

HOUSE OF REPRESENTATIVES

TWENTY-SECOND LEGISLATURE

COMMONWEALTH OF THE NORTHERN MARIANAS COMMONWEALTH

LEGISLATURE

P.O. BOX 500586 SAIPAN, MP 96950

CHRISTINA M.E. SABLAN
CHAIRPERSON
HEALTH AND WELFARE COMMITTEE

STANDING COMMITTEE REPORT NO. 22-49
DATE: June 2, 2022
RE: HOUSE BILL No. 22-87

The Honorable Edmund S. Villagomez
Speaker of the House of Representatives
Twenty-Second Northern Marianas
Commonwealth Legislature
Capitol Hill
Saipan, MP 96950

Dear Mr. Speaker:

Your Committee on Health and Welfare to which House Bill No. 22-87 was referred, titled:

“To prohibit discrimination on the basis of sex, gender identity, and sexual orientation, to be known as the CNMI Equality Act or Æktun Achá-Parehu or Alléghúl Aweewepagh of 2021.”

begs leave to report as follows:

I. RECOMMENDATION:

After considerable discussion, your Committee recommends that H. B. NO. 22-87 be passed by the House in its current form.

HOUSE CLERK'S OFFICE
RECEIVED BY *[Signature]*
DATE 06/02/22 TIME 4:24pm

II. ANALYSIS:

A. Purpose:

The purpose of House Bill No. 22-87 is to prohibit discrimination on the basis of sex, gender identity, and sexual orientation, to be known as the CNMI Equality Act or Āktun Achá-Parehu or Alléghúl Aweeweppagh of 2021 is to amend 1 CMC Section 26018, Amendment of Vital Records.

B. Committee Findings:

Your Committee finds that discrimination can occur on the basis of sexual orientation, gender identity, and gender expression. Each of these is considered a form of sex discrimination. Many lesbian, gay, bisexual, transgender, queer (or sometimes questioning) and others (LGBTQ+) have been subjected to a history and pattern of persistent, widespread and pervasive discrimination in accessing public accommodations, healthcare, employment, gender affirming identification documents, and services. Your Committee further finds that LGBTQ+ individuals in the Commonwealth of the Northern Mariana Islands have experienced this type of discrimination, which has caused painful and unnecessary hardship for LGBTQ+ individuals, especially for transgender people. Federal laws do not explicitly prohibit discrimination based on sexual orientation or gender identity in employment, housing, public accommodations, and more. It is crucial that federal, state, and local nondiscrimination laws are updated to ensure that LGBTQ+ people can participate fully in society and provide for themselves and their families.

Your Committee finds that in a landmark ruling issued on June 15, 2020, the U.S. Supreme Court held that an employer who fires or otherwise discriminates against an individual simply for being gay or transgender does so “because of . . . sex,” in violation of Title VII of the Civil Rights Act of 1964. Writing for the majority, Justice Gorsuch, joined by Chief Justice John Roberts and the Court’s four liberal Justices, ruled that it is unlawful under federal law for employers to discriminate against employees based on sexual orientation or gender identity.

Your Committee further finds that on January 20, 2021, President Joseph R. Biden Jr. issued an Executive Order on Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation. A portion of the executive order reads:

“Every person should be treated with respect and dignity and should be able to live without fear, no matter who they are or whom they love. Children should be able to learn without worrying about whether they will be denied access to the restroom, the locker

room, or school sports. Adults should be able to earn a living and pursue a vocation knowing that they will not be fired, demoted, or mistreated because of whom they go home to or because how they dress does not conform to sex-based stereotypes. People should be able to access healthcare and secure a roof over their heads without being subjected to sex discrimination. All persons should receive equal treatment under the law, no matter their gender identity or sexual orientation.

These principles are reflected in the Constitution, which promises equal protection of the laws. These principles are also enshrined in our Nation's anti-discrimination laws, among them Title VII of the Civil Rights Act of 1964, as amended (42 U.S.C. 2000e et seq.). In *Bostock v. Clayton County*, 590 U.S. ____ (2020), the Supreme Court held that Title VII's prohibition on discrimination "because of . . . sex" covers discrimination on the basis of gender identity and sexual orientation. Under *Bostock's* reasoning, laws that prohibit sex discrimination — including Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681 et seq.), the Fair Housing Act, as amended (42 U.S.C. 3601 et seq.), and section 412 of the Immigration and Nationality Act, as amended (8 U.S.C. 1522), along with their respective implementing regulations — prohibit discrimination on the basis of gender identity or sexual orientation, so long as the laws do not contain sufficient indications to the contrary."

The House Standing Committee on Health and Welfare hosted the Legislature's first CNMI Pride Talks in the House Chamber on Wednesday, June 30, 2021. The Pride Talks included a policy roundtable with leaders from LGBTQ+ organizations and a public forum that discussed the needs of the community and how the Legislature could assist in creating a more inclusive CNMI.

The Committee further finds that the CNMI ranks among the lowest in the nation for protective policies for the LGBTQ+ community. The Movement Advancement Project, which tracks LGBTQ+ policy across the country, ranks the CNMI a 2.5 on a 38.5 scale, with the upper end signifying the highest possible number of policies. The major categories of laws covered by the policy tally currently include:

1. Relationship and Parental Recognition: These laws pertain to relationship recognition and parental recognition rights, such as adoption and foster parenting, for LGBTQ people and parents.
2. Nondiscrimination: These laws pertain to relationship recognition and parental recognition rights, such as adoption and foster parenting, for LGBTQ people and parents.
3. Religious Exemptions: Religious exemption laws allow individuals, organizations, businesses, and others to opt out of existing laws and instead refuse to serve or work with people (including, but not limited to, LGBTQ people), if doing so would burden their religious beliefs.

4. LGBTQ Youth: These laws and school regulations protect LGBTQ students from discrimination and bullying in schools, from the harmful and dangerous practice of conversion "therapy," from discrimination in the child welfare system, and more.

5. Health Care: These laws pertain to the health and well-being of LGBTQ people, including their ability to access healthcare free from discrimination.

6. Criminal Justice: These laws pertain to the criminal justice system as it relates to LGBTQ people.

7. Identity Documents: These laws and policies allow transgender and nonbinary people to update the gender markers on their identity documents so that their identity documents reflect their gender identity. This can reduce the likelihood that they will experience harassment, discrimination, or even violence when asked to show an ID. These laws also govern what gender options are available to people updating their gender marker, and the processes by which people can legally change their name.

Your Committee further finds that the absence of explicit prohibitions against discrimination on the basis of sexual orientation and gender identity in the CNMI has created social and economic disparities and unequal opportunities to life, liberty, and the pursuit of happiness for LGBTQ+ individuals or individuals perceived to be LGBTQ+. This lack of protection promotes a culture of stigma and hate that negatively impacts the safety, health, and well-being of LGBTQ+ people, and has fostered systemic discrimination, including barriers to basic necessities such as healthcare, employment, and identification documents. Therefore, the purpose of this Act is to prohibit discrimination on the basis of sex, gender identity, and sexual orientation and explicitly state that no person shall be denied the equal protection of the laws or the enjoyment of civil rights, nor be discriminated against in the exercise thereof, on account of sex, gender identity, or sexual orientation. The protection extends specifically to employment, housing, residential real estate transactions, retail/wholesale operations, procurement of insurance, and sports.

Your Committee agrees with the intent and purpose of House Bill No. 22-87 and recommends its passage in its current form.

C. Public Comments/Public Hearing:

On June 2, 2022, the Committee received written testimony from the following:

- Edward Manibusan, CNMI Attorney General

“The Constitution protects persons against discrimination. Section 6 of Article 1 of the Commonwealth Constitution states that “[n]o person shall be denied the equal protection of the laws. No person shall be denied the enjoyment of civil rights or be discriminated against in the exercise thereof on account of race, color, religion, ancestry, or sex.” Using clear and express language, the Bill amplifies that the Equal Protection Clause extend protection to all persons against discrimination on the basis of sexual orientation, gender identity, and gender expression. The protection extends specifically to employment, housing, residential real estate transactions, retail/wholesale operations, procurement of insurance, and the administration of justice.”

The comment received has been attached as part of this committee report.

In a public meeting held on May 9, 2022, the Committee received written testimony and a petition from the following:

- Jeanine Arianne L. Quilantang

“I, Jeanine Quilantang, a resident of the Commonwealth of the Northern Mariana Islands and an ally of the LGBTQ+ community. I am writing as an ally of the LGBTQ+ community to express support for their HB22-86 and HB22-87 whose goal is to prohibit discrimination among the LGBTQ+ community and promote equality within the CNMI.”

The Committee received a “Petition for the Enactment of H.B. 22-87”:

“We the undersigned citizens and residents of The Commonwealth of the Northern Mariana Islands, **petition for the enactment of H.B. 22-87, known as the CNMI Equality Act, Āktun Achá-Parehu or Alléghúl Aweewepagh of 2021.**

After reading the bill, I understand and agree that **lesbian, gay, bisexual, transgender and queer (LGBTQ)** people have been discriminated against, and support this bill in **explicitly prohibiting discrimination on the basis of sexual orientation and gender identity** in the CNMI.

This bill acknowledges how the indigenous traditions of the Pacific value and revere gender variance, and underscores the people of the CNMI, Marianas, and Oceania are unified in our love, tolerance, and respect for ALL who are good stewards to our islands.

I recognize and support the added responsibility of protecting LGBTQ people in housing, employment, athletic endeavors, juror responsibility, and the other areas referenced in H.B. 22-87.

By signing below, I acknowledge my support for H.B. 22-87 and consent to the submission of this record to the Legislature as evidence for my support of H.B. 22-87.”

The comment and petition received have been attached as part of this committee report.

In a public meeting held on April 21, 2022, the Committee received oral and written testimonies from the following:

- Tyra Lyn Sablan

Ms. Sablan expressed support for House Bill 22-87. “We need this legislation in order to address institutional and systemic discrimination.”

Minutes of the Committee Meeting and Comments received have been attached as part of this committee report.

In a public meeting, 2021 CNMI PRIDE TALKS, held on June 30, 2021, the Committee received oral and written testimonies from the following:

- Tyra Lyn Sablan

“Discrimination can occur on the basis of sex, sexual orientation and gender identity. Each of these factors alone can serve as the basis for discrimination and each is a form of sex discrimination.”

Comments and reports have been attached as part of this committee report.

In a public meeting held on January 29, 2021, the Committee received written testimonies from the following:

- Dr. Jennifer Maratita

“My name is Dr. Jennifer Maratita, I represent myself as a community member and mother. Thank you for giving me the opportunity to speak with you and putting “Advancing LGBTQ+ equality and well-being in the CNMI” , on the legislative agenda. I am a licensed mental health counselor, serving the CNMI for over 15 years. I founded Pride Marianas Youth, a grass roots organization, as a spin-off of Pride Marianas, and alongside a large group of volunteers, we aim to raise awareness of more inclusive, braver and safer spaces for our community.”

Comments have been attached as part of this committee report.

D. Legislative History:

House Bill No. 22-87 was introduced by Representative Christina M.E. Sablan on December 20, 2021 and was subsequently referred to the House Standing Committee on Health and Welfare for disposition.

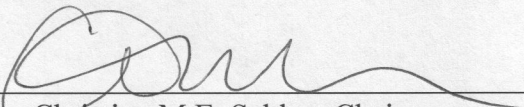
E. Cost Benefit Analysis:

The enactment of House Bill No. 22-87 will result in minimal cost to the CNMI Government in the form of administrative costs to effectively carry out the intent of the proposed legislation. However, using clear and express language to enhance the CNMI’s ability to protect the rights of all our people will heavily outweigh such cost.

III. CONCLUSION:

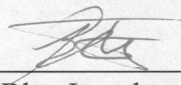
The Committee is in accord with the intent and purpose of H. B. No. 22-87 and recommends its passage in its current form.

Respectfully submitted,



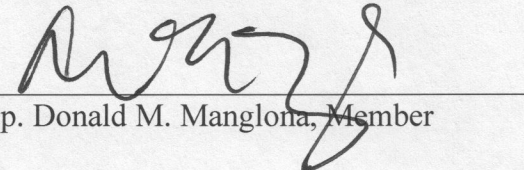
Rep. Christina M.E. Sablan, Chairperson

Rep. Leila H.F.C. Staffler, Vice Chair



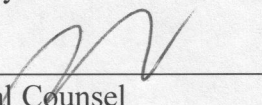
Rep. Blas Jonathan "BJ" T. Attao, Member

Rep. Sheila J. Babauta, Member



Rep. Donald M. Manglona, Member

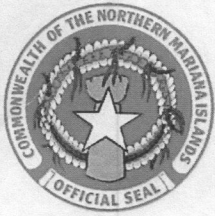
Reviewed by:



House Legal Counsel

Attachments:

- Letter dated June 2, 2022 from CNMI Attorney General, OAGHOR:2022-021 LSR No.22-166
- Committee Meeting Minutes dated April 21, 2022
- Letter of Support: Jeanine Arianne L. Quilantang
- Petition for the Enactment of H.B. 22-87
- Letter dated June 30, 2021 from Tyra Lyn Sablan
 - LGBT Policy Spotlight: LGBT Equality in the U.S. Territories
 - Injustice at Every Turn, A Report of the National Transgender Discrimination Survey
 - Centers for Disease Control and Prevention: Northern Mariana Islands 2019 Results
- Dr. Jennifer Maratita Letter
- Voting Record for passage of HB22-87 on May 9, 2022



Commonwealth of the Northern Mariana Islands
Office of the Attorney General

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Caller Box 10007, Capitol Hill
Saipan, MP 96950

EDWARD MANIBUSAN
Attorney General

LILLIAN A. TENORIO
Deputy Attorney General

VIA EMAIL: repcelinababauta@gmail.com

June 2, 2022

OAGHOR: 2022-021
LSR No. 22-166

Hon. Celina R. Babauta
Chairperson, House Standing Committee
on Judiciary & Governmental Operations
House of Representatives
22nd Northern Marianas Commonwealth Legislature
Saipan, MP 96950

**Re: HB 22-30 (reasonable allowance for legislators); HB 22-87 (CNMI Equality Act);
SB 22-17, SD1 (presentment of valid personal photo ID for any debit or credit card
transaction); SB 22-46 (clarify DPS rank and file at DPS)**

Dear Chairperson Babauta:

Thank you for the opportunity to comment on HB 22-30 (reasonable allowance for legislators); HB 22-87 (CNMI Equality Act); SB 22-17, SD1 (presentment of valid personal photo ID for any debit or credit card transaction); SB 22-46 (clarify DPS rank and file at DPS). We have reviewed the draft legislation and provide the following comments.

HB 22-30 (reasonable allowance for legislators)

The bill is a step forward to ensure that legislative funds are used for legitimate public purposes in an open and transparent process. For clarity and straight-forward compliance and enforcement, I recommend several changes in the language under the provision entitled "Prohibited Uses of An Allowance." A definition of "personal expenses" should be provided (*see* pp. 4-5). The term "governance-related organizations" should also be further defined and providing an example would be also helpful.

HB 22-87 (CNMI Equality Act)

The Constitution protects persons against discrimination. Section 6 of Article I of the Commonwealth Constitution states that "[n]o person shall be denied the equal protection of the laws. No person shall be denied the enjoyment of civil rights or be discriminated against in the exercise thereof on account of race, color, religion, ancestry, or sex." Using clear and express language, the Bill amplifies that the Equal Protection

Civil Division
Telephone: (670) 237-7500
Facsimile: (670) 664-2349

Criminal Division
Telephone: (670) 237-7600
Facsimile: (670) 234-7016

Attorney General's Investigation Division
Telephone: (670) 237-7627
Facsimile: (670) 234-7016

Victim Witness Advocacy Unit
Telephone: (670) 237-7602
Facsimile: (670) 664-2349

Clause extends protection to all persons against discrimination on the basis of sexual orientation, gender identity, and gender expression. The protection extends specifically to employment, housing, residential real estate transactions, retail/wholesale operations, procurement of insurance, and the administration of justice.

SB 22-17, SD1 (Require ID in non-cash sales transactions)

The Bill addresses a perceived problem with a practice that most reputable businesses in the Commonwealth have implemented on their own initiative. Also, prosecuting such violations would be difficult as there is no process to prove or disprove that the business establishment requested an identification card prior to processing the sale.

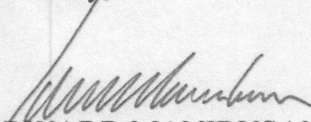
SB 22-46 (DPS rank and file)

The Bill contravenes the Constitution because it would require the municipal councils (except for Saipan) to approve the appointment of the resident head of the resident Department of Public Safety in the respective municipalities.

The appointment of the heads of resident departments is set forth in Section 3(g) of Article VI of the Constitution. The mayors of Rota and Tinian and Aguiguan have the appointment power in consultation with the heads of the respective executive branch department. To illustrate, the Mayor of Tinian has the power to appoint the resident department head for the resident Department of Public Safety. In doing so, the Mayor must consult with the Commissioner of the Department of Public Safety. The approval of the municipal councils is not required.

Please do not hesitate to contact me if you have any questions on my comments.

Sincerely,


EDWARD MANIBUSAN
Attorney General

cc: All Members, House of Representatives



**TWENTY-SECOND NORTHERN MARIANAS COMMONWEALTH
LEGISLATURE
THE HOUSE OF REPRESENTATIVES
P.O. BOX 500586 SAIPAN, MP 96950**

COMMITTEE ON HEALTH AND WELFARE

Meeting Minutes

Date: April 21, 2022

Start Time: 9:08 am
End Time: 10:50 am

Committee Members Present

Rep. Tina Sablan, Chair
Rep. Leila Staffler, Vice-Chair
Rep. Donald Manglona, Member
Rep. Blas Jonathan Attao, Member

Rep. Sheila Babauta was excused.

A. CALL TO ORDER

The meeting of the Committee on Health and Welfare was called to order at 9:08 am on April 21, 2022 in the House Chamber at the Northern Marianas Commonwealth Legislature.

Housekeeping Matters

House Legal Counsel Joseph Taijeron, Legislative Assistant Claire Sablan, IT Delbert Camacho, and Sergeant-at-Arms Peter Towai staffed the committee meeting. Melia Johnson took notes. The meeting was recorded, broadcast live on Channel 23, and live streamed on the Northern Marianas Commonwealth Legislature's Facebook page.

B. ADOPTION OF AGENDA

A motion was made and seconded to adopt the agenda. The agenda was unanimously approved by voice vote.

C. ADOPTION OF MINUTES

A motion was made and seconded to adopt the meeting minutes from February 14, 2022. The minutes were unanimously approved by voice vote.

D. PUBLIC COMMENTS

Tyra Sablan

Ms. Sablan expressed support for HB 22-86 and HB 22-87. In regards to HB 22-86, Ms. Sablan stated that not all transgender people want or are able to get surgery. This bill will allow them to legally identify their gender without having to undergo surgery.

Ms. Sablan said that HB 22-87 will address institutional and systemic discrimination. Antiquated laws that exist do not reflect Pacific island cultures. She stated that discrimination did not exist in our island culture's history, and that discrimination is a product of colonial influence. Ms. Sablan also said that legislation can help shape people's minds in regards to gender identity and sexual orientation. She urged the committee to pass the legislation.

Chair Sablan asked if Ms. Sablan had reviewed the comments submitted by CHCC with respect to HB 22-86. Ms. Sablan said she did, and found most suggestions acceptable. Ms. Sablan did not agree with CHCC's suggestion to prohibit changing gender identity on a birth certificate more than once. She said that gender identity is very fluid and the choice should be left to the person identifying.

Chair Sablan lauded Ms. Sablan for all her advocacy efforts. Chair Sablan asked Ms. Sablan if she knew whether the Passport and Social Security offices would accept changed birth certificates. Ms. Sablan answered yes.

Esther Muna, CEO Commonwealth Healthcare Corp.

Ms. Muna expressed support for HB 22-77. She said there have been many changes in the medical referral program and CHCC continues to identify gaps and other needs. Since CHCC has taken over the program, they have been working on increasing funding sources, such as Medicaid.

Chair Sablan asked for an update regarding the transition of medical referral to CHCC. She also referred to a 120 day transition period requirement in the bill. Ms. Muna replied that CHCC has completed transitioning the employees to the corporation. CHCC is now working on changing and updating the regulations, policies, and procedures. Ms. Muna also said CHCC has requested that the Medicaid State Plan be amended to include foreign hospitals in the region so that Medicaid can cover the costs for care overseas.

Chair Sablan asked if CHCC is restructuring the program, noting that there is a new director. Ms. Muna responded that CHCC has placed the program under the hospital and the Chief Operating Officer is in charge. There is a new director that oversees the Saipan, Hawaii, and Guam offices.

In reference to the name change from Medical Referral to the Health Network Program, Chair Sablan asked Ms. Muna to explain the difference. Ms. Muna answered that the difference is in establishing a relationship with providers. CHCC wants to be able to also

bring providers to the island. CHCC is creating partnerships with these providers. The network is a two-way system rather than just sending patients off-island.

Vice-Chair Staffler asked Ms. Muna about the 120 day transition deadline stipulated in the bill. Ms. Muna said they can meet this deadline as CHCC has already been taking over the program. Ms. Muna mentioned that the corporation has a credit card, and will be applying for extended credit. The credit card will be used to pay for blocked rooms and if needed, additional rooms. She continued that the transition is going smoothly.

Rep. Manglona asked if CHCC offers assistance to patients that do not meet the eligibility requirements. Ms. Muna replied that the eligibility criteria has not changed, but that there are different eligibility requirements for different types of benefits.

Rep. Manglona asked if CHCC would take over stipends for inter-island referrals, which the local legislative delegations have assisted with in the past. Ms. Muna replied that the stipends are only for travel outside the CNMI, under the regulations. CHCC will pay out stipends for inter-island referrals if money is appropriated for it. She said CHCC could change this policy if there is adequate funding.

Rep. Attao asked about the credit card that CHCC is applying for; he asked if it would be a corporate credit card and would it earn mileage. Ms. Muna clarified that CHCC already has a corporate credit card, and is applying to increase its limit and to issue a separate card for the Medical Referral. The card does not earn mileage; in order to change it, CHCC would have to open a new bank account. She referenced a program with United Airlines, that CHCC's Chief Financial Officer is looking into.

Chair Sablan asked for some clarification on CHCC's policy with respect to inter-island referrals. Ms. Muna said that inter-island care does not include a stipend. CHCC is working on changing the regulations. Chair Sablan commented that if passed, the new Health Network Program would encompass both inter-island and off-island care. Ms. Muna agreed.

Wilbert Rospel, CHCC State Vital Statistics Registrar

Mr. Rospel expressed support of HB 22-86. Chair Sablan asked whether he was aware of any updates since the CHCC letter to the Health and Welfare Committee was submitted. CHCC's letter indicated uncertainty as to whether the Passport and Social Security offices would accept amended birth certificates. Mr. Rospel said he was unsure whether an amended birth certificate would impact a passport or social security card application. Chair Sablan noted that the Social Security Office recently announced a new policy that would allow applicants to self-select their gender marker.

Chair Sablan asked Mr. Rospel to explain his reasons for recommending that a birth certificate can only be amended once. Mr. Rospel said that his main concern is maintaining the integrity of the records. Once they have amended the records and logged

them, the records are “locked.” He added that it is not easy to amend a birth certificate. In general, however, he said he supports the bill.

Joseph Kevin Villagomez, Director, Community Guidance Center

Mr. Villagomez expressed support for HB 22-80. He said that the Covid-19 pandemic has greatly impacted the mental health of the community. If the CNMI were to be a part of PsyPact, more resources for mental health care would be available to residents. PsyPact will also ensure screening and vetting of providers.

Chair Sablan inquired whether CGC was experiencing a backlog of patients and seeing long waiting times in order for patients to see a mental health specialist. Mr. Villagomez said that Covid-19 restrictions did mean that face to face and group sessions were not available. But protocols have changed, and CGC is running groups again. He also said that CGC has a triage system to determine how to provide care. CGC has also been awarded grants that will allow the center to increase the number of providers.

E. MARK-UP

Chair Sablan requested that HB 22-86 and HB 22-87 be tabled until the next meeting in order to incorporate recommended changes and review additional comments.

- 1. House Bill 22-80, to have the CNMI join the Psychology Interjurisdictional Compact (PSYPACT), to improve access to mental health care in the CNMI; and other purposes.***

Citing the numerous comments received in support of this bill, Chair Sablan requested a motion to approve this bill for passage and draft a committee report. The motion was made and seconded and passed by unanimous voice vote. Chair Sablan requested that Legislative Aide, Claire Sablan draft the committee report.

- 2. House Bill 22-77 S1, to establish the CNMI Qualified Medical Travel Assistance Program or MTAP; and for other purposes***

Chair Sablan reviewed the history of the bill, mentioning holding public meetings, committee meetings, and extensive comments. She briefly discussed the changes that have been incorporated into the bill, based on comments received. Discussion followed.

Rep. Attao, in regards to page 5, section c, suggested that the committee designate a month in the year that CHCC’s reports to the legislature and the governor would be due, in order to project costs for the Health Network Program in the annual budget process. The committee decided that March 1st will be the deadline for CHCC to submit its annual report.

Rep. Attao suggested language be inserted stipulating that in the event CHCC exhausts their budget, that they can submit a supplemental budget that will be approved upon available funds. After some discussion, it was decided to change subsection g to read: *“If appropriated funding for the Health Network Program is exhausted prior to the end of the fiscal year, the CHCC shall submit a request to the Governor and the Legislature for supplemental appropriations.”*

A motion was made to accept HB 22-77 HS1 with proposed changes. The motion was seconded and passed by unanimous voice vote.

A motion was made to approve HB 22-77 HS1 and draft the committee report. The motion was seconded and passed by unanimous voice vote.

Chair Sablan requested Legislative Assistant, Claire Sablan, and legal counsel to prepare the committee report with all proposed changes.

F. ANNOUNCEMENTS

Chair Sablan announced she will call another meeting in the following week to address the remaining items on the agenda, HB 22-86 and HB 22-87.

G. MISCELLANEOUS

None

H. ADJOURNMENT

A motion was made and seconded to adjourn, and the motion passed by unanimous voice vote. Meeting was adjourned at 10:50 am.

Minutes submitted by: Rep. Christina Sablan, Chair

Approved and adopted on: May 9, 2022

###

Letter of Support for HB22-86 and HB22-87

Dear Honorable Representatives:

I, Jeanine Quilantang, a resident of the Commonwealth of the Northern Marianas Islands and an ally of the LGBTQ+ community. I am writing as an ally of the LGBTQ+ community to express support for their HB22-86 and HB22-87 whose goal is to prohibit discrimination among the LGBTQ+ community and promote equality within the CNMI.

