that should be used to inform federal, state, and local responses to this public health emergency.
- Collecting accurate monkeypox data in bisexual populations requires improvement in electronic medical records sexual orientation data capture and associated training of health systems personnel.

2022 Bi+ Policy Benchmarks: MPX

- The CDC will add disaggregated sexual orientation and gender identity data to all monkeypox reporting.
- The CDC will develop and communicate guidance on best practices to ensure high quality monkeypox data collection, prevention efforts, treatment, and vaccination outreach in bisexual populations.
- In all health resources focused on “gay and bisexual men and other men who have sex with men,” the CDC will add a dedicated section on bisexual men.

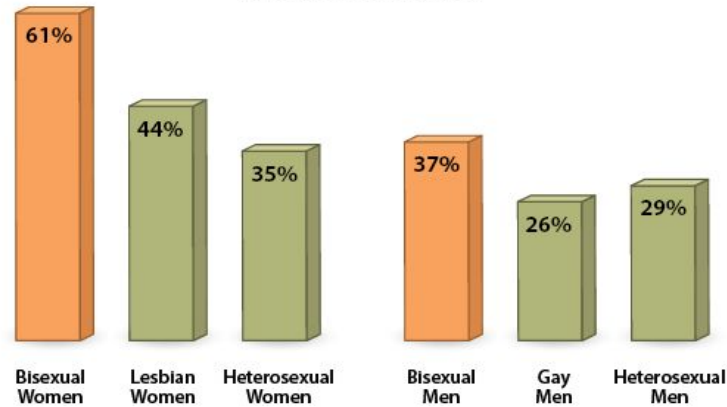


IPV: Intimate Partner Violence and Nicole Holmes's Story

Bisexual People Experience Disproportionate Rates of Intimate Partner Violence (IPV)

Figure 11: Bisexual People Experience High Rates of Intimate Partner Violence

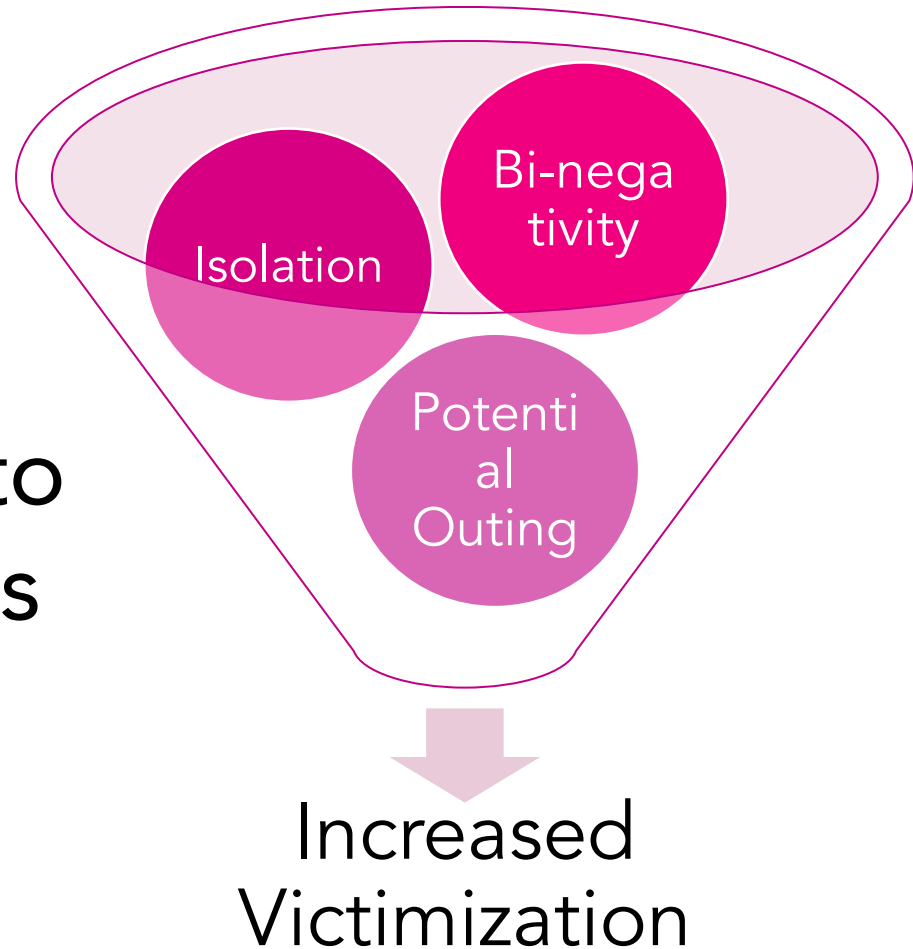
Percent of Respondents Experiencing Intimate Partner Violence, by Sexual Orientation



Source: Mikel L. Walters, Jieru Chen, and Matthew J. Breiding, "The National Intimate Partner and Sexual Violence Survey: 2010 Findings on Victimization by Sexual Orientation" (Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, January 2013), http://www.cdc.gov/violenceprevention/pdf/nisvs_sofindings.pdf.