This bill is important to me because I have friends and family that are members of the LGBTQ+ community. Despite having done no wrong, they are discriminated against in different situations. There is also a stigma against them seeking services that they have the right to. I believe that they should be treated just as well as those that are not part of the community. Your support for this bill will ensure the safety and open doors for existing and future generations to receive the services and feel safe within the CNMI.

Sincerely,

Jeanine Arianne L. Quilantang

A handwritten signature in black ink, appearing to read "J. Quilantang", written in a cursive style.

PETITION FOR THE ENACTMENT OF H.B. 22-87

**To the Honorable Senators and Representatives of the
Northern Marianas Commonwealth Legislature:**

We, the undersigned citizens and residents of The Commonwealth of the Northern Mariana Islands, **petition for the enactment of H.B. 22-87, known as the CNMI Equality Act, Áktun Achá-Parehu, or Alléghúl Awecwcppagh of 2021.**

After reading the bill, I understand and agree that **lesbian, gay, bisexual, transgender, and queer (“LGBTQ”)** people have been discriminated against, and support this bill in **explicitly prohibiting discrimination on the basis of sexual orientation and gender identity** in the CNMI.

This bill acknowledges how the indigenous traditions of the Pacific valued and revered gender variance, and underscores **the people of the CNMI, Marianas, and Oceania as unified in our love, tolerance, and respect for ALL who are good stewards of our islands.**

I recognize and support the **added responsibility of protecting LGBTQ people in housing, employment, athletic endeavors, juror responsibility, and the other areas referenced in H.B. 22-87.**

BY SIGNING BELOW, I ACKNOWLEDGE MY SUPPORT FOR H.B. 22-87 AND CONSENT TO THE SUBMISSION OF THIS RECORD TO THE LEGISLATURE AS EVIDENCE FOR MY SUPPORT OF H.B.

PETITION FOR THE ENACTMENT OF H.B. 22-87

	FULL NAME	SIGNATURE	EMAIL	PHONE #	MAILING ADDRESS
1	QUITANO, SUSANA		suequitano@gmail.com	670 484 7837	
2	Sablan, evonne j.		evonnejs@gmail.com	(670) 789-2701	P.O. Box 501321
3	CAMAETO, MELISSA		melissacamaeto@gmail.com	670 989 5599	P.O. BOX 505336
4	OGARTO, JUAN			670 285 0729	P.O. BOX 505024
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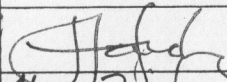
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Name	City	State	Postal Code
Pettie Lucas			
TYRA LYN SABLAN			
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Vicasha Camacho			
Petrina Delorie Lucas			
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Gerald Padrid			
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Zody Aldan			
Raymond Olopai			
Laura Kyonka			
Wilson Celeste			
Florita Billy			
Joylynn yamada George			
mikaela siksei			
Titania Mori			
Ariann Pangelinan			
Tahira mori Setefano	Saipan		
Melissa Bauleong			
Hector Efraim			
Zakari Jack			
Jennica Muna			
Roseann Vincent			
Almay Williams	Saipan		
Ray DLGuerrero	Saipan		
Viann Wabol	Saipan		
Leeann Reyes			
Merly-Ann Fernandez	Saipan		
Susan Quitano			
Fina Olopai	Saipan		
Joaquin Duenas	Saipan		
Lela Guerrero			
Claire Cabrera	Saipan		
Ersina Andon			
Jayna Kaipat			
Davian Atalig	Saipan		
Paul Ichihara	Tamuning		
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Viliami Setefano			
Evelyn Sablan			
Eileen Camille Mangarero			
Lo Cabrera	Saipan		
Jaeleen Aldan	Hagatna		
Ignatia Aldan			
Frank Camacho	Barrigada		
Nerissa Benavente			
Tiana Quitugua	Saipan		
Aaron Cayading			
brydon dumagan			
Cindylou Lacbayo	Saipan		
Brittney Ucherbelau			
Queenie Tamayo	Saipan		
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Mica Sune	Saipan		
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Travis Jones			
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Minna Camacho	Barrigada		
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cecilia sannicolas			
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Fatima Borja			

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Craig Borja			
Arlene Reyes			
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Leovanie Indalecio	Saipan		
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Tricia Diaz			
Jade Sablan			
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Norma Ada			
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Rhodora Acejo	Northern Mariana Islands		
VICKY MICHELLE TAITANO			
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Journey Mafnas	Saipan		
Nia Indalecio			
Darlene Castro	Hagatna		
Katelynn Duenas			
Nemesianne Gabi			
Catherine Calma	San Vicente		
Maria Tudela	Saipan		
Seho Baek			
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Ha'ani Rodgers			
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Shawna Brennfleck	Saipan		
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Fran Castro			
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Abram R			
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Marlyn Igitol	Yigo		96929
Changwhan Jang			
Jazzy King	Yigo		96929
Sablan Jessica Rose	Saipan, Northern Mariana Island		
Andre Tenorio	Dededo		96921
Andre Arriola	Saipan		
Michael Castro	Barrigada		
Nicole Sune			
Ariya Limtiaco	Hagatna		
Mariana Teigita	Saipan		

Maisie Tenorio	Hagatna		
Concepcion (Janet) Santos	Saipan		96950
Eryhn Quinata	umatac		
Lailaney Elab	Oak Harbor	WA	98277
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Belinda Norita	Saipan		
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Beverly Camacho	Saipan		
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Ben Lisua	Saipan		
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Shana Iguel	Kagman 2		
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Pedro Tudela	Saipan		
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Alverick Alvarez	Saipan		

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Chaen Mendiola			
Anesta David			
Jan Reyes	Saipan	MP	96950
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Bernadette Javier			
Tina C. Santos			
Vanessa Tudela			
aira abreu	Saipan		
Lynette Cabrera			
Mary Grace Santos	Saipan		
Maria Priest			
Elora Manglona			
Rita Cabrera	Saipan		
Joyce Angela Javier			
Neling Arriola			
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Kevin Adachi	Saipan		
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Chasmyn Santos			
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Dolorez Salas			
Elvira Manglona			
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June 30, 2021

Honorable Representative Christina Sablan
Northern Marianas Commonwealth Legislature
House of Representatives
Committee for Health and Welfare
PO Box 500586
Saipan, MP 96950

Re: CNMI LGBTQ Inclusive Rights

Honorable Chair Christina Sablan,

First and foremost, thank you. Thank you for this historic opportunity to be able to sit here with our leaders to talk about the major disparities that affect the lesbian, bisexual, gay, transgender and questioning, queer, non-conforming folks in the Commonwealth of the Northern Mariana Islands.

According to Movement Advancement Project, of the five territories ⁱⁿ of the United States, CNMI has one of the lowest scores when it comes to LGBTQ+ policies.

I would like to highlight 4 categories:

- Nondiscrimination laws
- Healthcare
- Accurate Identity documents
- LGBTQ youth laws and policies

SEX DISCRIMINATION (INCLUDING SEXUAL ORIENTATION AND GENDER IDENTITY) AND HOW IT AFFECTS EMPLOYMENT, PUBLIC ACCOMODATION, AND HEALTHCARE

Discrimination can occur on the basis of sex, sexual orientation and gender identity. Each of these factors alone can serve as the basis for discrimination and each is a form of sex discrimination.

Individuals who are LGBTQ or are perceived to be LGBTQ have been subjected to history and pattern of persistent, widespread, and pervasive discrimination on the bases of sexual orientation and gender identity by both private sector and Federal, State and local government actors.

Like anyone, transgender people need preventive care to stay healthy and acute care when they become sick or injured. Some may also need medical care to treat gender dysphoria. Transgender people's health care is both widely stigmatized and misunderstood. Those unfamiliar with the health needs of transgender people might portray transition-related care as "cosmetic" or a

choice. The fact is that the medical necessity of transition-related care is overwhelmingly recognized by medical experts as effective and necessary for many transgender people.

Despite the protections of the Affordable Care Act and other laws that prohibit discrimination, transgender people continue to encounter barriers to care. Transgender people face significant job loss and job fragility and, therefore, a higher rate of un-insurance. While the majority of public and private insurance plans have removed exclusions that blatantly target transgender people, many plans continue to deny coverage for medically necessary care. Even when transgender people have access to comprehensive coverage, discrimination is still prevalent in many health care settings, and contributes to health disparities when compared to the general US population, including higher levels of HIV infection and suicidality.

According to National Transgender Discrimination Survey:

- 19% reported being refused medical care
- 50% reported having to teach their medical providers about transgender care
- 48% postponed medical care because they couldn't afford it
- 28% postponed medical care due to systemic discrimination

The absence of explicit prohibitions of discrimination on the basis of sexual orientation and gender identity has caused unnecessary hardships for LGBTQ+ individuals especially in accessing healthcare.

IDENTIFICATION AND DOCUMENTS

Transgender people need accurate and consistent IDs to open bank accounts, start new jobs, enroll in school, and travel. However, the name and gender change process is complicated and sometimes prohibitively expensive. Moreover, many state and federal governments have intrusive and burdensome requirements—such as proof of surgery or court orders—that have made it sometimes impossible for trans people to update their IDs. As a result, only one-fifth (21%) of transgender people who have transitioned according to the National Transgender Discrimination Survey have been able to update all of their IDs and records with their new gender and one-third (33%) had updated none of their IDs or records. The survey results also confirmed what most trans people already knew—that gender incongruent identification exposes people to a range of negative outcomes, from denial of employment, housing, and public benefits to harassment and physical violence.

According to the National Transgender Discrimination Survey:

- 53% of respondents reported being verbally harassed or disrespected in a place of accommodation
- 22% were denied equal treatment by a government agency or official
- 21% transgender have been able to update ALL of their IDs and records with their new gender

- 41% live without ID that matches their gender identity (CNMI numbers are expected to be higher)
- 40% of those who presented ID that did not match their gender identity/expression reported being harassed
- 3% reported being attacked or assaulted
- 15% reported being asked to leave

One of the major barriers for acquiring identification that matches gender identity here in the CNMI is Public Law 15-50 requires a doctor's certification of gender affirming surgery to be able to change gender marker on birth certificate and/or identification.

Not all transgender people want to get gender affirming surgery. Currently, obtaining federal level identification such as a passport does not require for a doctor's certification or a court order to change gender marker and may be self-selected.

Furthermore, courts require for name changes to be published. The state of New York has made progress ***allowing courts to waive that requirement and records be sealed for transgender individuals for their safety against harassment.***

MENTAL HEALTH – YOUTH

The American Academy of Pediatrics recommends health care providers have “teen friendly and welcoming” offices for sexual minority youth; and obtain “comprehensive, confidential, developmentally appropriate adolescent psychosocial histories” to determine their strengths as well as risks for disease. Referrals for mental health or substance abuse treatment may be needed.

Sexual and gender minority youth who have been abused, neglected or bullied because of their sexual orientation or gender identity have higher rates of depression, have thoughts of and/or have attempted suicide. Lack of acceptance, understanding and abuse at home often leads to youth homelessness. Family rejection during adolescence is associated with mental health and substance abuse problems.

The rates of physical, sexual, and emotional abuse; and bullying of LGBT and questioning youth are consistently higher than that of heterosexual youth. They are also more likely to skip school because they feel unsafe on their way to and from school.

According to the 2019 NMI Youth Risk Behavior Survey:

- 25% of lesbian or gay youth vs. 13.2% of their heterosexual counterparts carried a weapon (such as gun, knife or club)
- 18.1% vs. 3.9% were threatened or injured with a weapon on school property
- 36.7% vs. 22.2% were in a physical fight
- 13.8% vs. 5.8% were in a physical fight on school property.
- 21.6% of vs. 8.3% were forced to have sexual intercourse when they didn't want to

- 28.8% vs. 9.5% experienced sexual violence by anyone
- 44.8% vs. 25.7% seriously considered attempting suicide
- 40.4% vs. 15% actually attempted suicide
- 44.6% vs. 25% currently drank alcohol
- 43.6% LG abused prescription medicine vs 14.4%
- 21.2% LG vs. 1.8% used cocaine
- 26.3% vs. 6.6% used inhalants
- 19.9% vs 0.8% used heroine
- 16.5% vs 1% smoked meth
- 25.7% vs.1.4% used ecstasy

These numbers are alarming and certain factors can “protect youth from engaging in behaviors that lead to poor health outcomes” and “play an important mediating role in the development and life course of youth.” Protective factors include: family support and acceptance, the presence of caring adults, positive peer influences, strong self-esteem, and participation in school activities.

Counseling for minors range from getting support from a caring adult to receiving mental health treatment from a mental health professional, school based behavioral health specialists, private practice psychotherapists, primary care or a combination of the five listed.

Considerations when counseling youth on issues of sexual orientation, sexual expression and gender identity are:

- Youth need a supportive, thoughtful adult to be a “sounding board” to talk about their struggles;
- LGBT and questioning youth may need mental health treatment from an LGBT affirming counselor for depression, anxiety, substance abuse, and/or other mental health disorders; and
- LGBT and questioning youth may be suffering from stress or trauma from the way their family, friends, classmates and others treated them in response to their sexual orientation or gender identity.

Mental Health professional counseling allows for therapeutic interactions to ameliorate mental health disorders or change problematic behavior brought on from stress and trauma the youth has experienced. Not all sexual or gender non-conforming minority and questioning youth need mental health treatment, but may need support from a caring adult.

One of the major barriers for LGBT and questioning youth accessing mental health or substance abuse counseling is the need for parental consent. Youth do not have monies for mental health or substance abuse counseling and/or fear of repercussions from parents or guardians for receiving services; and the stigma of mental illness and anti-LGBT sentiments from inside and outside of the mental health and substance abuse health system can be prohibitive.

Respectfully submitted by:

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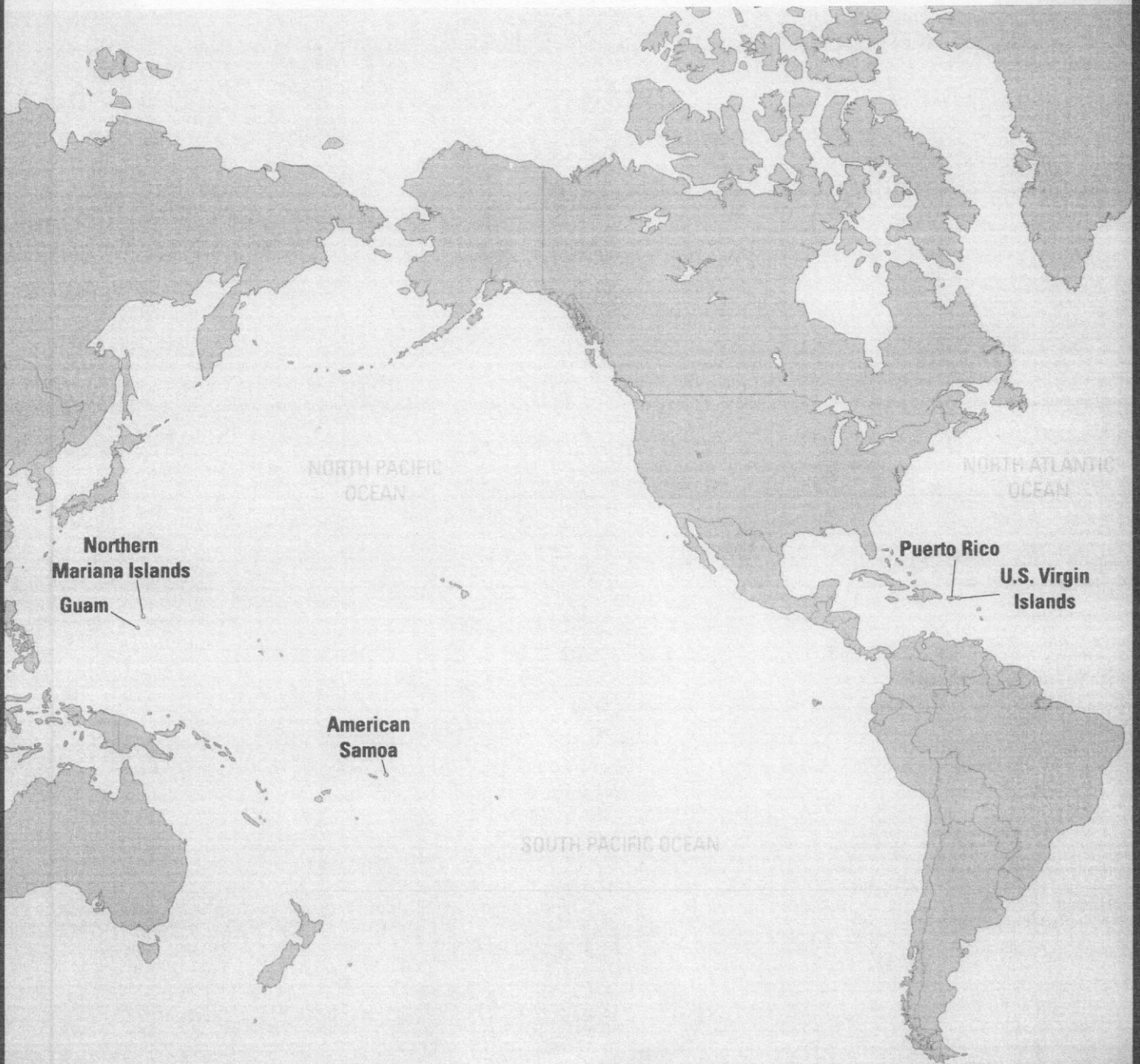
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Movement Advancement Project

https://www.lgbtmap.org/equality_maps/profile_state/MP

Honorable Representative Leila Stafler, Vice Chair
Honorable Representative Sheila Babauta, Committee Member
Honorable Representative Blas Attao, Committee Member
Honorable Representative Donald Manglona, Committee Member

LGBT POLICY SPOTLIGHT: LGBT EQUALITY IN THE U.S. TERRITORIES



Authors



Partners



Lambda Legal
making the case for equality

SPOTLIGHT
REPORT

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INTRODUCTION

There are more than 3.5 million people living in the five inhabited U.S. territories:^{1,a} American Samoa, the Commonwealth of the Northern Mariana Islands, Guam, the Commonwealth of Puerto Rico, and the U.S. Virgin Islands.^b There are an additional 11 U.S. territories that do not have any permanent residents.^c

While research about the numbers of lesbian, gay, bisexual, and transgender (LGBT) people living in these territories remains sparse, efforts have been made—and continue to be made—to achieve LGBT equality for territory residents. This spotlight report focuses on the five populated U.S. territories and the status of LGBT equality in these areas.^d Additionally, given a lack of basic understanding about the territories and their relationship to the mainland United States, this spotlight report also provides some helpful background information.

WHAT ARE U.S. “TERRITORIES”?

For much of the United States’ history, expansion has occurred through purchase, treaties, war, and conquest and colonization. For example, the Louisiana Purchase in 1803 added more than 800,000 acres to the U.S., more than doubling the size of the United States at that time. These lands, and others like them added through various means, were referred to as U.S. territories. Over time, 31 territories in the contiguous United States (plus Alaska and Hawai’i) became “incorporated” and then became states, with their residents becoming U.S. citizens with the full rights and benefits of U.S. citizenship.

During the second half of the 1800s and continuing into the 1900s, the United States also acquired new territories that did not continue on the path from territory to state. For example, these included Baker Island (1857), the Midway Islands (1867), the Philippines (1898), and the Virgin Islands (1917). Some of these, like the Philippines, ultimately became independent countries. Eleven territories, like Baker Island and the Midway Islands, are unpopulated U.S. territories. Finally, there are the five current populated U.S. territories, including Puerto Rico and the Virgin Islands. These five “unincorporated” territories have fallen into a sort of legal and political limbo with varying degrees of autonomy.

In unincorporated territories, the U.S. Constitution applies only partially. “Fundamental” constitutional rights apply, but other rights may not, and the question of which rights are fundamental and which are not is

open to interpretation. Ultimately, the U.S. Congress and U.S. courts decide what benefits and rights residents of these remaining populated territories have.²

WHERE ARE THE U.S. TERRITORIES & WHO LIVES THERE?

Figure 1 on the previous page shows the five populated U.S. territories, which span from the far reaches of the Northern Pacific Ocean to the Caribbean Sea. Four of the five territories have populations smaller than any state in the United States, while Puerto Rico has a population similar in size to Utah.

American Samoa is comprised of seven islands in the Pacific Ocean, halfway between Hawai’i and New Zealand, with most of its population residing on Tutuila, Manu’a Islands, Rose Atoll, and Swains Island. Approximately 55,000 people live in American Samoa.³

Guam is an island located in the Pacific Ocean near the Northern Mariana Islands and the Philippines, with approximately 159,000 people.⁴ There is a joint Air Force and Naval base on the island.

The **Northern Mariana Islands** are comprised of 14 islands in the Pacific Ocean near Guam and the Philippines. Three of these islands—Rora, Saipan, and Tinian—are home to nearly 54,000 people.⁵

Puerto Rico is comprised of the island of Puerto Rico and smaller islands like Culebra and Vieques located in the Caribbean Sea between the Dominican Republic, Haiti, and the U.S. Virgin Islands. It has a population of more than three million. Puerto Rico has both an Army and Navy base.

The **U.S. Virgin Islands** are comprised of three islands: St. Croix, St. John, and St. Thomas. They are located in the Caribbean Sea near Puerto Rico and have a total population of 106,000 people (see *Figure 2* on the next page).⁶

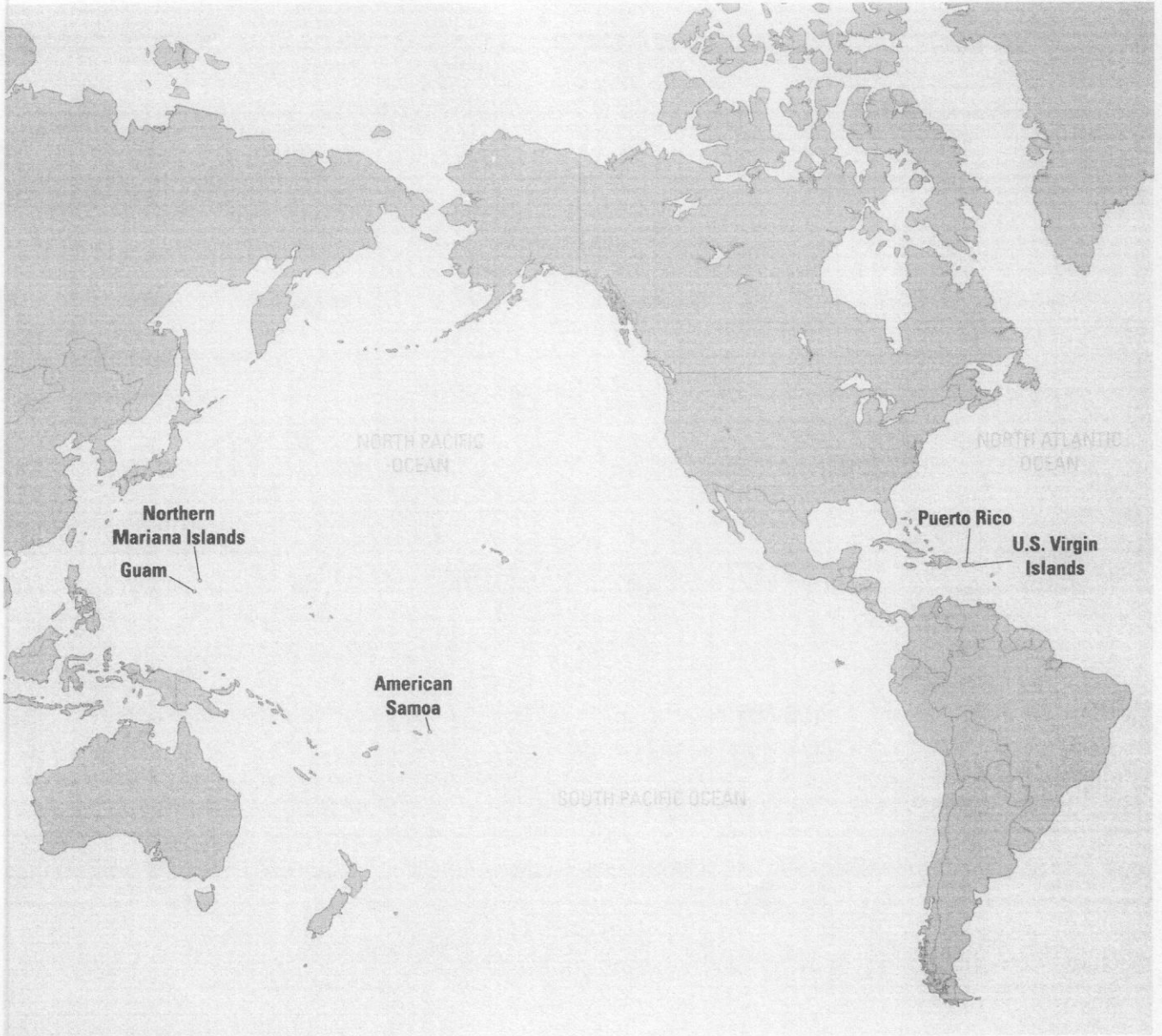
^a From 2010 to 2018, the population of Puerto Rico dropped by 14%, from 3.7 million people to 3.2 million, with the population dropping by 4% from 2017 to 2018, likely the result of Hurricane Maria, which struck the island in September 2017.

^b Hereafter referred to as “Northern Mariana Islands” and “Puerto Rico.”

^c Seven uninhabited territories of the United States: Baker Island, Howland Island, Jarvis Island, Johnston Atoll, Kingman Reef, Midway Atoll, and Palmyra Atoll. There are four additional uninhabited territories for which the jurisdiction is disputed, but the United States claims: Bajo Nuevo Bank (also known as Petrel Islands), Navassa Island, Serranilla Bank, and Wake Island.

^d This view of “LGBT equality” is informed by a Western lens and may not reflect indigenous views of gender and/or sexuality among residents of the territories. Additionally, this report’s analysis of territorial laws and policies is meant only to facilitate comparison to the U.S. states’ laws and policies. This report does not purport to speak to the lived experiences of LGBT people in the territories, which may be influenced by family, native beliefs and practices, the history of Western colonialism including faith and missionary work, and contemporary relationships and connections to the United States.

Figure 1: Mapping the U.S. Territories



American Samoa



Guam



Northern Mariana
Islands



Puerto Rico



U.S. Virgin Islands

Figure 2: Quick Facts about the U.S. Territories






U.S. Territory	Population	U.S. Citizens	Non-Voting Delegate in U.S. House of Representatives	Represented in U.S. House of Representatives	Represented in U.S. Senate	Can Vote for U.S. President
American Samoa 	55,519 <i>(2010 Census)</i>	✗	✓	✗	✗	✗
Guam 	159,358 <i>(2010 Census)</i>	✓	✓	✗	✗	✗
Northern Mariana Islands 	53,833 <i>(2010 Census)</i>	✓	✓	✗	✗	✗
Puerto Rico 	3,195,153 <i>(Dec 2018)</i>	✓	✓	✗	✗	✗
U.S. Virgin Islands 	106,405 <i>(2010 Census)</i>	✓	✓	✗	✗	✗

Figure 3: The U.S. Territories Vary Dramatically From States in Racial and Ethnic Composition



Source: U.S. Department of the Interior. *American Samoa*; U.S. Department of the Interior. *Commonwealth of the Northern Mariana Islands*; U.S. Department of the Interior. *Guam*; U.S. Census Bureau. *QuickFacts: Puerto Rico*; U.S. Department of the Interior. *U.S. Virgin Islands*.

The racial and ethnic characteristics of the residents of the five U.S. territories (as shown in *Figure 3* on the previous page) differ dramatically from the racial and ethnic composition of U.S. states, where approximately two in five residents are racial and/or ethnic minorities.⁷

HOW ARE THE U.S. TERRITORIES GOVERNED?

Four of the five territories (all but American Samoa) are “organized” territories, which means that the U.S. Congress passed an “organic act” authorizing their residents to have a semblance of self-rule and to create organized governments with an executive, legislative, and judicial system for local territorial legal questions, very similar to U.S. states. And with the exception of American Samoa, as noted below, the U.S. territories fall within the U.S. federal court system much the way that U.S. states do with local federal district courts, and appeals are heard by federal circuit courts and, ultimately, the U.S. Supreme Court.

Guam. Officially “organized” in 1950, Guam has a unicameral legislature comprised of 15 members who are elected by residents; a governor elected by the residents (as of 1968); and a system of judges appointed by the governor and re-elected by voters. Guam’s judiciary branch is led by the Supreme Court of Guam, which oversees a lower court system and issues arising under local law. However, the U.S. Supreme Court has the authority to review Guam’s Supreme Court cases.⁸ The U.S. District Court for the District of Guam exercises federal authority over Guam and sits within the Ninth Circuit. Appeals are heard by the U.S. Court of Appeals for the Ninth Circuit and then by the U.S. Supreme Court.

Northern Mariana Islands. Officially “organized” in 1977, the Northern Mariana Islands have an elected bicameral legislature comprised of the House of Representatives with 20 members and the Senate with nine members, an elected governor, and system of judges. The Northern Mariana Islands’ judiciary branch mirrors that of states with state courts and the Northern Mariana Supreme Court. The U.S. District Court for the District of the Northern Mariana Islands sits within the Ninth Circuit. Federal appeals are heard by the U.S. Court of Appeals for the Ninth Circuit and then by the U.S. Supreme Court.

Puerto Rico. First “organized” in 1900, Puerto Rico became a mostly self-governing territory in 1952. It has an elected bicameral legislature comprised of the House of Representatives with 51 seats and the Senate with 27 seats; an elected governor; and a system of judges. Puerto Rico’s judiciary branch mirrors that of states with a Puerto Rico Supreme Court, courts of appeals, and district and municipal courts. The U.S. District Court for the District of Puerto Rico sits within the First Circuit, and federal appeals are heard by the U.S. Court of Appeals for the First Circuit and then by the U.S. Supreme Court.

U.S. Virgin Islands. “Organized” in 1936 (and revised in 1954), the U.S. Virgin Islands have an elected unicameral legislature comprised of 15 members; an elected governor; and a system of judges appointed by the governor. The Virgin Islands’ judiciary branch mirrors that of states with a Virgin Islands Supreme Court and trial courts, though rulings by the Virgin Islands Supreme Court can be appealed to the U.S. Supreme Court. The U.S. District Court for the District of the Virgin Islands sits within Third Circuit, and appeals are heard by the U.S. Court of Appeals for the Third Circuit and then by the U.S. Supreme Court.

Unlike the other territories, **American Samoa** is technically an “unorganized” territory, meaning that the U.S. Congress has not authorized self-government. However, in 1967, the U.S. Department of the Interior authorized residents to draft a constitution, which created an elected legislature, a governor, and a judiciary. As a result, American Samoa has a bicameral legislature called the Fono. Much of society is governed by matai (chiefs) and tribunals that rely on Samoan history, tradition, and custom to address legal issues. The High Court of American Samoa heads local district courts. American Samoa does not have a federal court as do the other territories. Matters of federal law in the past have been adjudicated in the federal District Court for Hawai’i or the federal District Court for the District of Columbia, but technically American Samoa falls outside the jurisdiction of federal courts.⁹

As shown here, each territory has its own unique governance structure. The territories are also governed, at least in part, by the U.S. government, as discussed next.

WHAT IS THE CURRENT RELATIONSHIP BETWEEN THE U.S. GOVERNMENT & THE U.S. TERRITORIES?

As noted above, all five of the territories are “unincorporated,” which means that they are controlled by the United States but are not fully a part of the United States. This has important implications for their residents. The relationships between the territories, the U.S. Constitution, the United States government, and the U.S. government’s responsibilities to the territories differ substantially compared to U.S. states.

First, **people born in four of five territories are citizens, but those from American Samoa are not.** The people of American Samoa are not U.S. citizens, but are “American nationals.” This means they have U.S. passports, can serve in the U.S. military, and can live and work in the United States. And while they can apply to become U.S. citizens, they are not permitted to do things that are limited to U.S. citizens such as vote, work in certain local, state, or federal jobs, or hold elected office in the United States. The residents of the four other territories are U.S. citizens. However, having U.S. citizenship does not mean the full scope of the U.S. Constitution and its protections apply, as explained below.

Second, **the applicability of the U.S. Constitution to fully protect residents of the territories, even residents who are U.S. citizens, has evolved over time.** In 1901, the U.S. Supreme Court ruled in a series of cases entitled the “Insular Cases” that, because the territories “belong” to the United States, but are not fully a part of the United States (as they are “unincorporated”),¹⁰ only “fundamental” constitutional rights apply.¹¹ Over the past 118 years, what has counted as a “fundamental” constitutional right has been determined by the courts on a case-by-case basis.

For example, in a 1922 case, the U.S. Supreme Court ruled that the application of the Constitution is determined by the “locality” of an individual, rather than the citizenship of the people living in that place.¹² As a result, if a person was born in Florida but moved to Puerto Rico, they would no longer be eligible for full constitutional protections while living in Puerto Rico, whereas if a person born in Puerto Rico moved to Florida, they would receive full constitutional protections but only while living in Florida.

Because the territories are “creations of Congress,” so long as they remain unincorporated territories rather than incorporated territories or states, Congress retains power over them.¹³ For example, in a 1904 case, the U.S. Supreme Court ruled that residents of the Philippines (at the time a U.S. territory) were not entitled to a jury trial unless Congress explicitly extended that right via statute.¹⁴ In a subsequent 1922 case, still considered relevant and binding today, the U.S. Supreme Court held that the right to a jury trial, guaranteed under the Constitution and the Sixth Amendment, was not guaranteed to residents of Puerto Rico.¹⁵ As part of its rationale, the Court questioned whether Puerto Ricans were incapable of or unable to adopt an “Anglo-Saxon” institution as required of a jury.¹⁶ This highlights the lingering and pernicious influence of colonialism and prejudice shaping the territories still today.

While the majority of cases about the applicability of the full U.S. Constitution to the territories are more than 100 years old, more recent case law speaks to the evolving concept of “fundamental rights.” Subsequent and recent cases have tested what autonomy the territories have and to what extent the U.S. Constitution applies, including: a case holding that the federal government provided reduced safety net benefits to citizens in Puerto Rico;¹⁷ a ruling holding that Puerto Rico cannot prosecute an individual if the federal government already has, even though U.S. states can;¹⁸ a case in which the Northern Mariana Islands wanted to restrict voting on Northern Mariana constitutional amendments to people of local descent but were overturned by the Ninth Circuit for violating the Fifteenth Amendment;¹⁹ and a case that determined that individuals born in American Samoa are not entitled to citizenship as guaranteed by the Fourteenth Amendment, because Congress hasn’t explicitly granted that right to residents of American Samoa, as it has done for the residents of the other four territories.²⁰

As explained in the sidebar on the next page, the applicability of the U.S. Constitution and the U.S. Supreme Court rulings related to LGBT issues is particularly important, as in the example of marriage equality and the 2015 ruling in *Obergefell v. Hodges*. To be sure, though, the constitutional right to due process and to equal protection, as protected by both the Fifth and Fourteenth Amendments to the U.S. Constitution, have, in large measure, already been incorporated into the territories.²¹

A Historical Example of the Unequal Application of the U.S. Constitution to the U.S. Territories: The Case of Marriage Equality in the Territories

In December 2013, a federal judge in Utah ruled that Utah's ban on marriage by same-sex couples violated the U.S. Constitution. This ruling was the first of many federal district court and circuit court rulings, which ultimately brought the issue to the U.S. Supreme Court in June 2015 in the *Obergefell v. Hodges*, in which the Court ruled that marriage was a fundamental right and it was unconstitutional to deny that right to same-sex couples. By November 2014, four federal circuit courts had struck down marriage bans, while one circuit court, the Sixth Circuit, had upheld them.

As noted in this report, four of the U.S. territories are a part of the federal court system, with Guam and the Northern Mariana Islands falling under the Ninth Circuit, Puerto Rico under the First Circuit, and the Virgin Islands under the Third Circuit. As federal courts began striking down state marriage bans, the applicability and impact of these rulings to these U.S. territories was not clear. Put differently, if residents of the territories do not enjoy the U.S. Constitution's full protections, did the fundamental right to marry apply equally within the territories? The implication of the marriage rulings was also unclear for American Samoa, which does not have a federal court at all.

As shown below, despite the relevant federal circuit court rulings, and eventually a U.S. Supreme Court ruling, each territory had its own complicated path to marriage equality, illustrating the complex and often unclear relationships between the U.S. territories, the U.S. federal government, and the U.S. Constitution.

Guam. The Ninth Circuit Court of Appeals struck down bans on marriage for same-sex couples in Idaho and Nevada in October 2014, a ruling that applied to Guam. However, it wasn't until a couple was denied a license in April 2015 that the District of Guam court ruled that the couple should not have been denied a license, given the ruling in the Ninth Circuit. This made Guam the first U.S. territory to permit same-sex couples to marry. In August 2015, the Guam legislature passed marriage equality legislation updating their marriage laws to permit marriage for same-sex couples.

Northern Mariana Islands. The Ninth Circuit Court of Appeals struck down bans on marriage for same-sex couples in Idaho and Nevada in October 2014, a ruling that applied to the Northern Mariana Islands. However, it wasn't until the U.S. Supreme Court ruling in June 2015 that the governor and the attorney general of the Islands announced that the territory would begin marrying same-sex couples.

U.S. Virgin Islands. Following the U.S. Supreme Court ruling in June 2015, a court in the Virgin Islands and the governor both announced that they would comply with the ruling. However, because of the absence of the lieutenant governor and opposition from the senate president, the order implementing the Court's ruling did not go into effect until late July 2015.

Puerto Rico. In June 2014, five same-sex couples sued in federal court challenging Puerto Rico's marriage ban as unconstitutional. The district court upheld the ban in October 2014 and the couples' appeal was held in abeyance as the Supreme Court decided the issue. After the U.S. Supreme Court's ruling in *Obergefell* in June 2015, the Court of Appeals for the First Circuit sent the case back to the district court, agreeing that the ban was unconstitutional. As a result of this judgment, same-sex couples were able to marry starting in July 2015. Notwithstanding the Supreme Court's decision in *Obergefell* and the First Circuit's judgment, the federal district court judge overseeing the Puerto Rico case ruled that the U.S. Supreme Court's ruling did not apply to Puerto Rico because such a right, according to the district court, had not been incorporated to the territories. A few weeks later the First Circuit overturned the district court holding that the rights to due process and equal protection had been incorporated as to Puerto Rico and that consequently *Obergefell* applied to the U.S. territory. Thereafter, another judge in Puerto Rico entered a final judgment striking down the territory's marriage ban.

American Samoa. American Samoan marriage statutes do not state that only different-sex couples can marry, but when stating the required age for marriage, statutes refer to "the male" and "the female."⁶ Following the 2015 U.S. Supreme Court ruling, the attorney general in American Samoa stated that the ruling did not apply. Others have argued that because the U.S. Supreme Court ruled that marriage was a "fundamental" right, the ruling applies to unincorporated territories. In 2016, when a new district court judge was approved by the American Samoan Senate, he stated that he would not permit same-sex couples to marry until the American Samoan marriage statute had been explicitly changed.

⁶ American Samoa Bar Association. *The American Samoa Code Annotated* 42.0101.

Third, **because their constitutional rights are limited, residents of the territories are not allowed to participate fully in federal representative democracy.** The territories are not fully represented in the U.S. Congress. Each territory elects one representative to the U.S. House of Representatives, but though their representatives—like the representative from the District of Columbia—can propose legislation and vote in committees, they cannot vote on legislation. Additionally, residents of the four “organized territories” can vote in primary elections for presidential nominees, based on party rules, but cannot vote in presidential elections. Residents of American Samoa cannot vote in primary elections nor vote in presidential elections, as they are not U.S. citizens.

Though residents of the territories cannot fully participate in U.S. democracy, Congress can pass federal legislation that applies to the territories. Most legislation defines “state” to include the territories, but Congress may opt to not include the territories. For example, in the 2009 federal hate crime legislation that enumerated sexual orientation and gender identity, the legislation stated, “whoever in the special maritime or territorial jurisdiction of the United States commits an offense... shall be subject to the same penalties.”²²

Fourth, **residents of the territories pay some but not all federal taxes.** Residents of all five territories use the U.S. dollar. Residents of the territories are generally not required to pay federal income taxes on income earned in the territories, though they do pay Social Security and Medicare taxes.²³

WHAT DO WE KNOW ABOUT LGBT PEOPLE LIVING IN THE U.S. TERRITORIES?

Very few demographic or public opinion surveys, outside of the U.S. Census, include the U.S. territories. For example, both the Pew Research Center and Gallup’s U.S. Poll, which regularly conduct public opinion polls, do not include *any* of the U.S. territories in their surveys.

The lack of inclusion of the territories in many surveys combined with the fact that very few surveys in general ask questions about sexual orientation and/or gender identity mean that data about the number of LGBT people living in the territories, let alone demographics about them or their experiences, remain extremely limited. This is especially true as the Gallup Daily Tracking poll has quickly become one of the most commonly used sources of data for demographics about LGBT people.²⁴

And while the decennial census includes the territories, it does not include questions about sexual orientation or gender identity. The 2020 decennial census will allow respondents to identify a married or unmarried same-sex partner, which will allow for the identification of same-sex couples living in the territories and will therefore be an important source of future data analysis, but it does not allow for the identification of individual or uncoupled LGBT people.

The limited available research shows that: a) there are LGBT people living in the U.S. territories and b) they may face similar challenges to those faced by LGBT people living in the United States. For example:

- The 2015 U.S. Transgender Survey (USTS) conducted by the National Center for Transgender Equality had a total of 31 responses from individuals living in American Samoa, Guam, and Puerto Rico. This is not a large enough sample to conduct meaningful analysis of their experiences, but it does show transgender residents in these territories.²⁵
- In 2015, the Williams Institute released analysis of 2010 U.S. Census data about same-sex couples living in Puerto Rico. Their analysis reveals that there were more than 6,600 same-sex couples living in Puerto Rico, 70% of whom were female same-sex couples.²⁶
- Both Guam and the Northern Mariana Islands participated in the 2015 Youth Risk Behavior Survey (YRBS), which included a sexual orientation question. Guam also participated in the 2014 and 2017 Behavioral Risk Factor Surveillance System (BRFSS), a collaborative federal-state survey, that includes questions about sexual orientation and gender identity.²⁷
- A community-based survey of LGBT people was conducted in Guam in 2014, and it found that 37% of LGBT people in the survey had been bullied in the past because of their sexual orientation, and further that LGBT people reported higher rates of alcohol and tobacco use than the general population, a finding mirrored in the broader research about LGBT people in the United States.²⁸

It is imperative that more research be conducted to better understand the demographics and experiences of people living in the U.S. territories. In particular, adding questions about sexual orientation and gender identity to the decennial census would dramatically improve our understanding of both LGBT residents of the territories and throughout the United States.

WHAT IS THE STATUS OF LGBT EQUALITY IN THE U.S. TERRITORIES?

For more than 10 years, the Movement Advancement Project (MAP) has tracked state-level LGBT laws and policies across the 50 states and the District of Columbia. With the release of this report, MAP is now actively tracking LGBT-related laws and policies in the five populated U.S. territories.

Overall LGBT Policy Tally

MAP classifies various laws and policies that impact LGBT people into two broad categories: those related to sexual orientation and those related to gender identity. These policies are scored to create a "Sexual Orientation Policy Tally" and a "Gender Identity Policy Tally." Examined together, these policies generate an "Overall Policy Tally," which counts the number of positive LGBT laws and policies, as well as negative laws and the policies, in each territory or state that help drive equality for LGBT people. *Table 1* on the next page shows the Overall Policy Tally for each of the five territories as well as the policy tally for sexual orientation and gender identity separately.

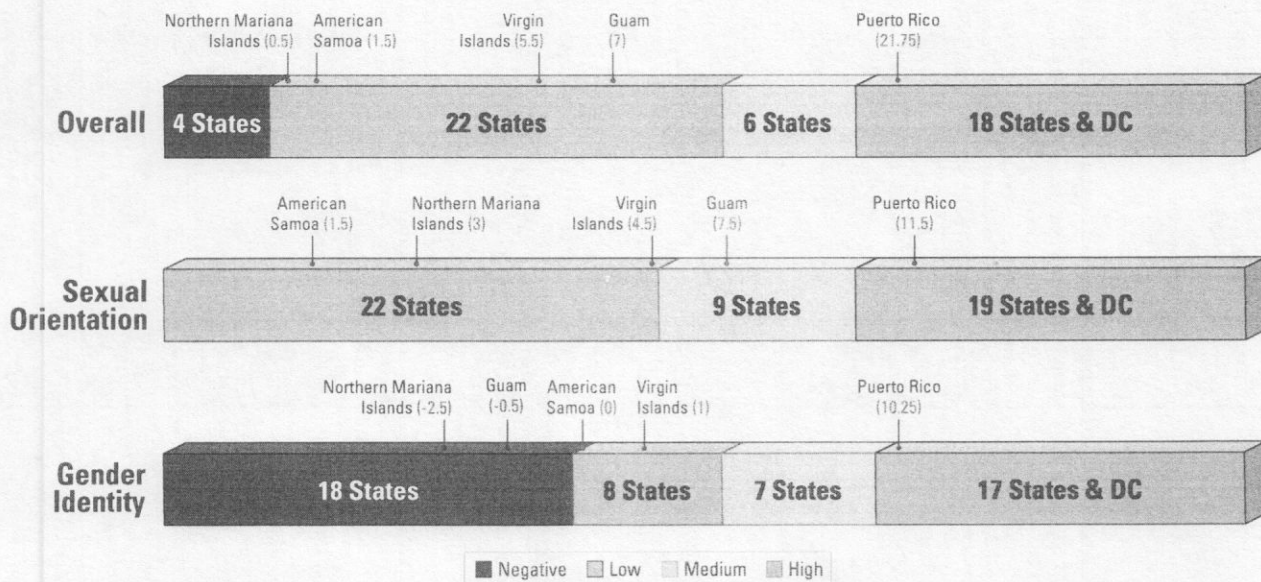
Overall LGBT Policy Tally. Puerto Rico has the highest overall LGBT policy tally among the territories

(21.75 out of 40.5), placing it in the "high" category along with 18 states and the District of Columbia, as shown in *Figure 4*. The other four territories have a "low" LGBT policy tally scores, as do 21 U.S. states. American Samoa and the Northern Mariana Islands each have a low LGBT policy tally of 0.5, which is the same as South Carolina.

Sexual Orientation Policy Tally. Looking specifically at laws and policies focused on sexual orientation, as shown in *Figure 4*, 18 states and the District of Columbia have a "high" sexual orientation policy tally, as does Puerto Rico. Puerto Rico and Guam fall into the "medium" category, where nine states also fall. American Samoa, the Northern Mariana Islands, and the U.S. Virgin Islands all have low sexual orientation policy tallies, as do 23 states. Puerto Rico leads the group with 11.5, compared to 7.5 for Guam, 4.5 for the U.S. Virgin Islands, 3 for the Northern Mariana Islands, and 0.5 for American Samoa. No state or territory has a negative sexual orientation policy tally.


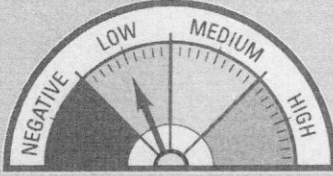

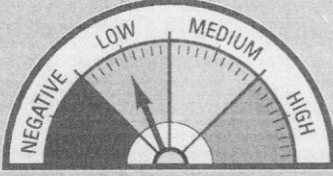

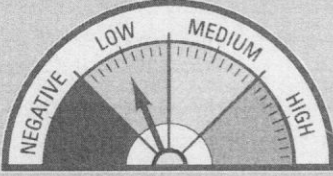
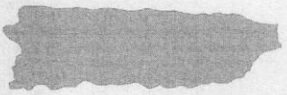
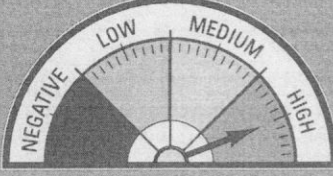
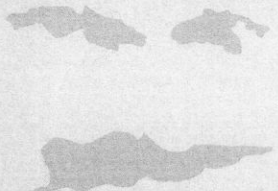
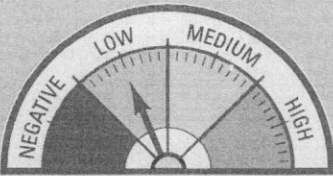
Gender Identity Policy Tally. All the territories have lower policy tallies for gender identity than they do for sexual orientation. Two territories, Guam and the Northern Mariana Islands, have negative policy tallies stemming primarily from challenges updating identity documents. Notably, 19 states also have negative gender identity policy tallies. American Samoa and the U.S. Virgin Islands have "low" gender identity scores, and

Figure 4: Territories' LGBT, Sexual Orientation, and Gender Identity Policy Tallies in Relation to the 50 States & D.C.
Scores Shown in Parentheses



Complete rankings for the 50 states, the District of Columbia, and the five territories are available on the [LGBT Equality Maps](#). Data as of June 3, 2019.

Table 1: U.S. Territories Vary in Overall LGBT, Sexual Orientation, and Gender Identity Policy Tallies

U.S. Territory	Overall Tally (Out of 40.5)	Sexual Orientation Tally (Out of 20)	Gender Identity Tally (Out of 20.5)
<p>American Samoa</p> 	<p>Overall Tally: 1.5/40.5 LOW</p> 	<p>1.5/20</p> <p>LOW</p>	<p>0/20.5</p> <p>LOW</p>
<p>Guam</p> 	<p>Overall Tally: 7/40.5 LOW</p> 	<p>7.5/20</p> <p>MEDIUM</p>	<p>-0.5/20.5</p> <p>NEGATIVE</p>
<p>Northern Mariana Islands</p> 	<p>Overall Tally: 0.5/40.5 LOW</p> 	<p>3/20</p> <p>LOW</p>	<p>-2.5/20.5</p> <p>NEGATIVE</p>
<p>Puerto Rico</p> 	<p>Overall Tally: 21.75/40.5</p> 	<p>11.5/20</p>	<p>10.25/20.5</p>
<p>U.S. Virgin Islands</p> 	<p>Overall Tally: 5.5/40.5</p> 	<p>4.5/20</p>	<p>1/20.5</p>

Puerto Rico has the highest gender identity tally (10.25) of the territories, placing it the “high” category along with 17 states and the District of Columbia.

Seven Key Policy Areas

The more than 39 laws and policies that MAP tracks fall into seven broad categories that demonstrate multiple areas of life:

- Relationship and Parental Recognition
- Nondiscrimination Laws
- Religious Exemption Laws
- LGBT Youth Laws and Policies
- Healthcare Policies
- Criminal Justice Policies
- Accurate Identity Documents

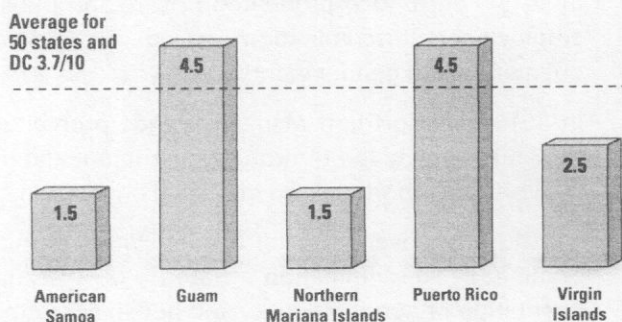
Each broad category is discussed below for each territory with advances noted for each issue area. What emerges is that there are several key areas where several territories have led advances, including in the areas of nondiscrimination and youth policy, but that overall there remains much work to do. Full analyses of every policy area, for each territory, are available on MAP’s website.

Relationship & Parental Recognition

Guam has the highest relationship recognition policy tally score of (5.5 out of 10), as shown in *Figure 5*. Notable policies in the territories in this category include:

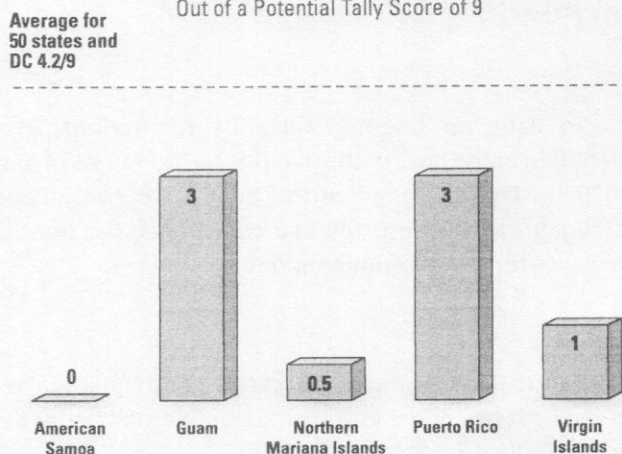
- Guam has a family and medical leave law that permits leave for a child for whom a parent is standing *in loco parentis*.
- Puerto Rico has paid maternity leave for the birth or adoption of a child.
- The result of a 2015 Supreme Court of the Virgin Islands case is that second-parent adoption is permitted for an unmarried partner of an existing legal parent.
- The 2015 U.S. Supreme Court decision in *Obergefell* extended all the rights and obligations of marriage to same-sex couples, including the presumption of parentage for children born to married couples, as discussed on page 5. There is some question as to the “on the ground” implementation of the Court’s ruling in American Samoa.