54% of all 2015 USTS respondents report lifetime IPV.

Why are
bisexuals
subjected to
higher rates
of IPV?





IPV: Intimate Partner Violence and Diana Adams's Expertise




“Preventing and responding to gender-based violence wherever it occurs, and in all of its forms, has remained a cornerstone of the President’s career in public service”

White House Fact Sheet: Reauthorization of the Violence Against Women Act (VAWA), 2022

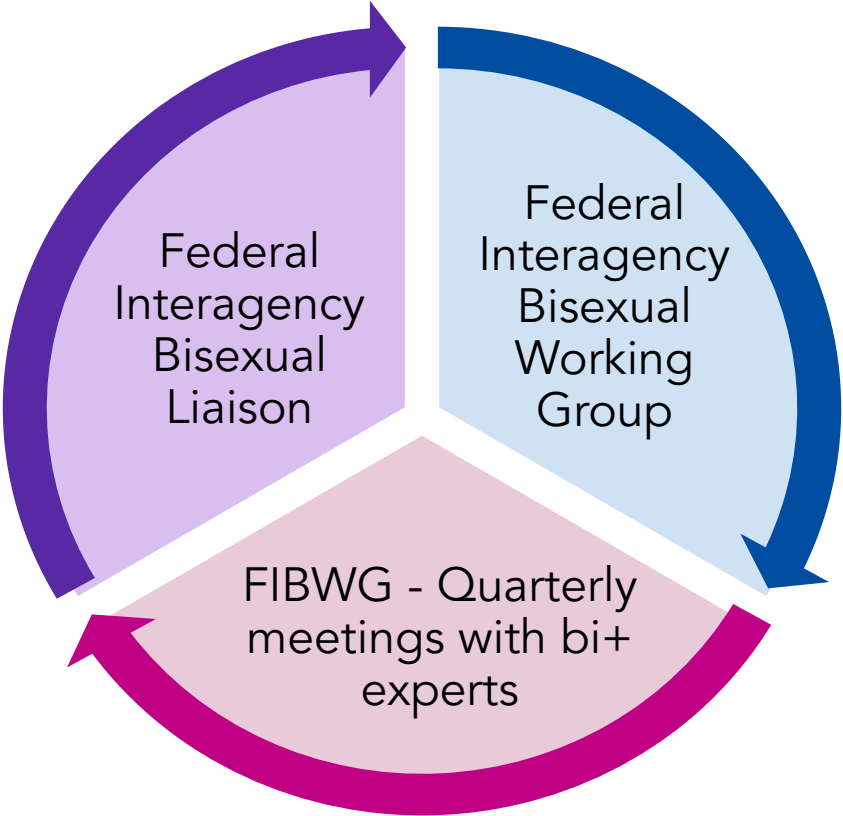
2022 Bi+ Policy Benchmarks: Intimate Partner Violence

- Funding for research on IPV in bi+ populations.
- Fact sheet about intersectional bi+ IPV disparities, cultural competency, and antidiscrimination policies.
- Required cultural competency training on serving bisexual IPV clients for service providers who receive federal funding.



Call-To-Action

Moving the Bi+ Health Agenda Forward



2022 Bi+ Policy Benchmarks Summary

1. Health Equity - Data and Funding

- a. Financial review to assess HHS budgets
- b. NIH RFA for bi+ health research
- c. HRSA RFA for bi+ healthcare trainings
- d. Training to eliminate bias in NIH review process
- e. HHS disaggregated SOGI data reporting policy

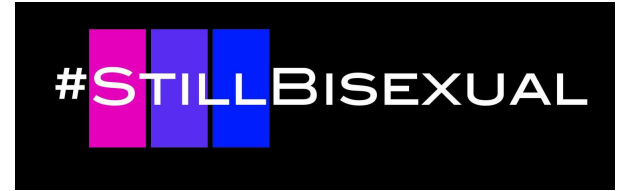
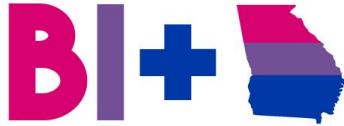
2. Monkeypox

- a. CDC to report monkeypox data by disaggregated sexual orientation
- b. CDC best practices guidance for bi+ monkeypox response
- c. CDC to add dedicated bisexual health recommendations to MPX resources

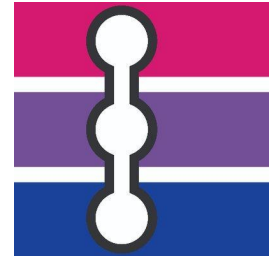
3. Intimate Partner Violence

- a. Fact sheet about intersectional bi+ IPV disparities
- b. Training on bisexual IPV clients for service providers

Bisexual Community 501(c)(3) Organizations



The Visibility





Looking
Toward
2023...



Discussion