Figure 5: Relationship & Parental Recognition
Out of a Potential Tally Score of 10



Data as of June 3, 2019.

Figure 6: Nondiscrimination Laws
Out of a Potential Tally Score of 9



Data as of June 3, 2019.

Nondiscrimination Laws

Puerto Rico and Guam are tied for the highest nondiscrimination policy tally score (3 out of 9), as shown in *Figure 6* above.

Four of the five territories (all but American Samoa) are a part of the federal circuit courts system. As a result, rulings from the federal courts about the extent to which discrimination based on sexual orientation and/or gender identity are prohibited under federal laws such as Title VII (employment) or Title IX (education) of the Civil Rights Acts are applicable in these territories in addition to explicit protections made available under the laws of each territory. Currently there are positive rulings regarding gender identity from U.S. Courts of Appeals covering Guam, the Northern Mariana Islands, and Puerto Rico, but no positive rulings related to sexual orientation.

Notable policies in the territories in this category include:

- In 2013, Puerto Rico prohibited private and public employment discrimination based on sexual orientation and gender identity.
- In 2013, the Northern Mariana Islands prohibited discrimination by the territorial government and by the visitors' authority based on sexual orientation.
- In 2013, the government of the U.S. Virgin Islands prohibited discrimination based on sexual orientation or gender identity and began accepting complaints from government employees of discrimination on those bases.
- In 2015, Guam passed a law prohibiting discrimination in private and public employment based on both sexual orientation and gender identity.

Religious Exemptions

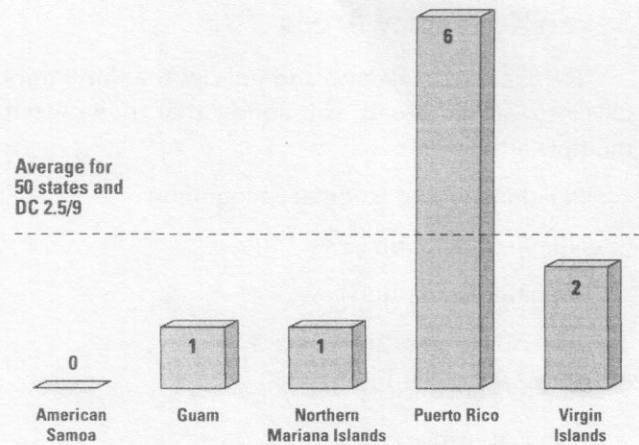
To date, no targeted religious exemptions were identified in the laws of the five U.S. territories. As of May 2019, the legislature in Puerto Rico was still considering a religious exemptions bill that could open the door to taxpayer-funded discrimination.²⁹

LGBT Youth Laws & Policies

Puerto Rico has the highest LGBT youth policy tallies (6 out of 7) as shown in *Figure 7*. Notable policies in the territories in this category include:

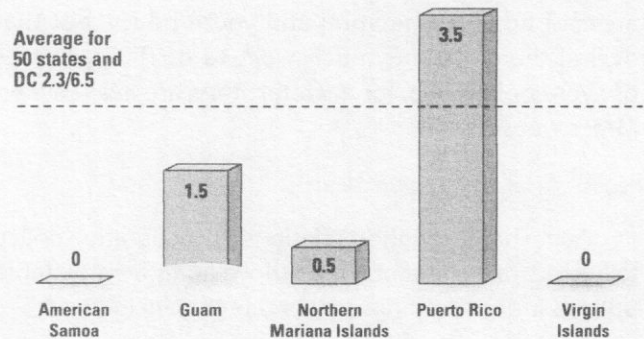
- Guam prohibited bullying based on sexual orientation in 2011.
- The Northern Mariana Islands State Board of Education issued regulations in 2002 prohibiting discrimination and harassment based on sexual orientation, and in 2011 prohibiting bullying based on sexual orientation and gender identity.
- In 2014, the U.S. Virgin Islands passed a bullying prevention statute explicitly enumerating sexual orientation. In 2017, the U.S. Virgin Islands Attorney General provided guidance requested by the territory's education commissioner clarifying that discrimination against transgender students was illegal under federal civil rights laws.
- In 2019, the governor of Puerto Rico issued an executive order requiring institutions seeking medical licensure to certify that they will not offer

Figure 7: LGBT Youth Laws & Policies
Out of a Potential Tally Score of 7



Data as of June 3, 2019.

Figure 8: Healthcare Laws & Policies
Out of a Potential Tally Score of 6.5



Data as of June 3, 2019.

conversion therapy. As of May 2019, the legislature was considering legislation to ban the practice.³⁰ Puerto Rico's student bill of rights and accompanying regulations prohibit discrimination and bullying based on sexual orientation and gender identity.

Healthcare Policies

Puerto Rico has the highest healthcare policy tally (3.5 out of 6.5), as shown in *Figure 8*. Notable policies in the territories in this category include:

- Guam, Puerto Rico, and the Northern Mariana Islands have all taken steps to include measures of sexual orientation (and gender identity in the case of Guam) in federal surveys.

- Puerto Rico has prohibitions on discrimination in healthcare and health insurance based on sexual orientation and gender identity.

Criminal Justice Policies

Puerto Rico has the highest criminal justice policy tally (2.75 out of 4, as shown in *Figure 9*). All five territories are covered by the federal hate crime law, which explicitly enumerates sexual orientation and gender identity. Notable policies in the territories in this category include:

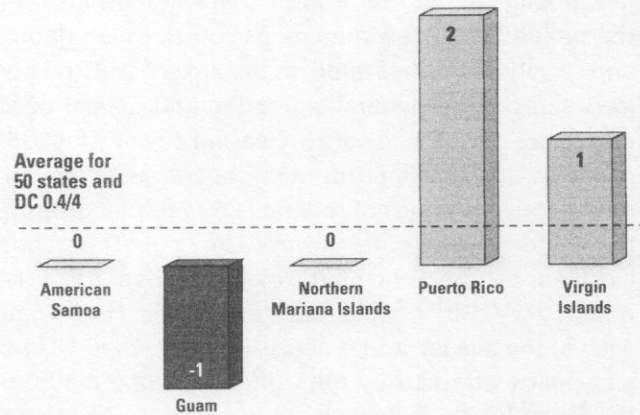
- In 2002, Puerto Rico passed a hate crime law that enumerates sexual orientation and gender identity.
- U.S. Virgin Islands passed a hate crime law in 2014 that enumerates sexual orientation and gender identity.
- Both Guam and the U.S. Virgin Islands have HIV criminalization statutes.

Accurate Identity Documents

Only Puerto Rico has taken proactive steps to update policies and procedures allowing transgender people to update identity documents, and that is reflected in its policy tallies (2.75/4). Puerto Rico recently took several steps, including allowing updates to birth certificates in 2018. Guam, the Northern Mariana Islands, and the U.S. Virgin Islands all have negative policy tallies for this category of laws and policies, as shown in *Figure 10*, meaning these territories impose significant burdens and obstacles on transgender people seeking to update their documents.

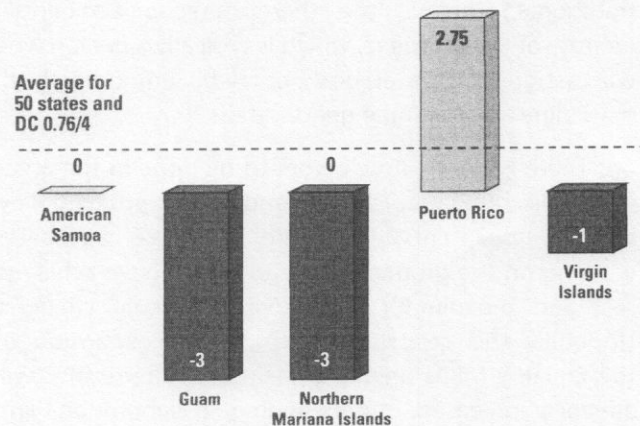
For a comprehensive view of each territory's category and overall scores, see both this report's Appendix and MAP's website.

Figure 9: Criminal Justice Laws & Policies
Out of a Potential Tally Score of 4



Data as of June 3, 2019.

Figure 10: Ability for Transgender People to Obtain Accurate Identity Documents
Out of a Potential Tally Score of 4





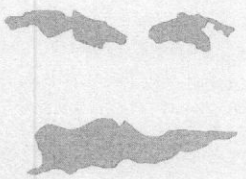


Data as of June 3, 2019.

CONCLUSION

For the more than 3.5 million people living in the five populated U.S. territories, the relationships with the United States government, its courts, its legislature, and society are complicated. In the area of LGBT-related laws and policies, federal legislation and federal court rulings are one path toward increasing equality for LGBT residents of the U.S. territories—though as this report outlines, whether or not federal laws and rulings apply to the territories is not always clear-cut. This report examines another route: territory-level laws and policies that impact LGBT people and their families. Examining each of the five territories across the more than 38 laws and policies tracked by MAP offers just one metric of LGBT people's experiences in these territories. This report does not purport to speak to the lived experiences of LGBT people in the territories, which are influenced by family, the role of faith, and the history of colonialism and missionary work, relationships and connections to the United States, as well as indigenous beliefs and practices about sexuality and/or gender. For example, in traditional Samoan culture, there is a recognized gender identity of the *fa'afafine*, which is typically a person who was assigned male at birth but who embodies both masculine and feminine gender traits.³¹

There is clearly much work to be done in the areas of nondiscrimination, health and safety, youth policy, identity documents, and more. That said, advocates working on the ground in the territories have achieved real and meaningful legislative and legal changes. Hopefully this report and the related expansion of the Equality Maps online to include the territories will advance increased understanding, collaboration, and success in providing meaningful changes for LGBT residents of the territories.

U.S. Territories	Relationship and Parental Recognition <i>Out of 10</i>	Non-Discrimination Laws <i>Out of 9</i>	LGBT Youth Laws and Policies <i>Out of 7</i>	Healthcare Laws <i>Out of 6.5</i>	Criminal Justice Laws <i>Out of 4</i>	Accurate Identity Documents <i>Out of 4</i>	Overall Policy Tally <i>Out of 40.5</i>
American Samoa 	1.5*	0	0	0	0	0	1.5
Guam 	5.5	3	1	1.5	-1	-3	7
Northern Mariana Islands 	1.5	0.5	1	0.5	0	-3	0.5
Puerto Rico 	4.5	3	6	3.5	2	2.75	21.75
U.S. Virgin Islands 	2.5	1	2	0	1	-1	5.5

The U.S. Supreme Court ruling in *Obergefell* extending marriage to same-sex couples applies to American Samoa. However, there is some question as to the "on the ground" implementation, as discussed on page 5.

ENDNOTES

- ¹ U.S. Census Bureau, Population Division. (December 2018). Estimates of the Total Resident Population and Resident Population Age 18 Years and Older for the United States, States, and Puerto Rico: July 1, 2018 (SCPRC-EST2018-18+POP-RES); U.S. Census Bureau. (October 2013). 2010 Census American Samoa; U.S. Census Bureau. (October 2013). 2010 Census Guam; U.S. Census Bureau. (October 2013). 2010 Census Commonwealth of the Northern Mariana Islands; U.S. Census Bureau. (October 2013). 2010 Census U.S. Virgin Islands.
- ² Harvard Law Review. (2017). U.S. Territories: Introduction. 130: 1617.
- ³ U.S. Census Bureau. (October 2013). 2010 Census American Samoa.
- ⁴ U.S. Census Bureau. (October 2013). 2010 Census Guam.
- ⁵ U.S. Census Bureau, Population Division. (December 2018). Estimates of the Total Resident Population and Resident Population Age 18 Years and Older for the United States, States, and Puerto Rico: July 1, 2018 (SCPRC-EST2018-18+POP-RES).
- ⁶ U.S. Census Bureau. (October 2013). 2010 Census U.S. Virgin Islands.
- ⁷ U.S. Census Bureau. QuickFacts: Race and Ethnic Origin.
- ⁸ Harvard Law Review. (2017). Guam and the Case for Federal Deference. 130:1704.
- ⁹ Michael W. Weaver. (2008). The Territory Federal Jurisdiction Forgot: The Question of Greater Federal Jurisdiction in American Samoa. *Pacific Rim Law & Policy Journal*, 17(2): 325-367.
- ¹⁰ *Downes v. Bidwell*, 182 U.S. 244 (1901).
- ¹¹ Torruella, J.R. (2013). Ruling American's Colonies: The Insular Cases. *Yale Law & Policy Review*, 32(1): 57-95; *Examining Bd. v. Flores de Otero*, 426 U.S. 572 (1976).
- ¹² *Balzac v. Porto Rico*, 258 U.S. 298 (1922).
- ¹³ Harvard Law Review. (2017). Territorial Federalism. 130: 1632 quoting *United States v. Lebrón-Caceres*, 157 F. Supp. 3d 80 (D.P.R. 2016).
- ¹⁴ *Dorr v. United States*, 195 U.S. 138 (1904).
- ¹⁵ *Balzac v. Porto Rico*, 258 U.S. 298 (1922)
- ¹⁶ Torruella (2013).
- ¹⁷ *Harris v. Rosario*, 446 U.S. 651 (1980).
- ¹⁸ *Commonwealth v. Valle*, 136 S. Ct. 1864 (2016).
- ¹⁹ *Davis v. Commonwealth Election Comm'n*, 844 F.3d 1087 (9th Cir. 2016)
- ²⁰ *Tuava v. United States* 788 F.3d 300, 302 (D.C. Cir. 2015).
- ²¹ See, for example, *Examining Bd. Of Eng'rs, Architects & Surveyors v. Flores de Otero*, 426 U.S. 572, 600 (1976) and *In re Conde-Vidal*, No. 16-1313 (1st Cir. 2016).
- ²² 18 U.S. Code § 249.
- ²³ Sean Lowry. (October 2016). Tax Policy and U.S. Territories: Overview and Issues for Congress. Congressional Research Service.
- ²⁴ For example, Williams Institute. (2019). LGBT Demographic Data Interactive.
- ²⁵ Sandy E. James, et al. (2016). The Report of the 2015 U.S. Transgender Survey. National Center for Transgender Equality.
- ²⁶ Gary J. Gates. (January 2015). Same-sex Couples in Puerto Rico: A demographic summary. The Williams Institute.
- ²⁷ Centers for Medicare & Medicaid Services. (October 2018). Behavioral Risk Factor Surveillance System.
- ²⁸ Annette David, Grace Lapid-Rosadino, and Tasha Tydingco. (2016). Guam State Epidemiological Profile, 2015 Update. Guam State Epidemiological Outcomes Workgroup, Prevention and Training Branch, Guam Behavioral Health and Wellness Center.
- ²⁹ Senate Bill 1253 (April 23, 2019).
- ³⁰ Senate Bill 1254 (April 23, 2019).
- ³¹ See, for example, Robert Carney. (April 1, 2015). The Health Needs of the Fa'afafine in American Samoa and Transgender Research Methodology. *The Journal of Global Health*.

ABOUT THIS SPOTLIGHT

This report is part of an ongoing series that will provide in-depth analyses of laws and policies tracked at the Movement Advancement Project's "Equality Maps," found at www.lgbtmap.org/equality-maps. The information in this report is current as of the date of publication; but the online maps are updated in real time as policy changes occur.



movement advancement project ▶

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EXECUTIVE SUMMARY

Injustice at Every Turn

A Report of the National
Transgender Discrimination Survey

Lead authors in alphabetical order:

Jaime M. Grant, Ph.D.

Lisa A. Mottet, J.D.

Justin Tanis, D.Min.

with Jack Harrison

Jody L. Herman, Ph.D.

and Mara Keisling



National Gay and Lesbian
Task Force



EXECUTIVE SUMMARY

This study brings to light what is both patently obvious and far too often dismissed from the human rights agenda. Transgender and gender non-conforming people face injustice at every turn: in childhood homes, in school systems that promise to shelter and educate, in harsh and exclusionary workplaces, at the grocery store, the hotel front desk, in doctors' offices and emergency rooms, before judges and at the hands of landlords, police officers, health care workers and other service providers.

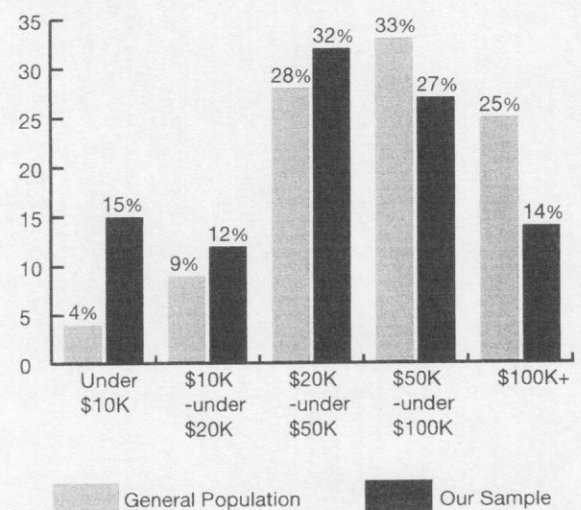
The National Gay and Lesbian Task Force and the National Center for Transgender Equality are grateful to each of the 6,450 transgender and gender non-conforming study participants who took the time and energy to answer questions about the depth and breadth of injustice in their lives. A diverse set of people, from all 50 states, the District of Columbia, Puerto Rico, Guam and the U.S. Virgin Islands, completed online or paper surveys. This tremendous gift has created the first 360-degree picture of discrimination against transgender and gender non-conforming people in the U.S. and provides critical data points for policymakers, community activists and legal advocates to confront the appalling realities documented here and press the case for equity and justice.

KEY FINDINGS

Hundreds of dramatic findings on the impact of anti-transgender bias are presented in this report. In many cases, a series of bias-related events lead to insurmountable challenges and devastating outcomes for study participants. Several meta-findings are worth noting from the outset:

- Discrimination was pervasive throughout the entire sample, yet **the combination of anti-transgender bias and persistent, structural racism was especially devastating**. People of color in general fare worse than white participants across the board, with African American transgender respondents faring far worse than all others in most areas examined.
- Respondents **lived in extreme poverty**. Our sample was nearly four times more likely to have a household income of less than \$10,000/year compared to the general population.ⁱ
- A staggering **41% of respondents reported attempting suicide** compared to 1.6% of the general population,ⁱⁱ with rates rising for those who lost a job due to bias (55%), were harassed/bullied in school (51%), had low household income, or were the victim of physical assault (61%) or sexual assault (64%).

Household Income of Respondentsⁱⁱⁱ



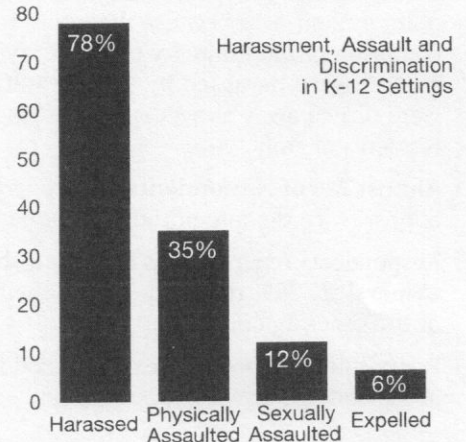
For the full report, please visit our websites at www.TheTaskForce.org and www.TransEquality.org

HARASSMENT AND DISCRIMINATION IN EDUCATION

- Those who expressed a transgender identity or gender non-conformity while in grades K-12 reported **alarming rates of harassment (78%), physical assault (35%) and sexual violence (12%)**; harassment was so severe that it led **almost one-sixth (15%)** to leave a school in K-12 settings or in higher education.
- Respondents who have been **harassed and abused by teachers** in K-12 settings showed dramatically worse health and other outcomes than those who did not experience such abuse. Peer harassment and abuse also had highly damaging effects.

Respondents Income by Mistreatment in School^v

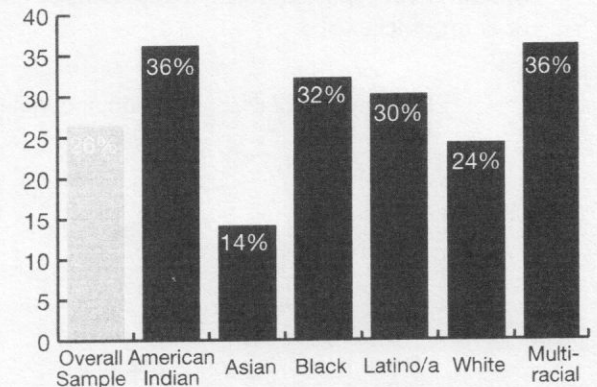
	General Population	No school mistreatment	Mistreated in school
Under \$10K	4	12	21
\$10K - under \$20K	9	11	15
\$20K - under \$50K	28	31	33
\$50k - under \$100k	33	30	21
\$100k+	25	16	9



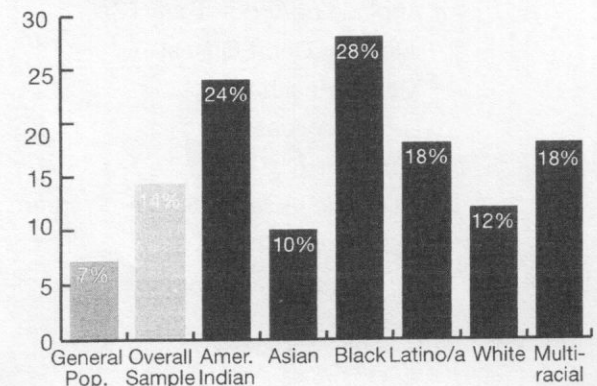
EMPLOYMENT DISCRIMINATION AND ECONOMIC INSECURITY

- Double the rate of unemployment:** Survey respondents experienced unemployment at twice the rate of the general population at the time of the survey,^v with rates for people of color up to four times the national unemployment rate.
- Widespread mistreatment at work: **Ninety percent (90%) of those surveyed reported experiencing harassment, mistreatment or discrimination** on the job or took actions like hiding who they are to avoid it.
- Forty-seven percent (47%) said they had experienced an adverse job outcome, such as **being fired, not hired or denied a promotion** because of being transgender or gender non-conforming.
- Over one-quarter (26%) reported that they had lost a job** due to being transgender or gender non-conforming and 50% were harassed.
- Large majorities attempted to avoid discrimination by **hiding their gender or gender transition (71%)** or delaying their gender transition (57%).
- The **vast majority (78%)** of those who transitioned from one gender to the other reported that they **felt more comfortable at work and their job performance improved**, despite high levels of mistreatment.
- Overall, **16% said they had been compelled to work in the underground economy** for income (such as doing sex work or selling drugs).
- Respondents who were currently unemployed experienced debilitating negative outcomes**, including nearly double the rate of working in the underground economy (such as doing sex work or selling drugs), twice the homelessness, 70% more incarceration, and more negative health outcomes, such as nearly double the HIV infection rate and nearly double the rate of current drinking or drug misuse to cope with mistreatment, compared to those who were employed.
- Respondents who had lost a job due to bias also experienced ruinous consequences** such as four times the rate of homelessness, 70% more current drinking or misuse of drugs to cope with mistreatment, 50% more incarceration, more than double the rate working in the underground economy, and more than double the HIV infection rate, compared to those who did not lose a job due to bias.

Job Loss Due to Bias By Race



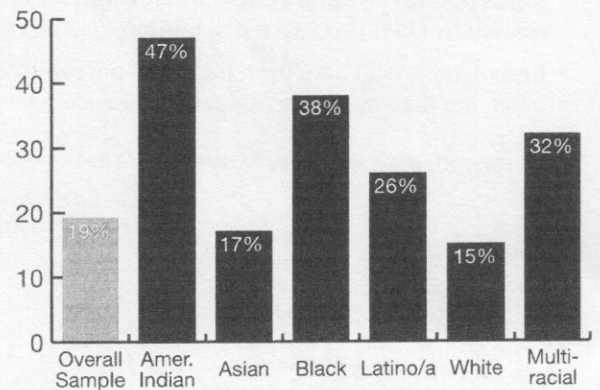
Unemployment Rate By Race



HOUSING DISCRIMINATION AND HOMELESSNESS

- Respondents reported various forms of direct housing discrimination — **19% reported having been refused a home or apartment** and 11% reported being evicted because of their gender identity/expression.
- **One-fifth (19%) reported experiencing homelessness** at some point in their lives because they were transgender or gender non-conforming; **the majority of those trying to access a homeless shelter were harassed by shelter staff or residents (55%), 29% were turned away altogether, and 22% were sexually assaulted by residents or staff.**
- **Almost 2% of respondents were currently homeless**, which is almost twice the rate of the general population (1%).^{vi}
- Respondents reported **less than half the national rate of home ownership**: 32% reported owning their home compared to 67% of the general population.^{vii}
- **Respondents who have experienced homelessness were highly vulnerable** to mistreatment in public settings, police abuse and negative health outcomes.

“I was denied a home/apartment” by Race



DISCRIMINATION IN PUBLIC ACCOMMODATIONS

- **Fifty-three percent (53%) of respondents reported being verbally harassed or disrespected in a place of public accommodation**, including hotels, restaurants, buses, airports and government agencies.
- Respondents experienced widespread abuse in the public sector, and were often abused at the hands of “helping” professionals and government officials. **One fifth (22%) were denied equal treatment by a government agency or official**; 29% reported police harassment or disrespect; and 12% had been denied equal treatment or harassed by judges or court officials.

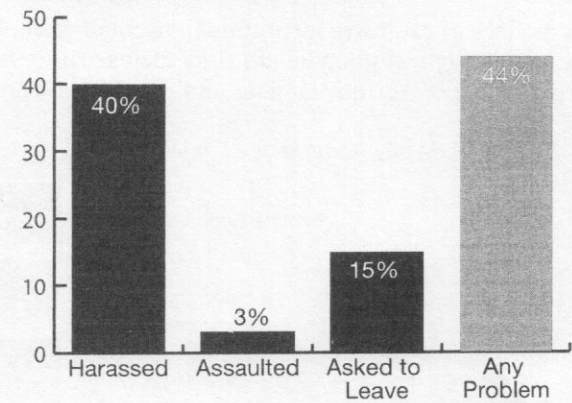
Experiences of Discrimination and Violence in Public Accommodations

Location	Denied Equal Treatment	Harassed or Disrespected	Physically Assaulted
Retail Store	32%	37%	3%
Police Officer	20%	29%	6%
Doctor's Office or Hospital	24%	25%	2%
Hotel or Restaurant	19%	25%	2%
Government Agency/Official	22%	22%	1%
Bus, Train, or Taxi	9%	22%	4%
Emergency Room	13%	16%	1%
Airplane or Airport Staff/TSA	11%	17%	1%
Judge or Court Official	12%	12%	1%
Mental Health Clinic	11%	12%	1%
Legal Services Clinic	8%	6%	1%
Ambulance or EMT	5%	7%	1%
Domestic Violence Shelter/Program	6%	4%	1%
Rape Crisis Center	5%	4%	1%
Drug Treatment Program	3%	4%	1%

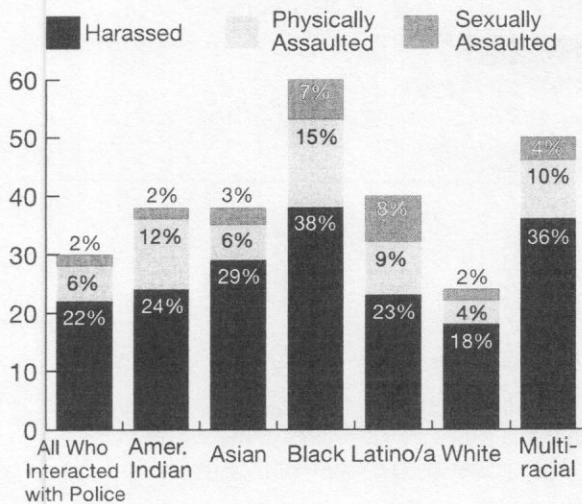
BARRIERS TO RECEIVING UPDATED ID DOCUMENTS

- Of those who have transitioned gender, **only one-fifth (21%) have been able to update all of their IDs and records with their new gender.** One-third (33%) of those who had transitioned had updated *none* of their IDs/records.
- Only 59% reported updating the gender on their driver's license/state ID, meaning **41% live without ID that matches their gender identity.**
- **Forty percent (40%) of those who presented ID** (when it was required in the ordinary course of life) that did not match their gender identity/expression **reported being harassed, 3% reported being attacked or assaulted, and 15% reported being asked to leave.**

Harassment and Violence When Presenting Incongruent Identity Documents



Harassment and Assault by Police Due to Bias by Race



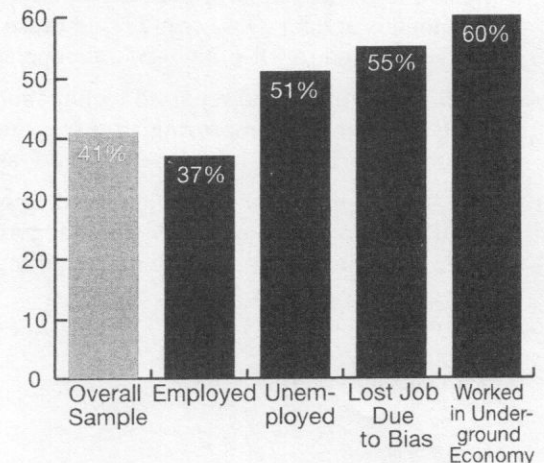
ABUSE BY POLICE AND IN PRISON

- **One-fifth (22%) of respondents** who have interacted with police **reported harassment by police**, with much higher rates reported by people of color.
- **Almost half of the respondents (46%) reported being uncomfortable seeking police assistance.**
- **Physical and sexual assault in jail/prison is a serious problem:** 16% of respondents who had been to jail or prison reported being physically assaulted and 15% reported being sexually assaulted.

DISCRIMINATION IN HEALTH CARE AND POOR HEALTH OUTCOMES

- **Health outcomes for all categories of respondents show the appalling effects of social and economic marginalization,** including much higher rates of HIV infection, smoking, drug and alcohol use and suicide attempts than the general population.
- **Refusal of care: 19% of our sample reported being refused medical care** due to their transgender or gender non-conforming status, with even higher numbers among people of color in the survey.
- **Uninformed doctors: 50% of the sample reported having to teach their medical providers about transgender care.**
- **High HIV rates: Respondents reported over four times the national average of HIV infection, with rates higher among transgender people of color.**^{viii}
- **Postponed care:** Survey participants reported that when they were sick or injured, **many postponed medical care due to discrimination (28%) or inability to afford it (48%).**

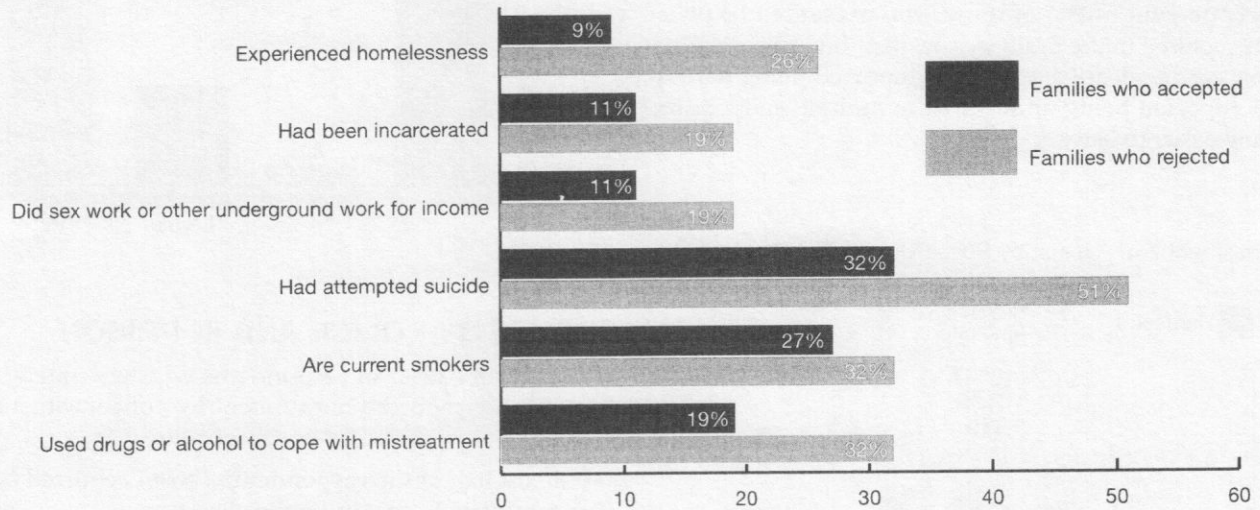
Suicide Attempt by Employment



FAMILY ACCEPTANCE OF GREAT IMPORTANCE

- Forty-three percent (43%) maintained most of their family bonds, while 57% experienced significant family rejection.
- In the face of extensive institutional discrimination, **family acceptance had a protective affect against many threats to well-being** including health risks such as HIV infection and suicide. Families were more likely to remain together and provide support for transgender and gender non-conforming family members than stereotypes suggest.

Impact of Family Acceptance

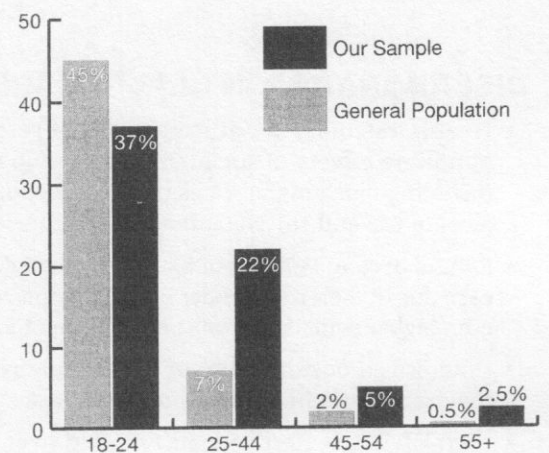


RESILIENCE

Despite all of the harassment, mistreatment, discrimination and violence faced by respondents, study participants also demonstrated determination, resourcefulness and perseverance:

- Although the survey identified major structural barriers to obtaining health care, 76% of transgender respondents have been able to receive hormone therapy, indicating a determination to endure the abuse or search out sensitive medical providers.
- Despite high levels of harassment, bullying and violence in school, many respondents were able to obtain an education by returning to school. Although fewer 18 to 24-year-olds were currently in school compared to the general population, respondents returned to school in large numbers at later ages, with 22% of those aged 25-44 currently in school (compared to 7% of the general population).^x
- Over three-fourths (78%) reported feeling more comfortable at work and their performance improving after transitioning, despite reporting nearly the same rates of harassment at work as the overall sample.
- Of the 26% who reported losing a job due to bias, 58% reported being currently employed and of the 19% who reported facing housing discrimination in the form of a denial of a home/apartment, 94% reported being currently housed.

Status as a Student by Age^x



CUMULATIVE DISCRIMINATION

Sixty-three percent (63%) of our participants had experienced a serious act of discrimination — events that would have a major impact on a person's quality of life and ability to sustain themselves financially or emotionally. These events included the following:

- Lost job due to bias
- Eviction due to bias
- School bullying/harassment so severe the respondent had to drop out
- Teacher bullying
- Physical assault due to bias
- Sexual assault due to bias
- Homelessness because of gender identity/expression
- Lost relationship with partner or children due to gender identity/expression
- Denial of medical service due to bias
- Incarceration due to gender identity/expression

Almost a quarter (23%) of our respondents experienced a catastrophic level of discrimination — having been impacted by at least three of the above major life-disrupting events due to bias. These compounding acts of discrimination — due to the prejudice of others or lack of protective laws — exponentially increase the difficulty of bouncing back and establishing a stable economic and home life.

CONCLUSION

It is part of social and legal convention in the United States to discriminate against, ridicule, and abuse transgender and gender non-conforming people within foundational institutions such as the family, schools, the workplace and health care settings, every day. Instead of recognizing that the moral failure lies in society's unwillingness to embrace different gender identities and expressions, society blames transgender and gender non-conforming people for bringing the discrimination and violence on themselves.

Nearly every system and institution in the United States, both large and small, from local to national, is implicated by this data. Medical providers and health systems, government agencies, families, businesses and employers, schools and colleges, police departments, jail and prison systems—each of these systems and institutions is failing daily in its obligation to serve transgender and gender non-conforming people, instead subjecting them to mistreatment ranging from commonplace disrespect to outright violence, abuse and the denial of human dignity. The consequences of these widespread injustices are human and real, ranging from unemployment and homelessness to illness and death.

This report is a call to action for all of us, especially for those who pass laws and set policies and practices, whose action or continued inaction will make a significant difference between the current climate of discrimination and violence and a world of freedom and equality. And everyone else, from those who drive buses or teach our children to those who sit on the judicial bench or write prescriptions, must also take up the call for human rights for transgender and gender non-conforming people, and confront this pattern of abuse and injustice.

We must accept nothing less than a complete elimination of this pervasive inhumanity; we must work continuously and strenuously together for justice.

"My mother disowned me. I was fired from my job after 18 years of loyal employment. I was forced onto public assistance to survive. But still I have pressed forward, started a new career, and rebuilt my immediate family. You are defined not by falling, but how well you rise after falling. I'm a licensed practical nurse now and am studying to become an RN. I have walked these streets and been harassed nearly every day, but I will not change. I am back out there the next day with my head up."

—Survey Respondent

Our organizations are grateful to the Network for LGBT Health Equity, formerly the Network for LGBT Tobacco Control, for providing \$3,000 in funding for health and outreach workers to reach underserved racial and ethnic populations in this endeavor. Both organizations would also like to thank their foundation funders for their support in making this work possible: Arcus Foundation, David Bohnett Foundation, Evelyn and Walter Haas, Jr. Fund, Ford Foundation, Gill Foundation, Kicking Assets Fund of the Tides Foundation, Open Society Institute and the Wells Fargo Foundation, as well as an Anonymous donor.

INJUSTICE AT EVERY TURN: A REPORT OF THE NATIONAL TRANSGENDER DISCRIMINATION SURVEY, EXECUTIVE SUMMARY

Grant, Jaime M., Lisa A. Mottet, Justin Tanis, Jack Harrison,
Jody L. Herman, and Mara Keisling.

Washington: National Center for Transgender Equality and
National Gay and Lesbian Task Force, 2011.



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- ⁱ U.S. Census Bureau, "Current Population Survey," Annual Social and Economic Supplement (Washington, DC: GPO, 2008).
- ⁱⁱ "U.S.A. Suicide: 2002 Official Final Data," prepared for the American Association of Suicidology by John L. McIntosh, Ph.D. Official data source: Kochanek, K.D., Murphy, S.L., Anderson, R.N., & Scott, C. (2004). Deaths: Final data for 2002. National Vital Statistics Reports, 53 (5). Hyattsville, MD: National Center for Health Statistics DHHS Publication No. (PHS) 2005-1120. Population figures source: table I, p.108. of the National Center for Health Statistics (Kochanek et al., 2004), see http://www.sprc.org/library/event_kit/2002datapgvl.pdf.
- ⁱⁱⁱ General population data is from U.S. Census Bureau, "Current Population Survey," Annual Social and Economic Supplement (Washington, DC: GPO, 2008).
- ^{iv} See note iii. "Mistreatment" includes harassment and bullying, physical or sexual assault, discrimination, or expulsion from school at any level based on gender identity/expression.
- ^v Seven percent (7%) was the rounded weighted average unemployment rate for the general population during the six months the survey was in the field, based on which month questionnaires were completed. See seasonally unadjusted monthly unemployment rates for September 2008 through February 2009. U.S. Department of Labor, Bureau of Labor Statistics, "The Employment Situation: September 2008," (2008): http://www.bls.gov/news.release/archives/empsit_10032008.htm.
- ^{vi} 1.7% were currently homeless in our sample compared to 1% in the general population. National Coalition for the Homeless, "How Many People Experience Homelessness?" (July 2009): http://www.nationalhomeless.org/factsheets/How_Many.html.
- ^{vii} U.S. Department of Housing and Urban Development, "U.S. Housing Market Conditions, 2nd Quarter, 2009" (Washington, DC: GPO, 2009): http://www.huduser.org/portal/periodicals/ushmc/summer09/nat_data.pdf.
- ^{viii} The overall sample reported an HIV infection rate of 2.6% compared to .6% in the general population. United Nations Programme on HIV/AIDS (UNAIDS) and World Health Organization (WHO), "2007 AIDS Epidemic Update" (2007): http://data.unaids.org/pub/EPISlides/2007/2007_epiupdate_en.pdf. People of color in the sample reported substantially higher rates: 24.9% of African-Americans, 10.9% of Latino/as, 7.0% of American Indians, and 3.7% of Asian-Americans in the study reported being HIV positive.
- ^{ix} U.S. Census Bureau, "Current Population Survey: Enrollment Status of the Population 3 Years Old and Over, by Sex, Age, Race, Hispanic Origin, Foreign Born, and Foreign-Born" (Washington, DC: GPO, October 2008): Table 1. <http://www.census.gov/population/www/socdemo/school/cps2008.html>. The last category, over 55, was not rounded to its small size.
- ^x See note ix.

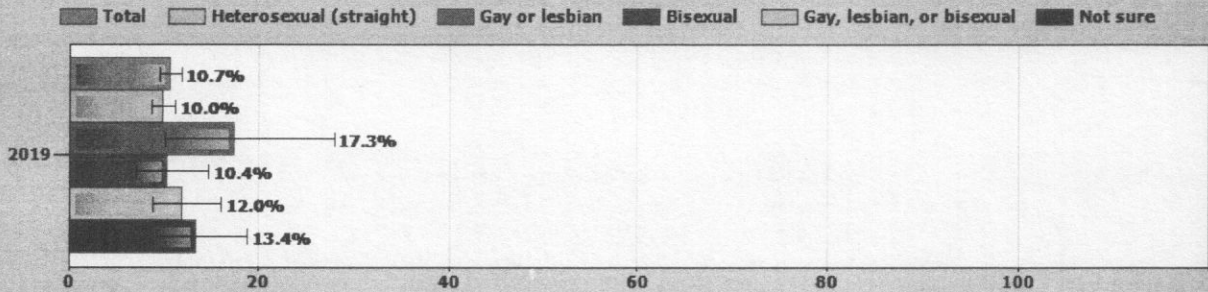
**National Gay and Lesbian
Task Force**



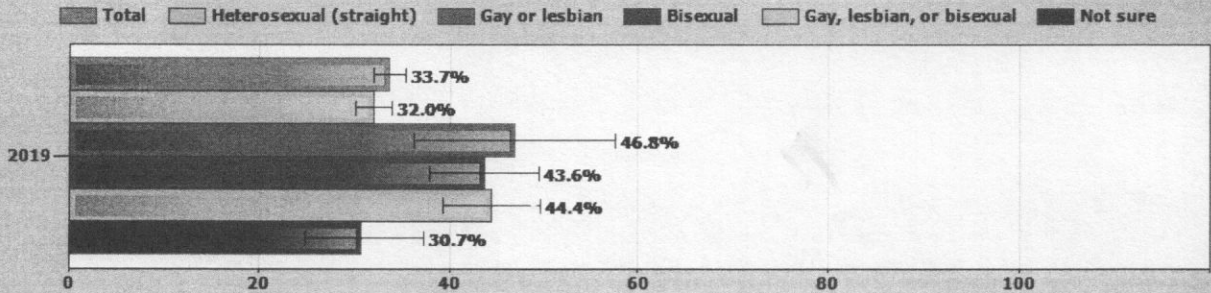
1325 Massachusetts Avenue NW, Suite 600, Washington, DC 20005
202.393.5177 • info@TheTaskForce.org • www.thetaskforce.org

Northern Mariana Islands 2019 Results

Rarely or never wore a seat belt
 (when riding in a car driven by someone else)
 Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



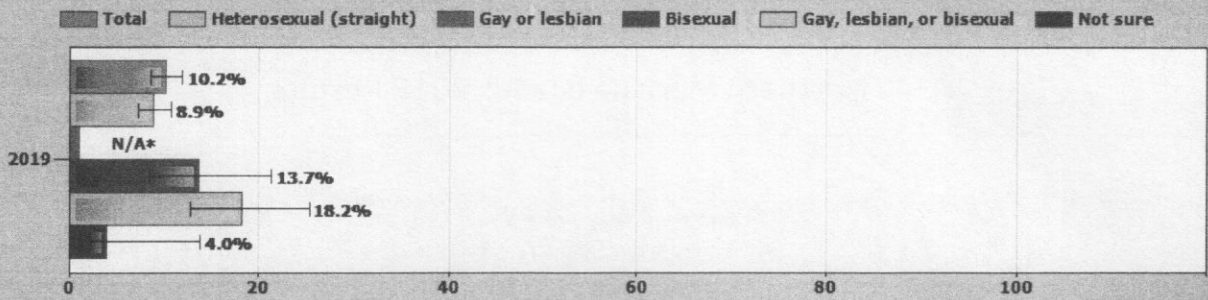
Rode with a driver who had been drinking alcohol
 (in a car or other vehicle, one or more times during the 30 days before the survey)
 Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Drove when they had been drinking alcohol

(in a car or other vehicle, one or more times during the 30 days before the survey, among students who had driven a car or other vehicle during the 30 days before the survey)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



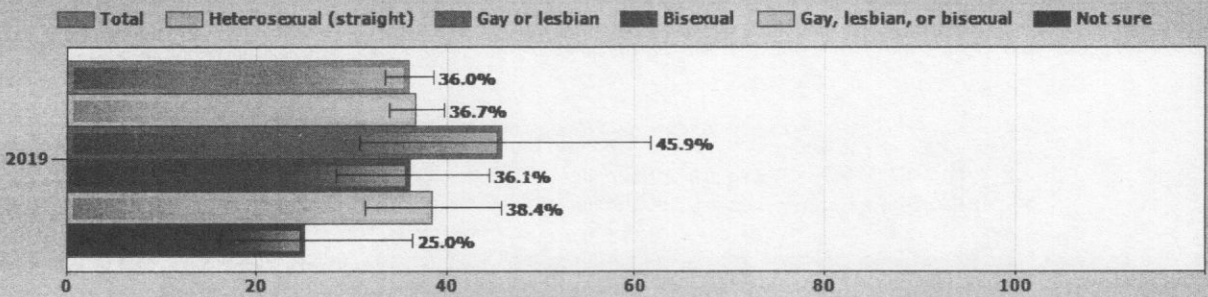
Footnotes

N/A* < 30 respondents for the subgroup

Texted or e-mailed while driving a car or other vehicle

(on at least 1 day during the 30 days before the survey, among students who had driven a car or other vehicle during the 30 days before the survey)

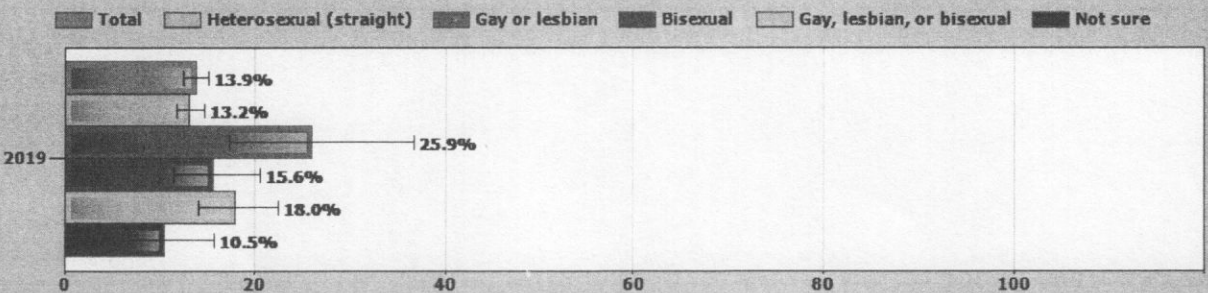
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



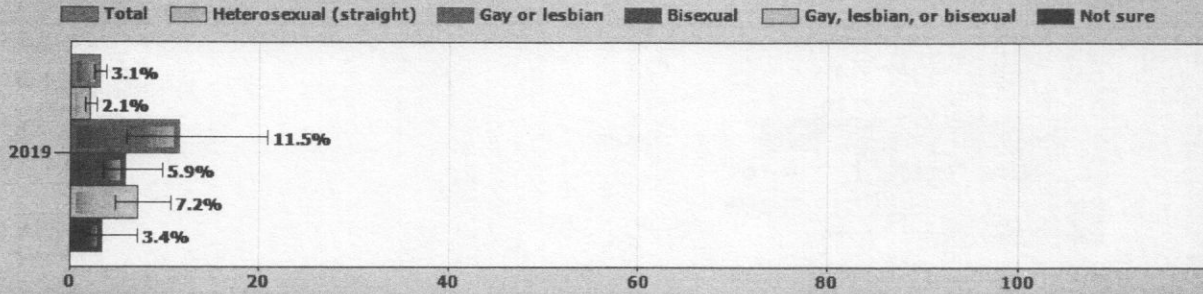
Carried a weapon

(such as a gun, knife, or club, on at least 1 day during the 30 days before the survey)

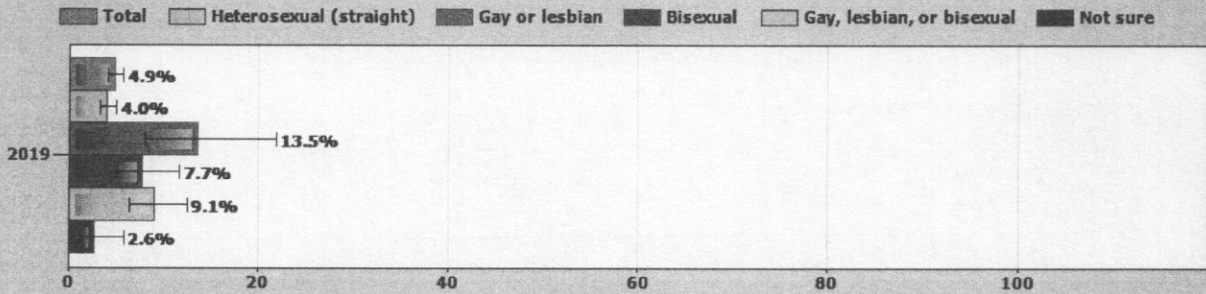
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



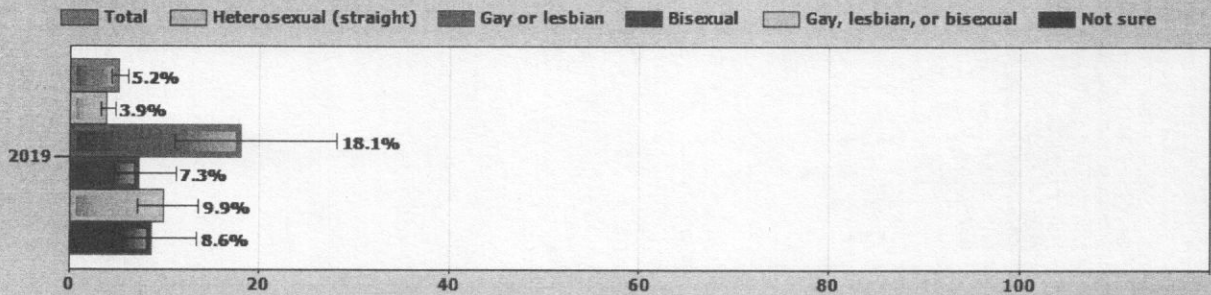
Carried a weapon on school property
 (such as a gun, knife, or club, on at least 1 day during the 30 days before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



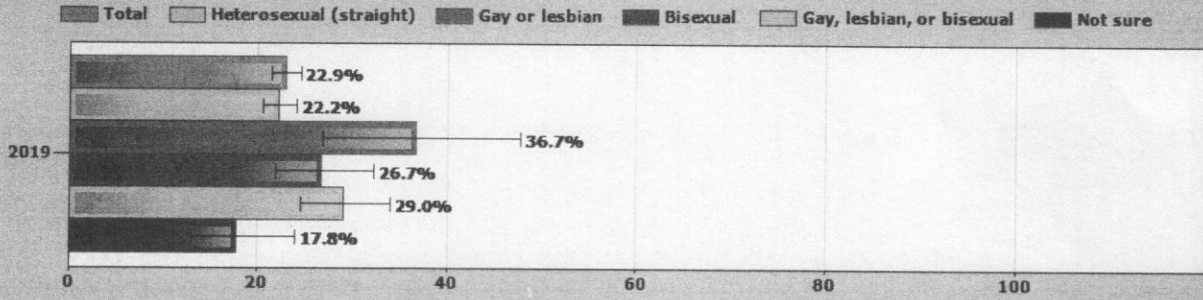
Carried a gun
 (on at least 1 day during the 12 months before the survey, not counting the days when they carried a gun only for hunting or for a sport such as target shooting)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



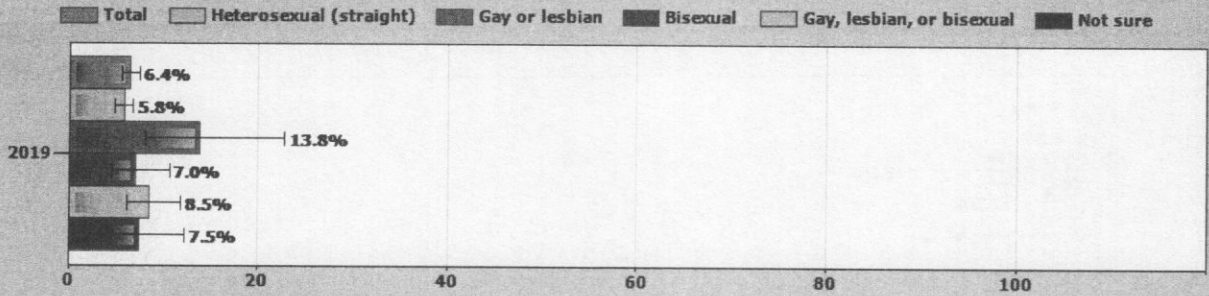
Were threatened or injured with a weapon on school property
 (such as a gun, knife, or club, one or more times during the 12 months before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



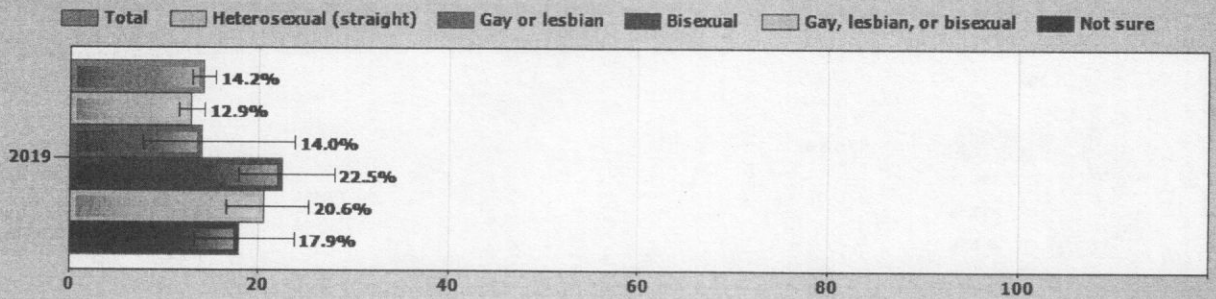
Were in a physical fight
 (one or more times during the 12 months before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



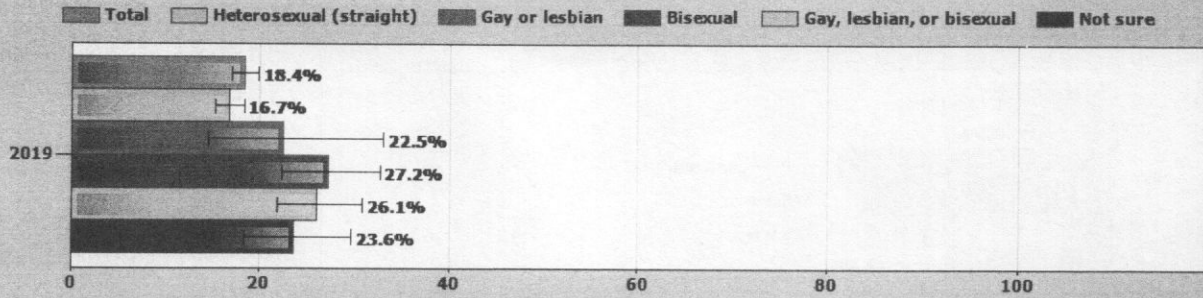
Were in a physical fight on school property
 (one or more times during the 12 months before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



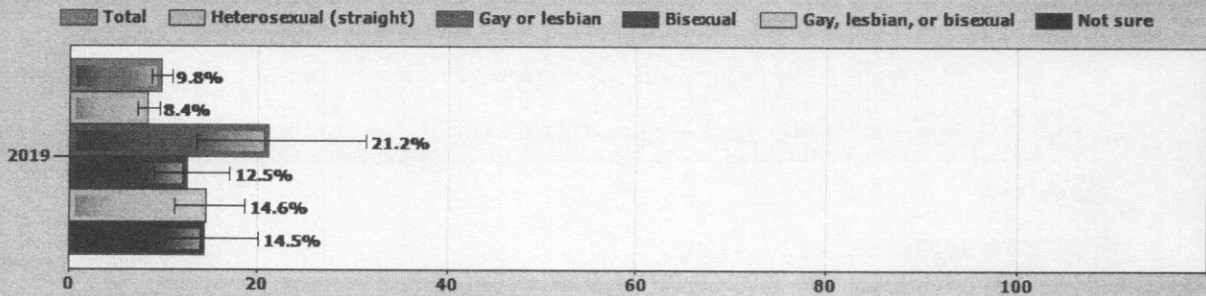
Were electronically bullied
 (counting being bullied through texting, Instagram, Facebook, or other social media, during the 12 months before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



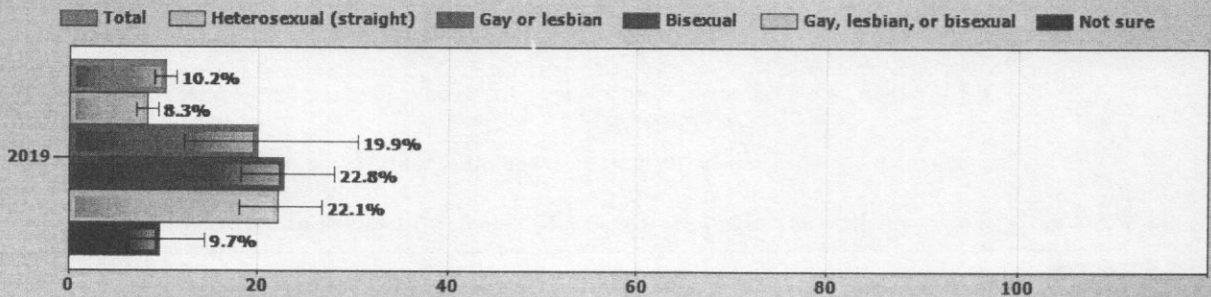
Were bullied on school property
 (during the 12 months before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Did not go to school because they felt unsafe at school or on their way to or from school
 (on at least 1 day during the 30 days before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



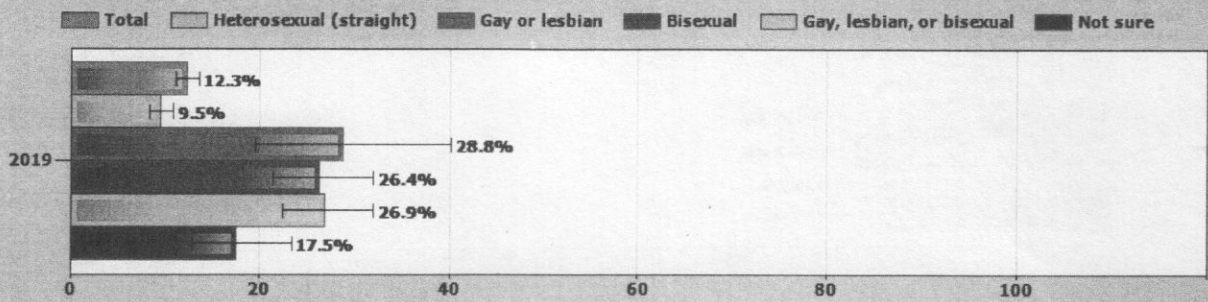
Were ever physically forced to have sexual intercourse
 (when they did not want to)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Experienced sexual violence by anyone

(including kissing, touching, or being physically forced to have sexual intercourse when they did not want to, one or more times during the 12 months before the survey)

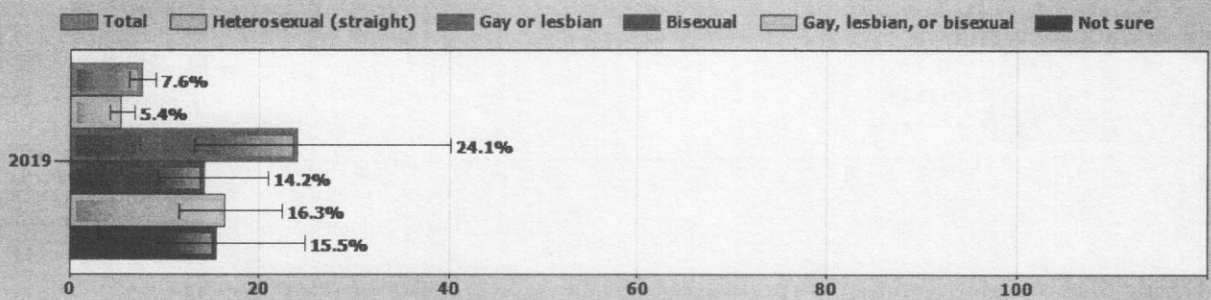
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Experienced sexual dating violence

(being forced to do sexual things (counting such things as kissing, touching, or being physically forced to have sexual intercourse) they did not want to do by someone they were dating or going out with, one or more times during the 12 months before the survey, among students who dated or went out with someone during the 12 months before the survey)

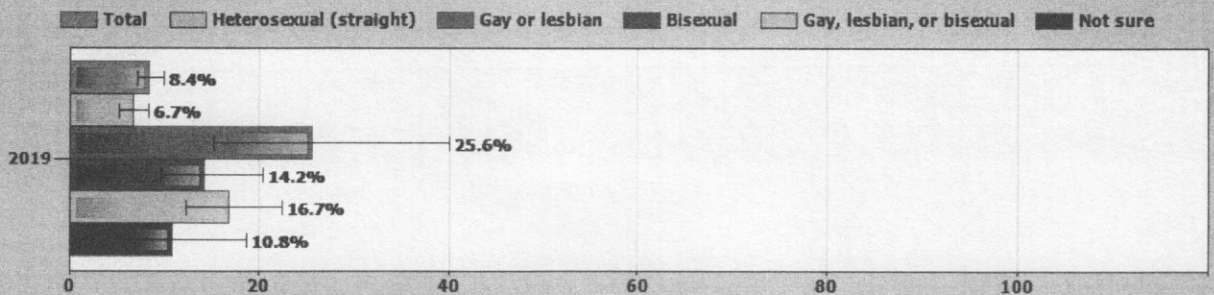
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Experienced physical dating violence

(being physically hurt on purpose (counting such things as being hit, slammed into something, or injured with an object or weapon) by someone they were dating or going out with, one or more times during the 12 months before the survey, among students who dated or went out with someone during the 12 months before the survey)

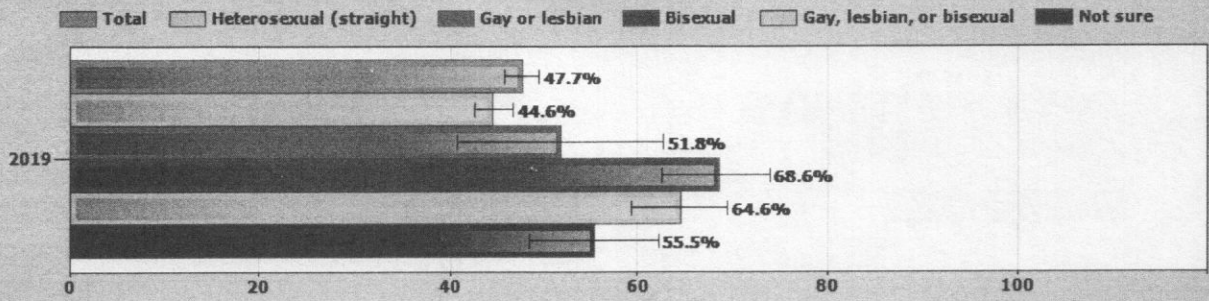
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Felt sad or hopeless

(almost every day for 2 or more weeks in a row so that they stopped doing some usual activities, during the 12 months before the survey)

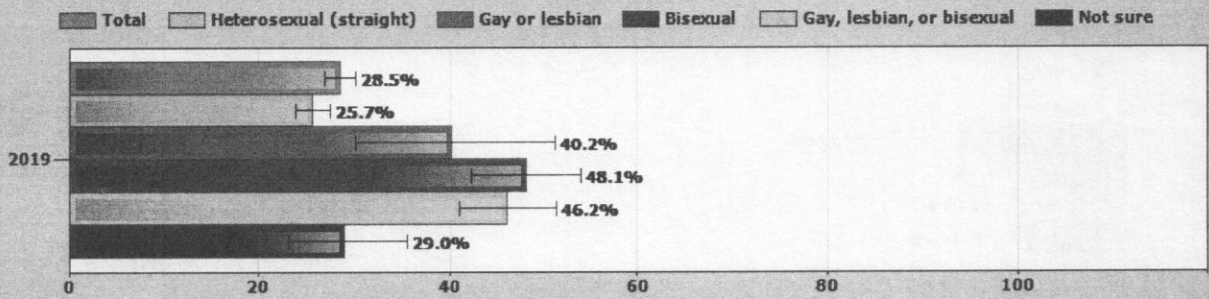
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Seriously considered attempting suicide

(during the 12 months before the survey)

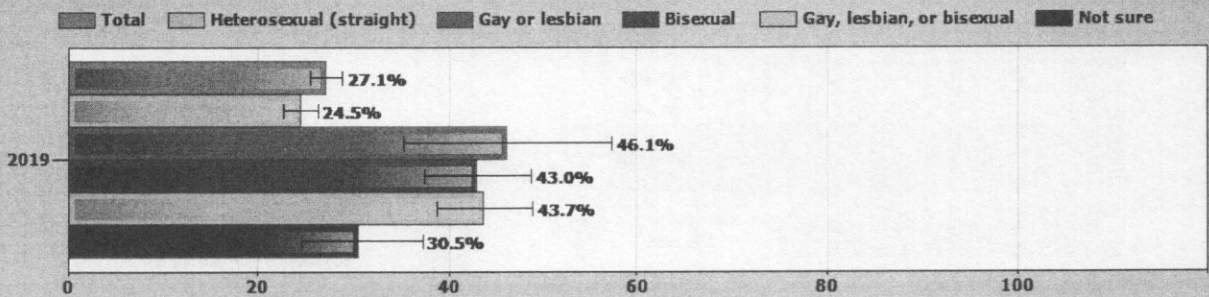
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



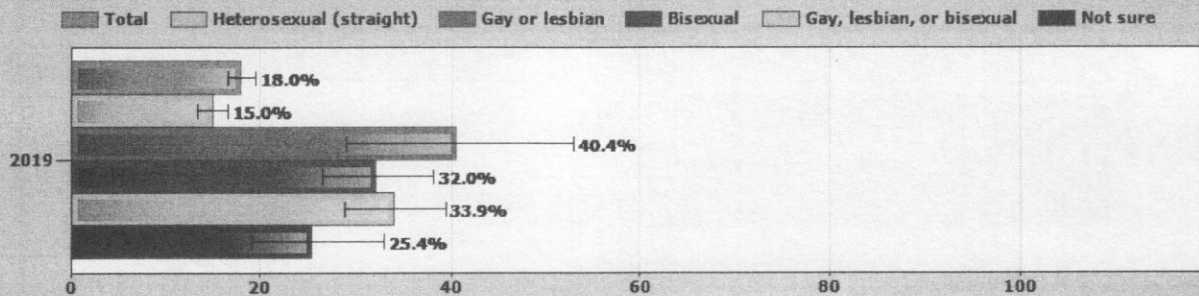
Made a plan about how they would attempt suicide

(during the 12 months before the survey)

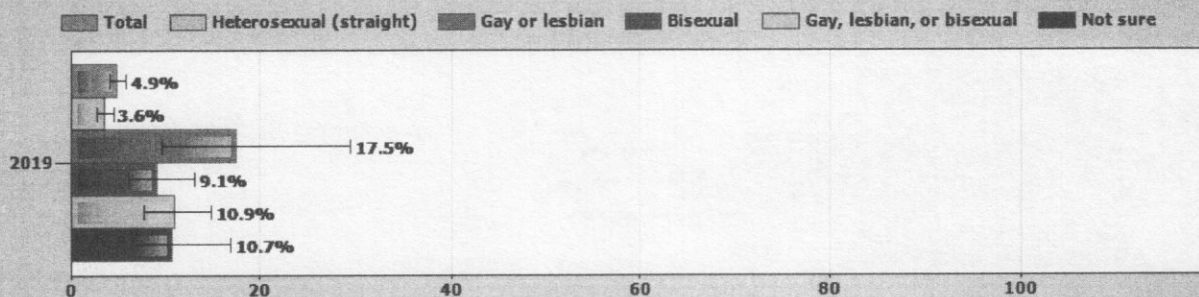
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



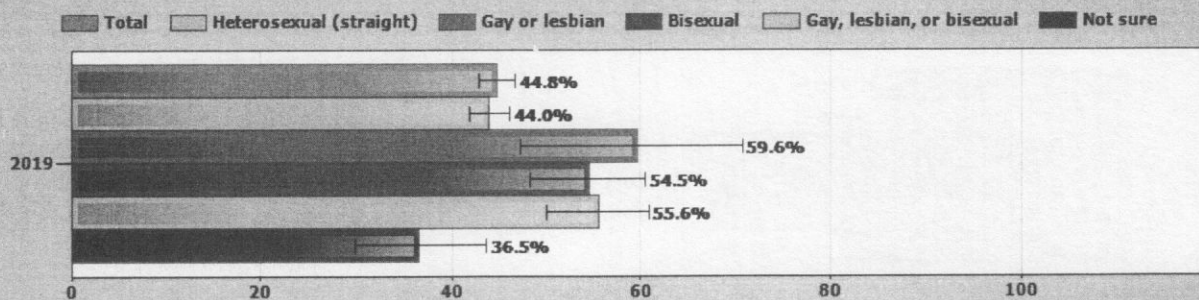
Actually attempted suicide
 (one or more times during the 12 months before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



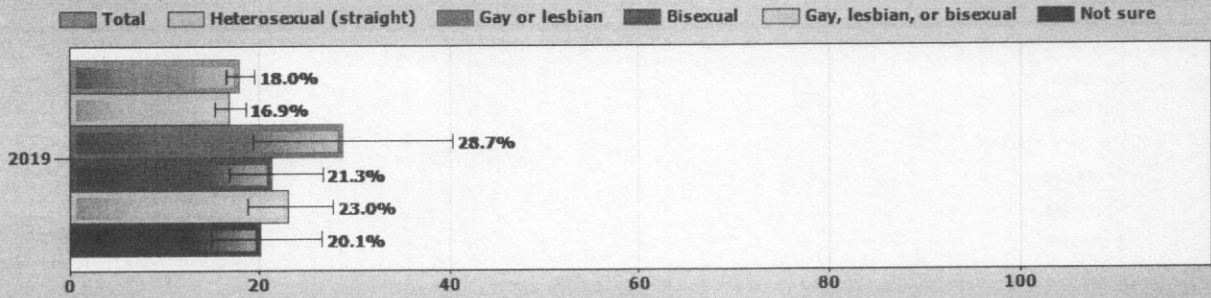
Suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse
 (during the 12 months before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



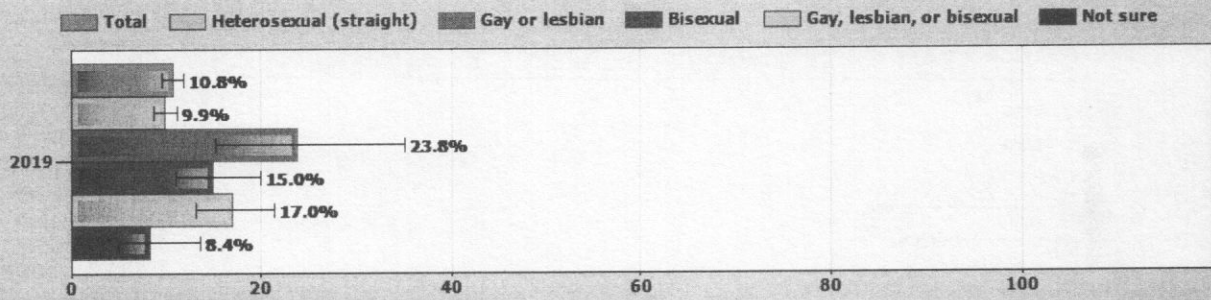
Ever tried cigarette smoking
 (even one or two puffs)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



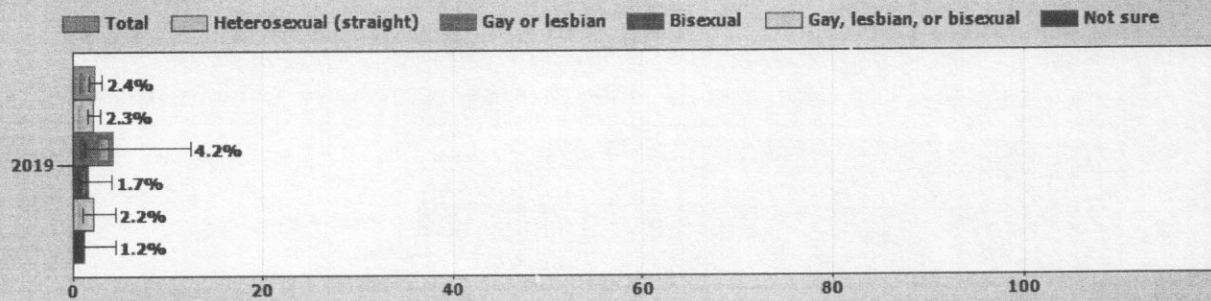
First tried cigarette smoking before age 13 years
 (even one or two puffs)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



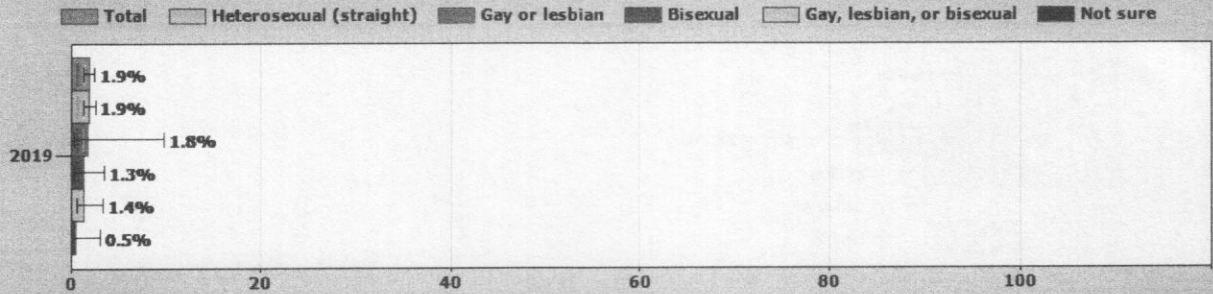
Currently smoked cigarettes
 (on at least 1 day during the 30 days before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Currently smoked cigarettes frequently
 (on 20 or more days during the 30 days before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019

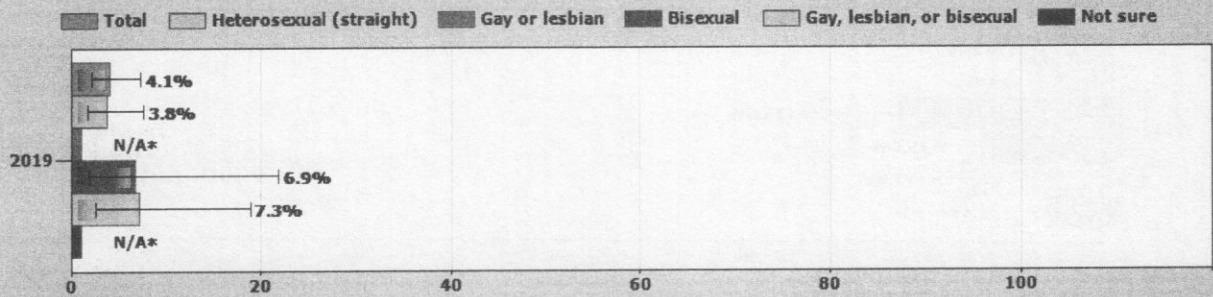


Currently smoked cigarettes daily
 (on all 30 days during the 30 days before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Smoked more than 10 cigarettes per day
 (on the days they smoked during the 30 days before the survey, among students who currently smoked cigarettes)

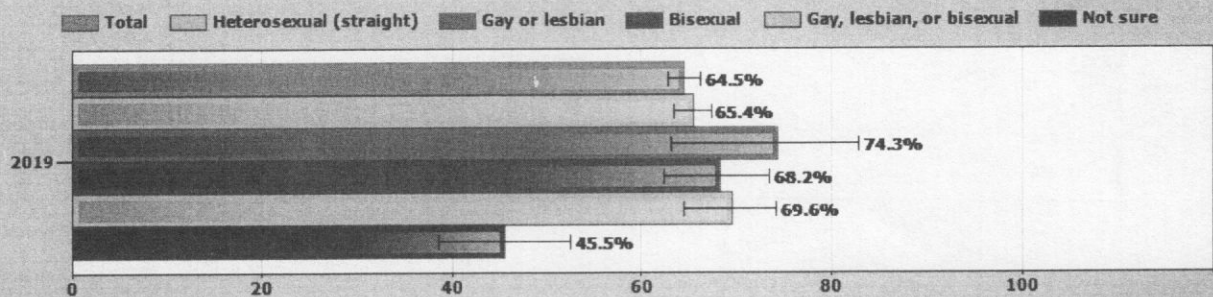
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Footnotes

N/A* < 30 respondents for the subgroup

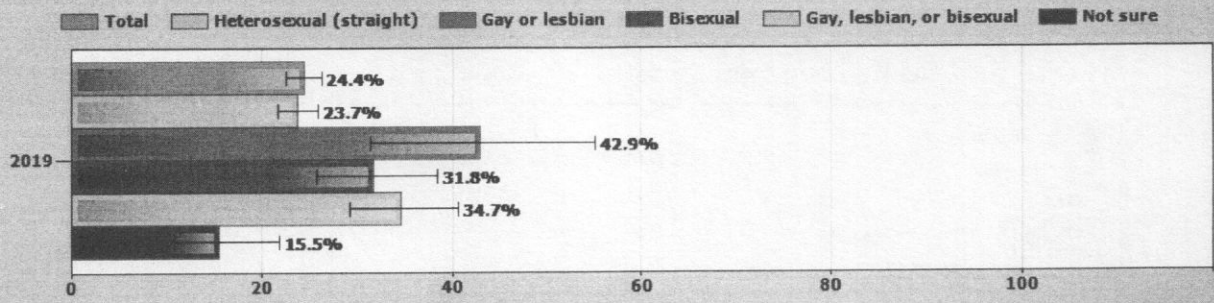
Ever used electronic vapor products
 (including e-cigarettes, vapes, vape pens, e-cigars, e-hookahs, hookah pens, and mods)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Currently used electronic vapor products

(including e-cigarettes, vapes, vape pens, e-cigars, e-hookahs, hookah pens, and mods, on at least 1 day during the 30 days before the survey)

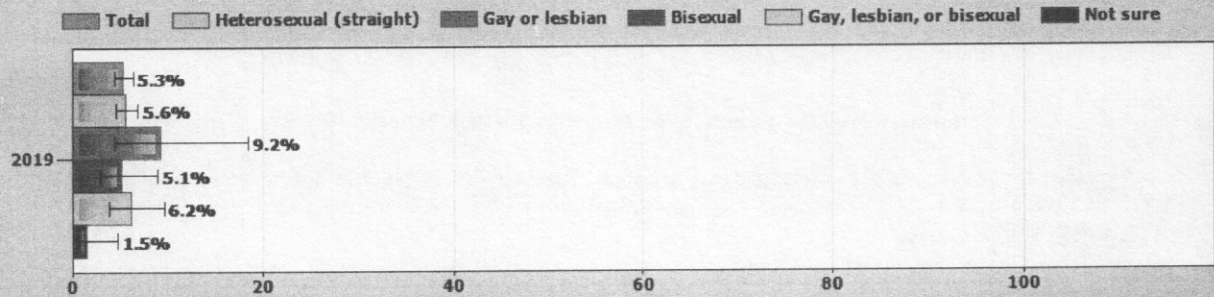
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Currently used electronic vapor products frequently

(including e-cigarettes, vapes, vape pens, e-cigars, e-hookahs, hookah pens, and mods, on 20 or more days during the 30 days before the survey)

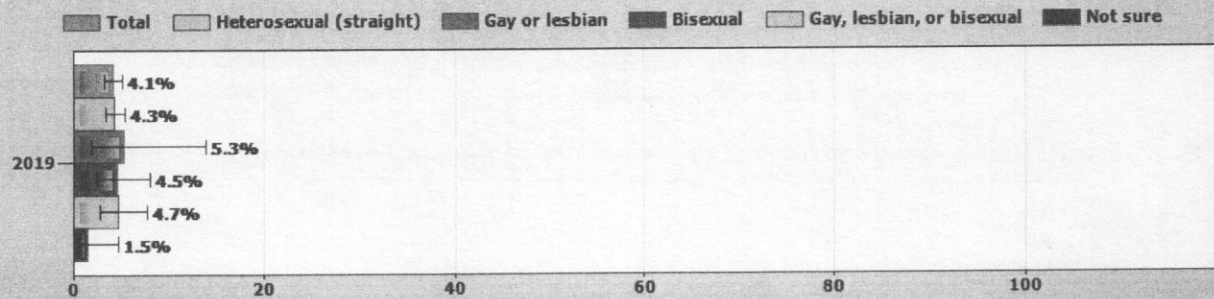
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Currently used electronic vapor products daily

(including e-cigarettes, vapes, vape pens, e-cigars, e-hookahs, hookah pens, and mods, on all 30 days during the 30 days before the survey)

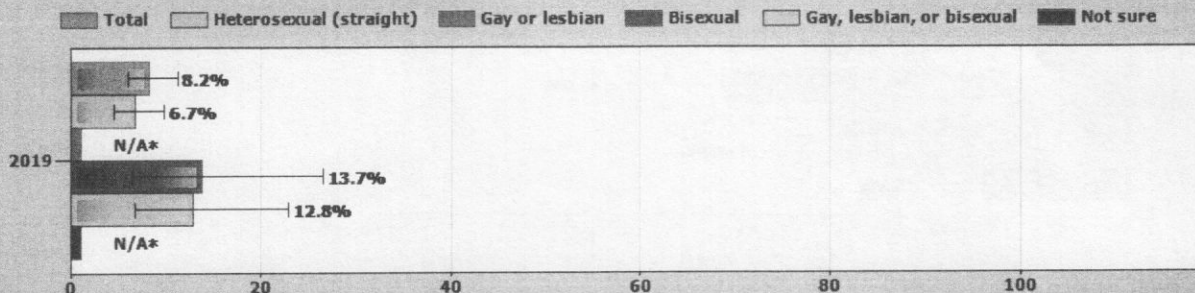
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Usually got their own electronic vapor products by buying them in a store

(such as a convenience store, supermarket, discount store, gas station, or vape store, including e-cigarettes, vapes, vape pens, e-cigars, e-hookahs, hookah pens, and mods, during the 30 days before the survey, among the ___% of students nationwide who currently used electronic vapor products and who were aged <18 years)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



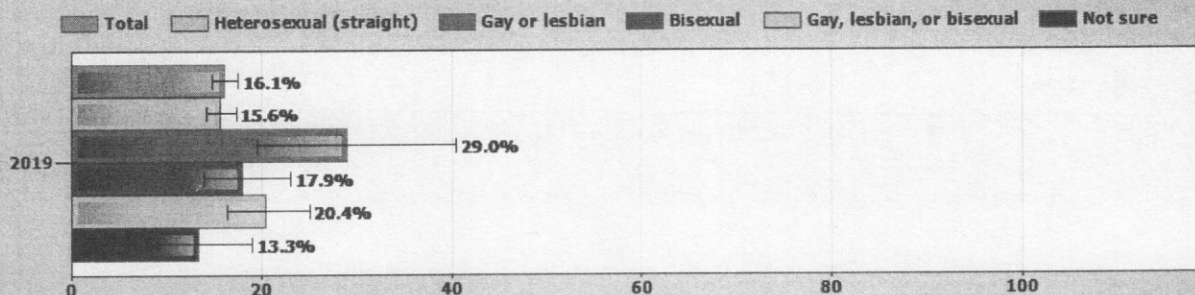
Footnotes

N/A* < 30 respondents for the subgroup

Currently used smokeless tobacco

(chewing tobacco, snuff, dip, snus, or dissolvable tobacco products, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, Copenhagen, Camel Snus, Marlboro Snus, General Snus, Ariva, Stonewall, or Camel Orbs, not counting any electronic vapor products, on at least 1 day during the 30 days before the survey)

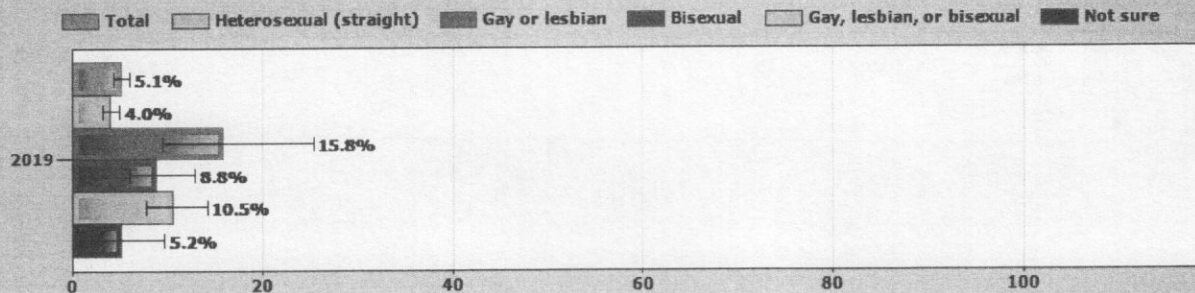
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



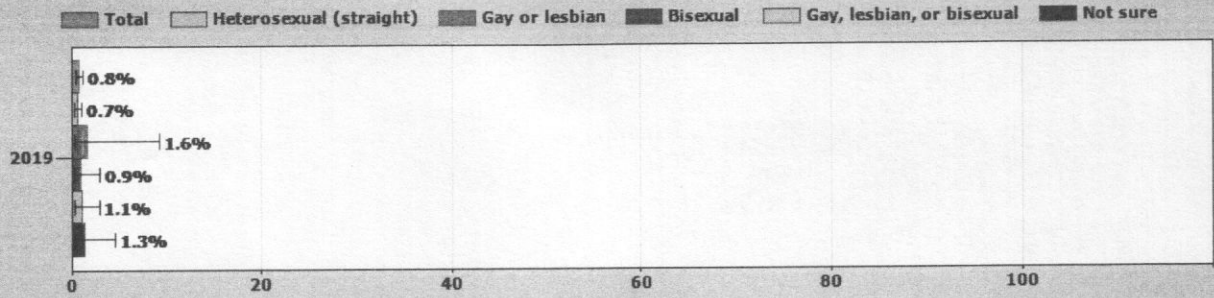
Currently smoked cigars

(cigars, cigarillos, or little cigars, on at least 1 day during the 30 days before the survey)

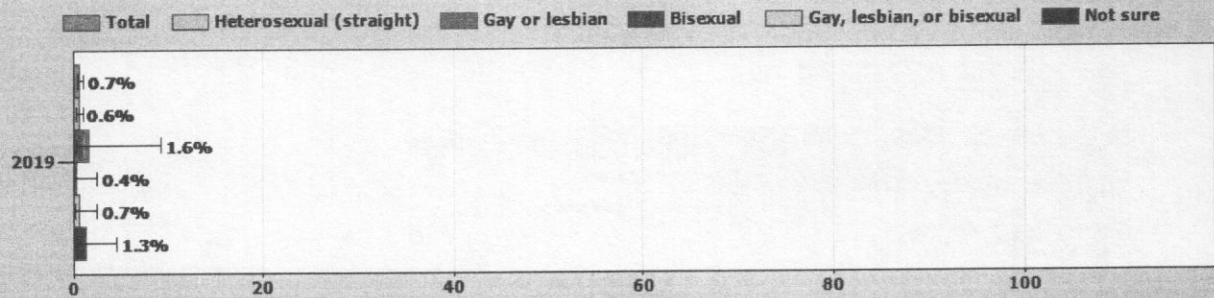
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



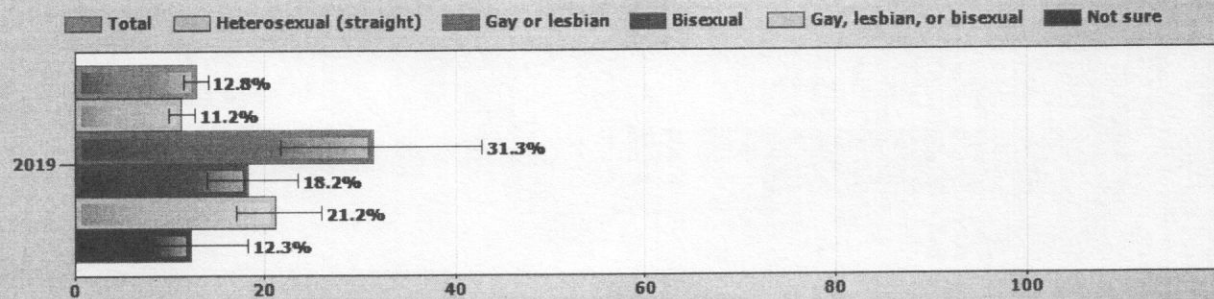
Currently smoked cigars frequently
 (cigars, cigarillos, or little cigars, on 20 or more days during the 30 days before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



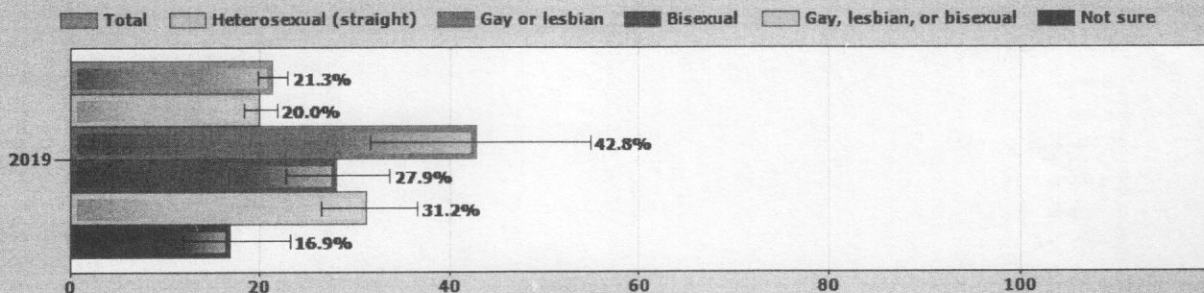
Currently smoked cigars daily
 (cigars, cigarillos, or little cigars, on all 30 days during the 30 days before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



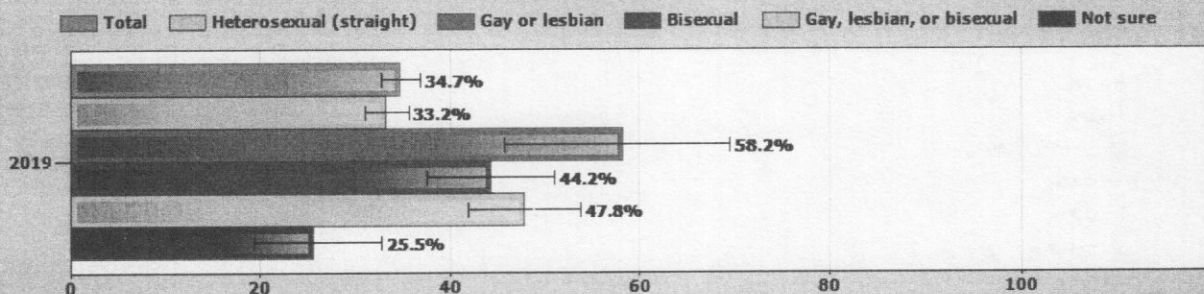
Currently smoked cigarettes or cigars
 (on at least 1 day during the 30 days before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



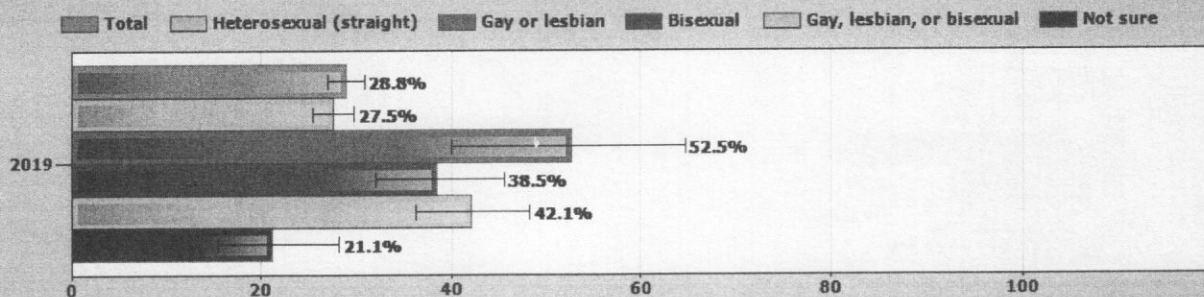
Currently smoked cigarettes or cigars or used smokeless tobacco
 (on at least 1 day during the 30 days before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Currently smoked cigarettes or cigars or used smokeless tobacco or electronic vapor products
 (on at least 1 day during the 30 days before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019

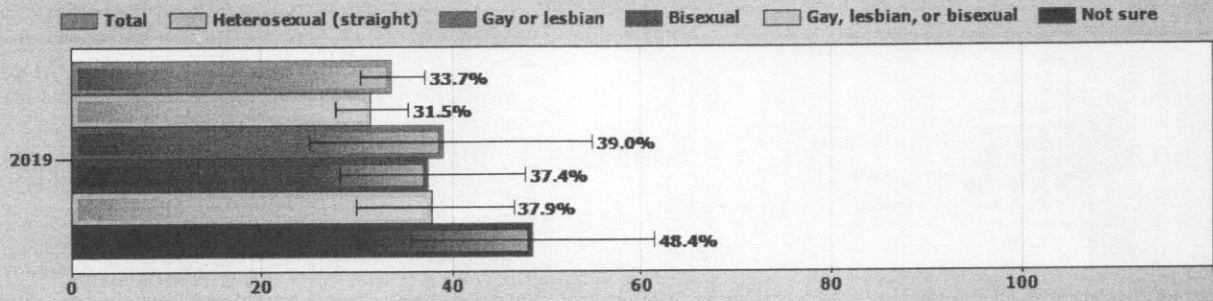


Currently smoked cigarettes or used electronic vapor products
 (on at least 1 day during the 30 days before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



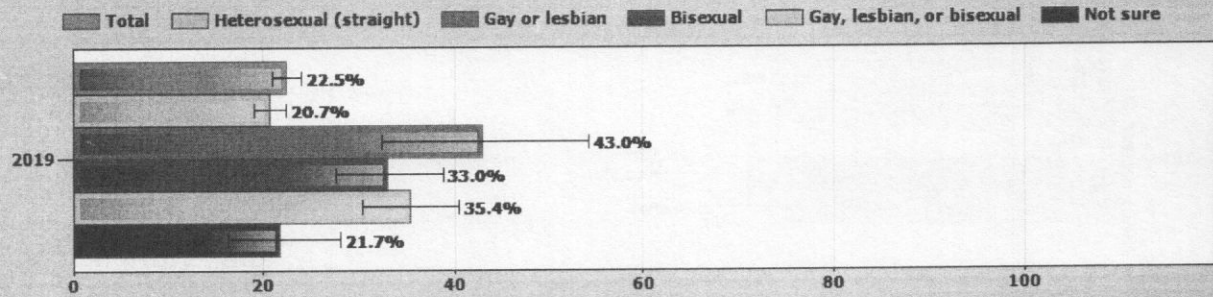
Did not try to quit using all tobacco products
 (including cigarettes, cigars, smokeless tobacco, shisha or hookah tobacco, and electronic vapor products, ever during the 12 months before the survey, among students who used any tobacco products during the 12 months before the survey)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Had their first drink of alcohol before age 13 years
 (other than a few sips)

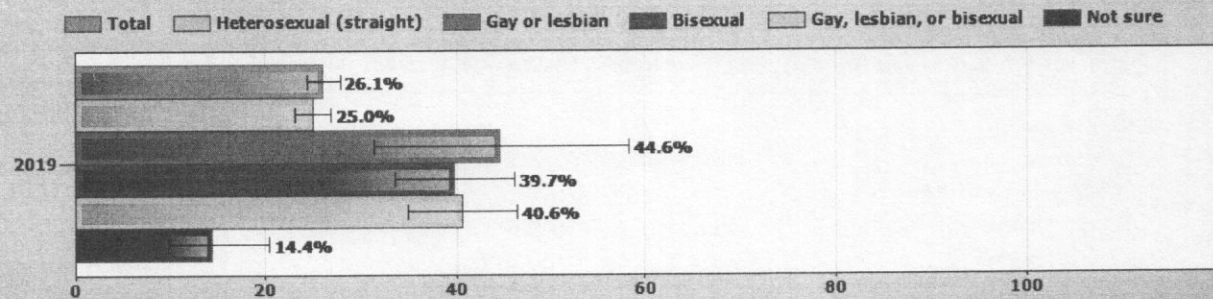
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Currently drank alcohol

(at least one drink of alcohol, on at least 1 day during the 30 days before the survey)

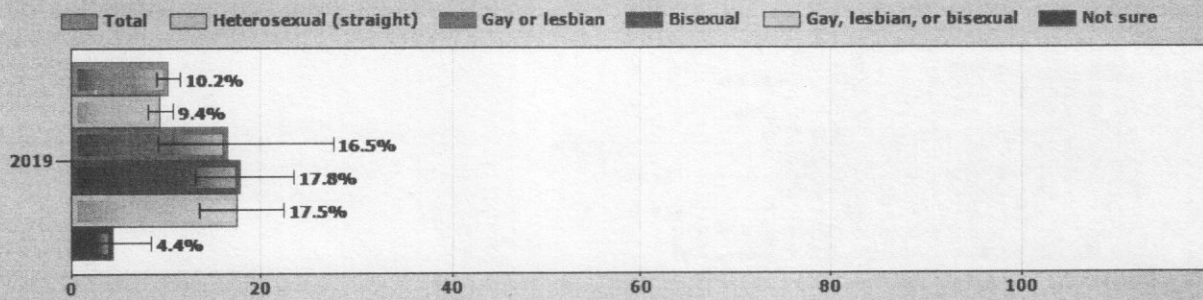
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Currently were binge drinking

(four or more drinks of alcohol in a row for female students or five or more drinks of alcohol in a row for male students, that is, within a couple of hours, on at least 1 day during the 30 days before the survey)

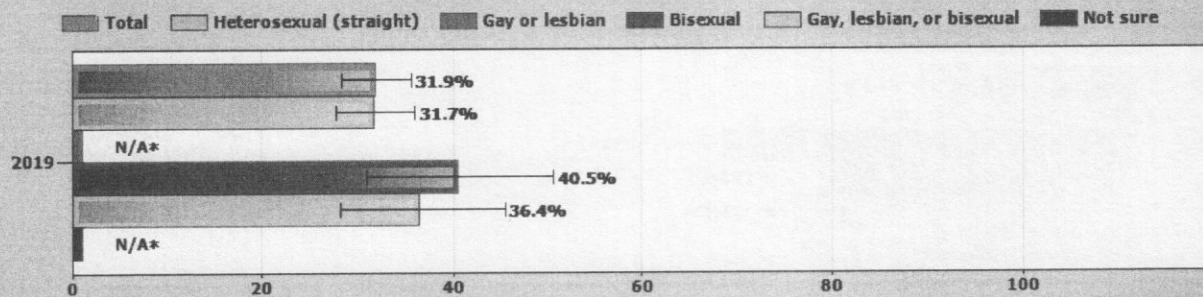
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Usually obtained the alcohol they drank by someone giving it to them

(during the 30 days before the survey, among students who currently drink alcohol)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



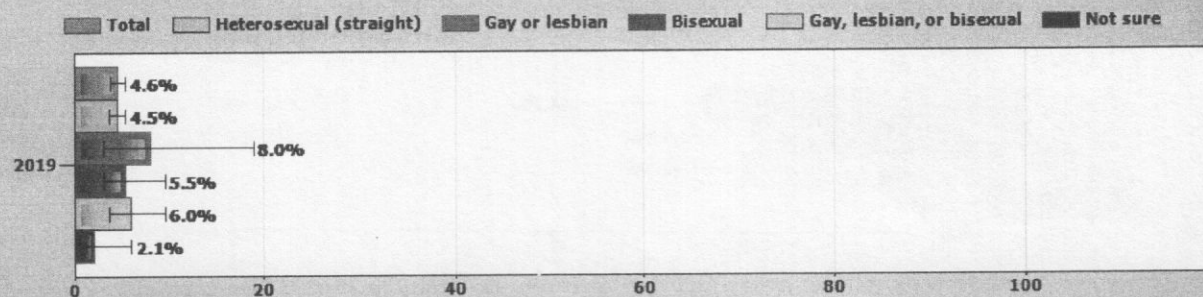
Footnotes

N/A* < 30 respondents for the subgroup

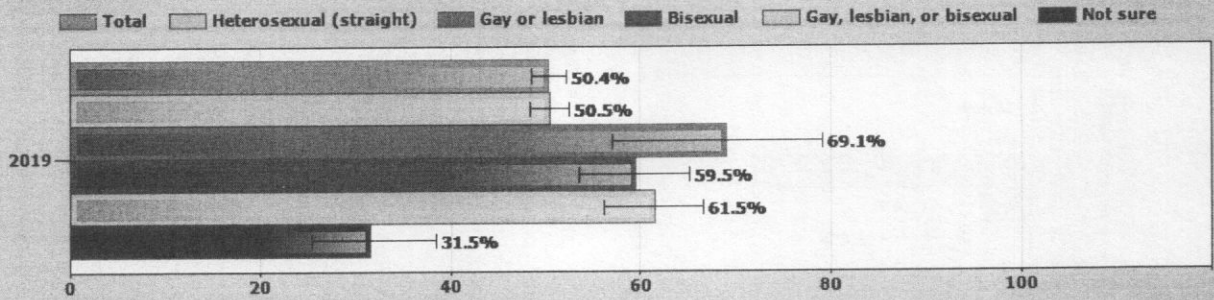
Reported that the largest number of drinks they had in a row was 10 or more

(within a couple of hours, during the 30 days before the survey)

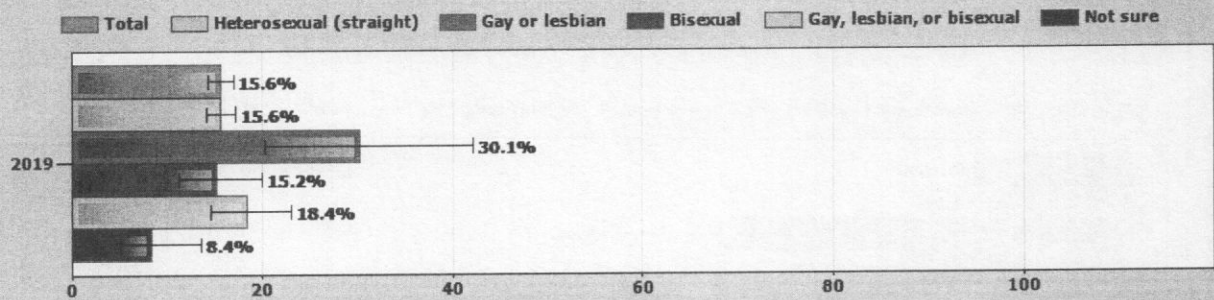
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



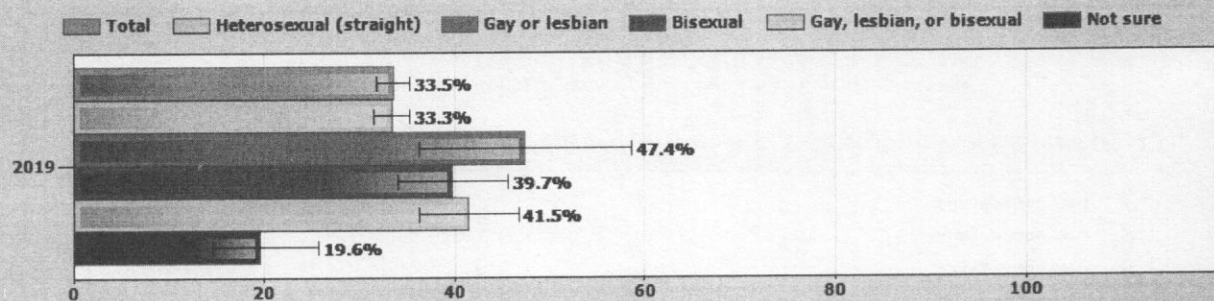
Ever used marijuana
 (also called pot, weed, or cannabis, one or more times during their life)
 Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Tried marijuana for the first time before age 13 years
 (also called pot, weed, or cannabis)
 Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019

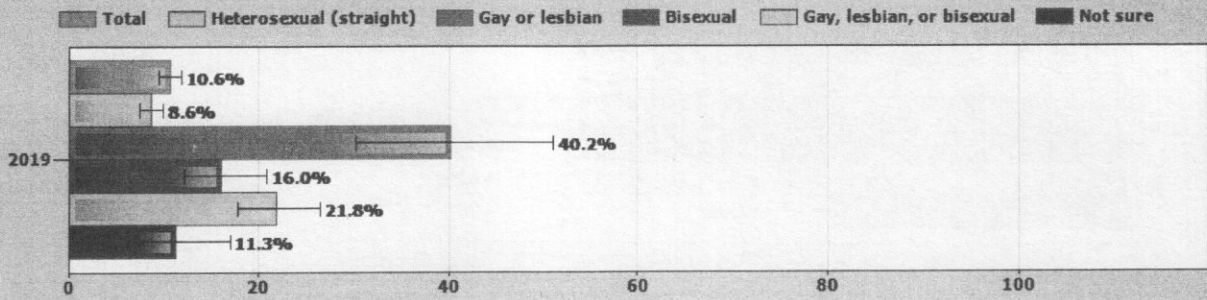


Currently used marijuana
 (also called pot, weed, or cannabis, one or more times during the 30 days before the survey)
 Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Ever used synthetic marijuana
 (also called "Spice," "fake weed," "K2," "King Kong," "Yucatan Fire," or "Skunk," one or more times during their life)

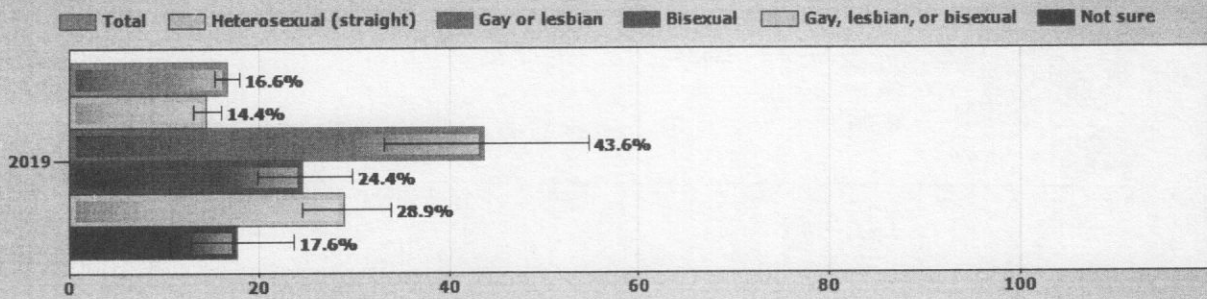
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Ever took prescription pain medicine without a doctor's prescription or differently than how a doctor told them to use it

(counting drugs such as codeine, Vicodin, Oxycontin, Hydrocodone, and Percocet, one or more times during their life)

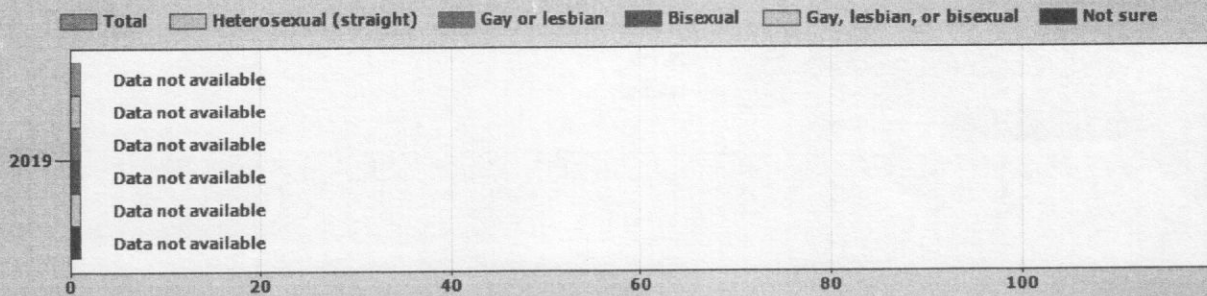
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Currently took prescription pain medicine without a doctor's prescription or differently than how a doctor told them to use it

(one or more times during the 30 days before the survey)

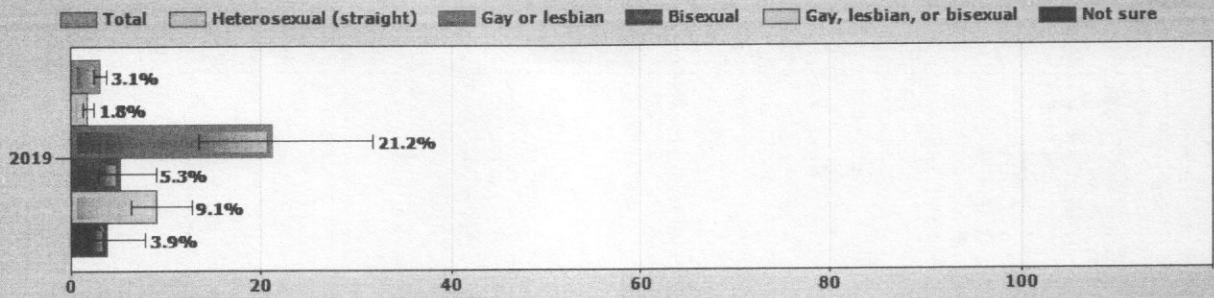
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Ever used cocaine

(any form of cocaine, such as powder, crack, or freebase, one or more times during their life)

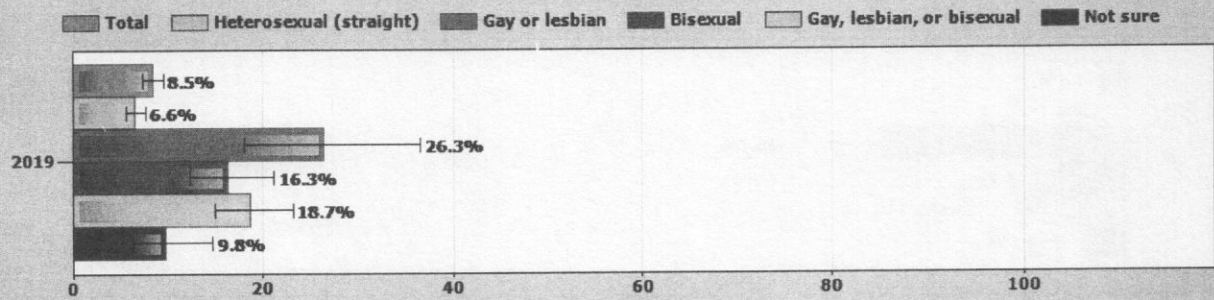
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Ever used inhalants

(sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high, one or more times during their life)

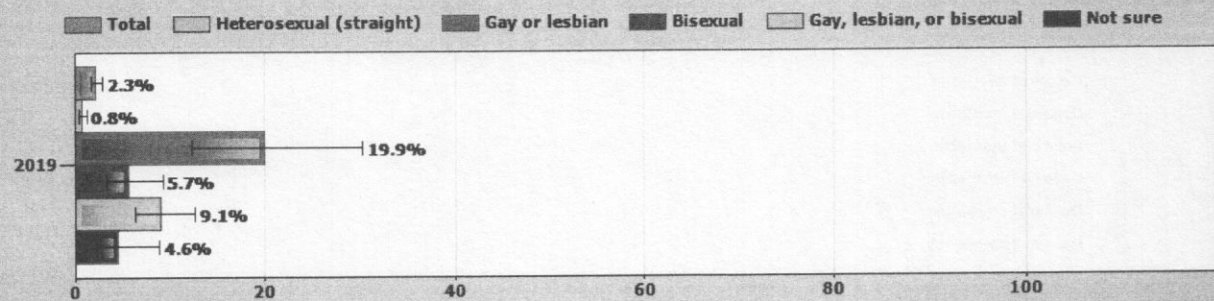
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Ever used heroin

(also called "smack," "junk," or "China White," one or more times during their life)

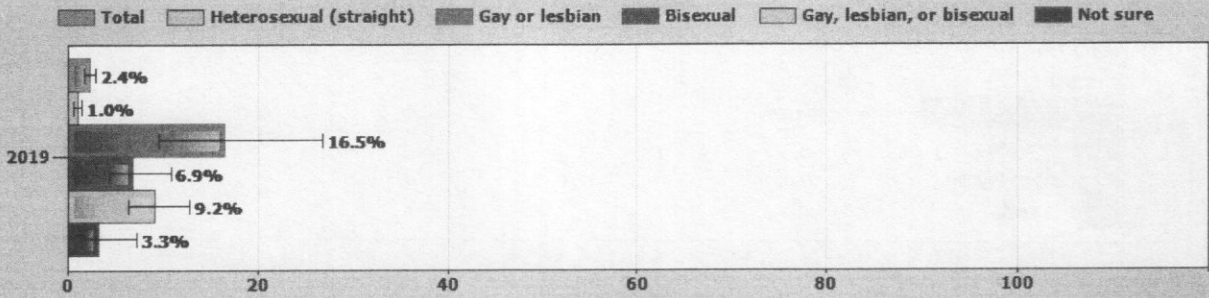
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Ever used methamphetamines

(also called "speed," "crystal meth," "crank," "ice," or "meth," one or more times during their life)

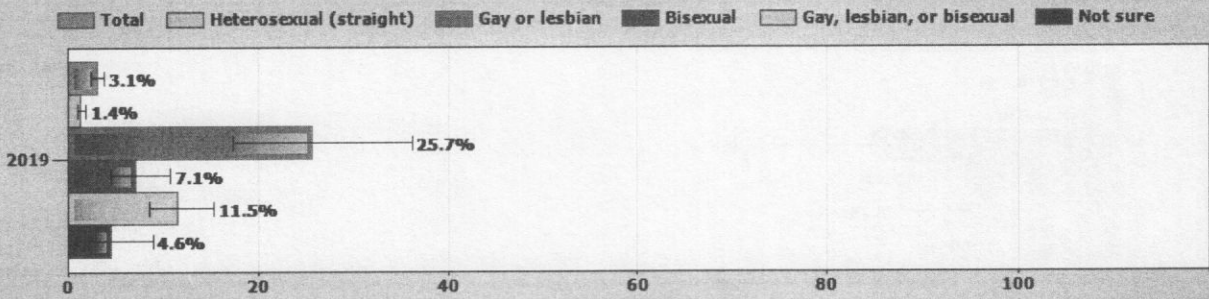
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Ever used ecstasy

(also called "MDMA," one or more times during their life)

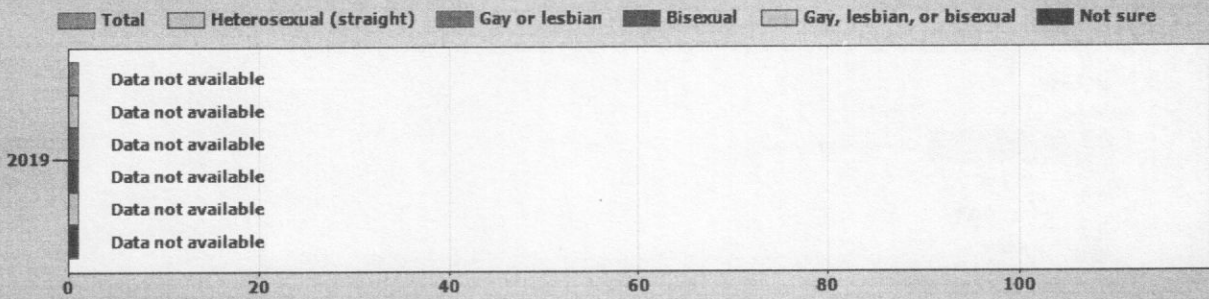
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



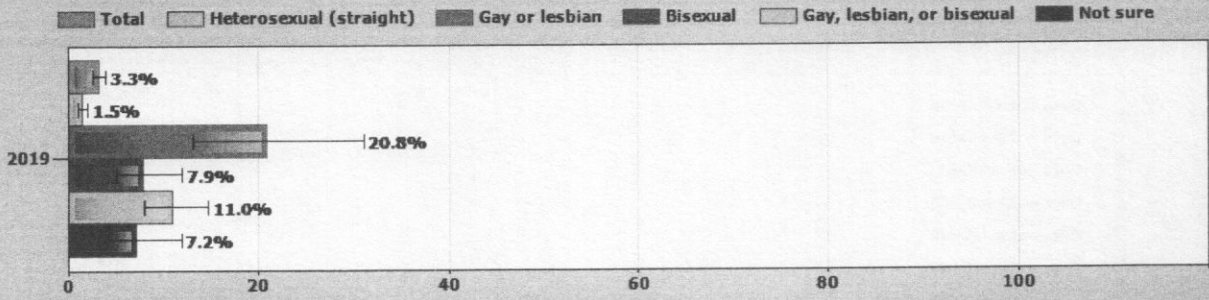
Ever used hallucinogenic drugs

(such as LSD, acid, PCP, angel dust, mescaline, or mushrooms, one or more times during their life)

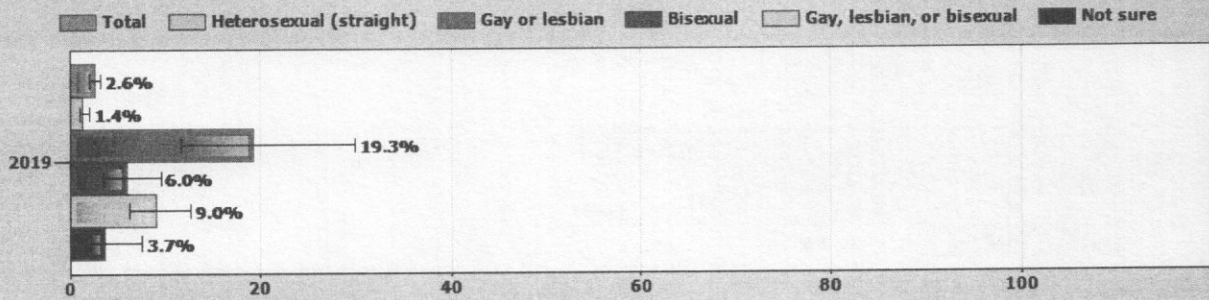
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



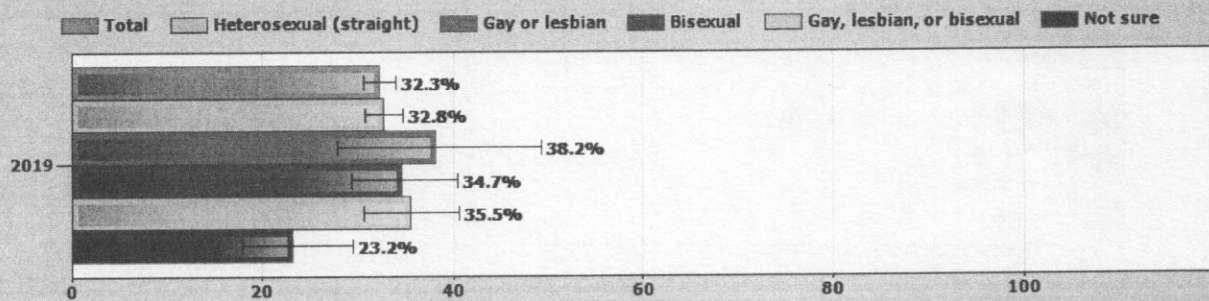
Ever took steroids without a doctor's prescription
 (pills or shots, one or more times during their life)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Ever injected any illegal drug
 (used a needle to inject any illegal drug into their body, one or more times during their life)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



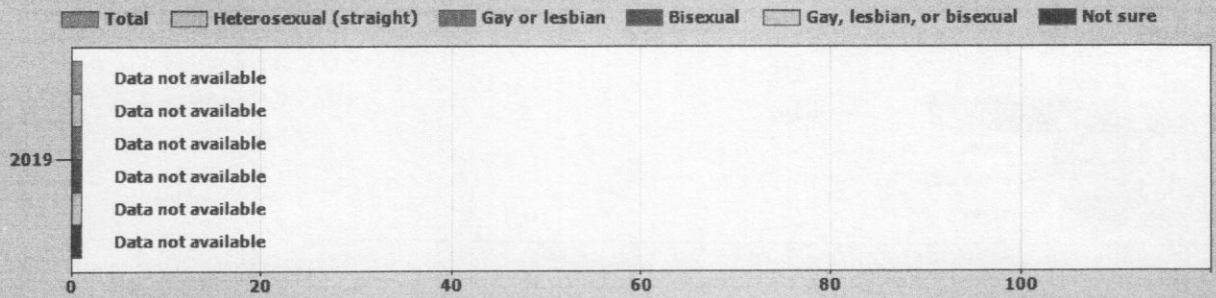
Were offered, sold, or given an illegal drug on school property
 (during the 12 months before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Ever used select illicit drugs

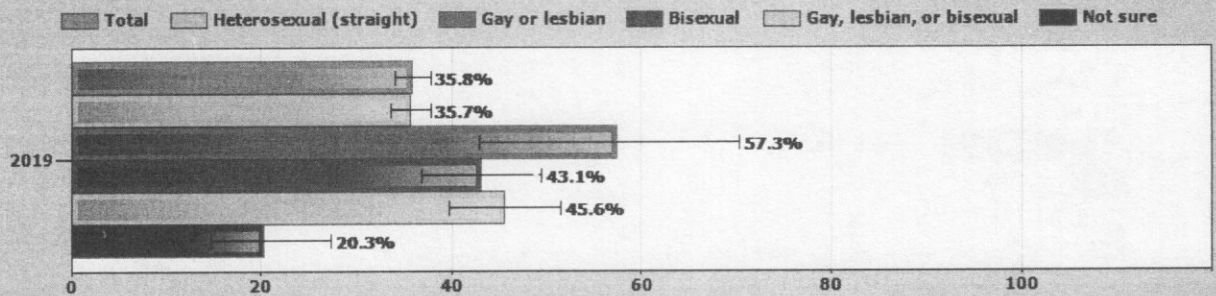
(counting cocaine, inhalants, heroin, methamphetamines, ecstasy, or hallucinogens, one or more times during their life)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



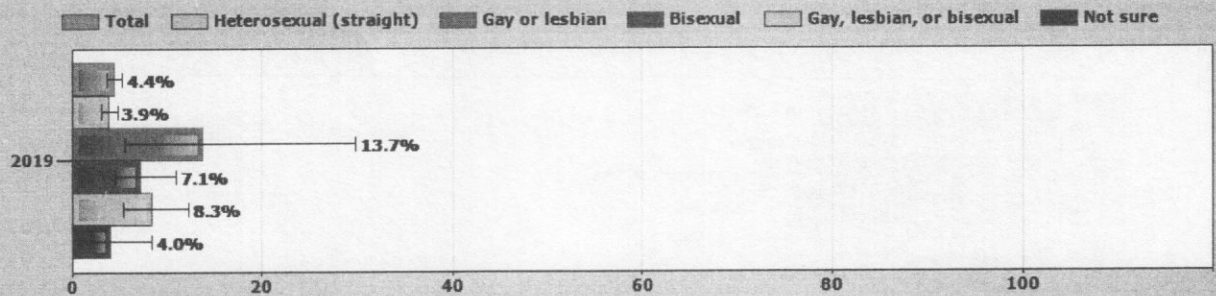
Ever had sexual intercourse

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019

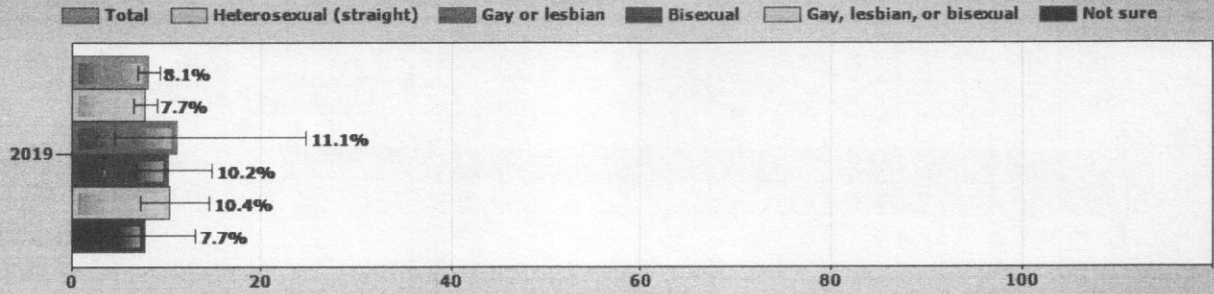


Had sexual intercourse for the first time before age 13 years

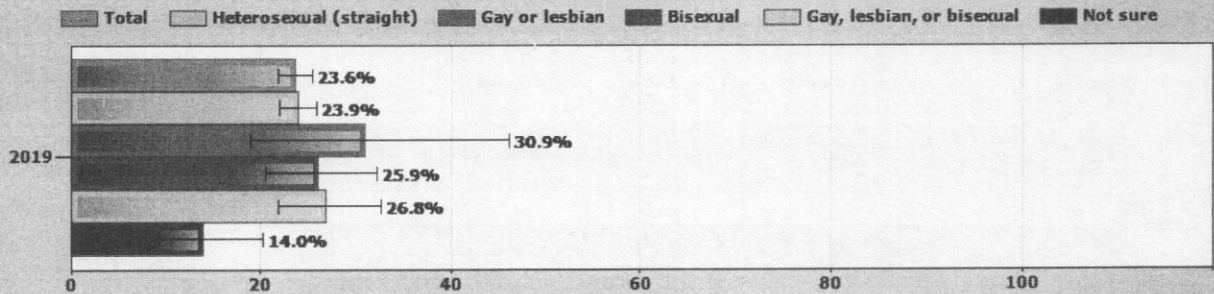
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



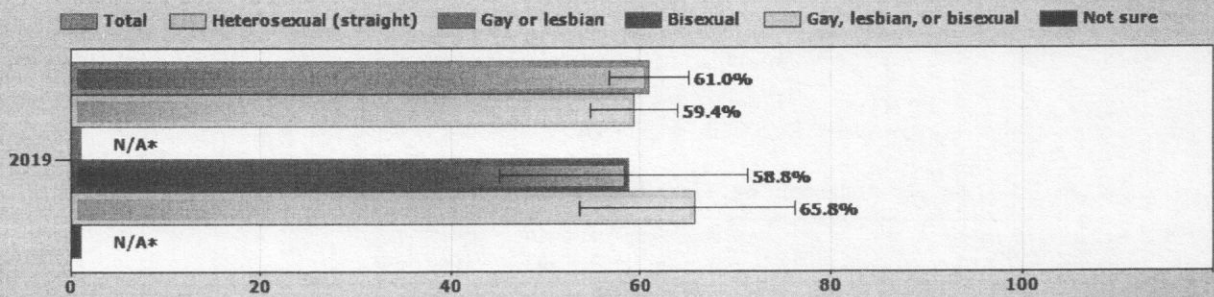
Had sexual intercourse with four or more persons
(during their life)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Were currently sexually active
(had sexual intercourse with at least one person, during the 3 months before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



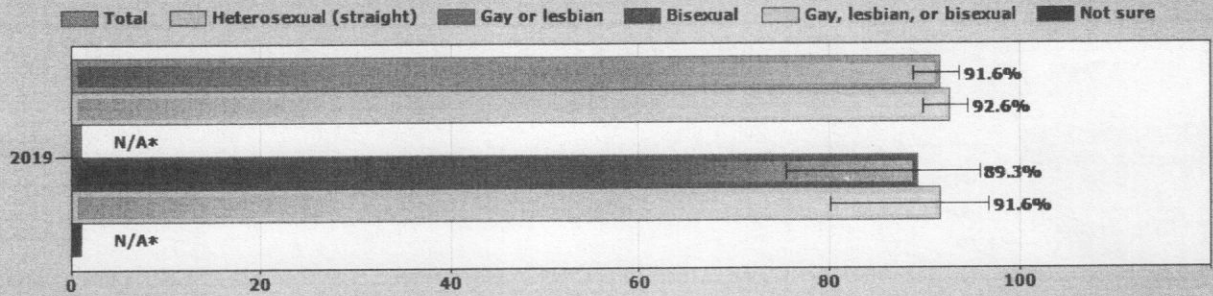
Did not use a condom during last sexual intercourse
(among students who were currently sexually active)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Footnotes

N/A* < 30 respondents for the subgroup

Did not use birth control pills before last sexual intercourse
 (to prevent pregnancy, among students who were currently sexually active)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019

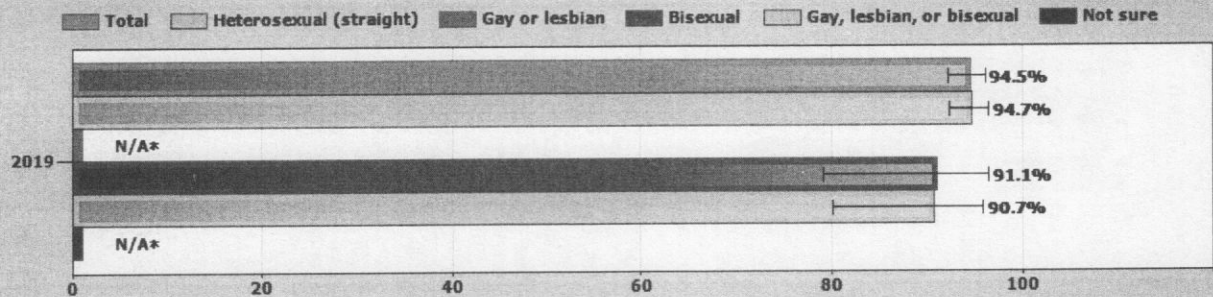


Footnotes

N/A* < 30 respondents for the subgroup

Did not use an IUD (e.g., Mirena or ParaGard) or implant (e.g., Implanon or Nexplanon) before last sexual intercourse

(to prevent pregnancy, among students who were currently sexually active)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019

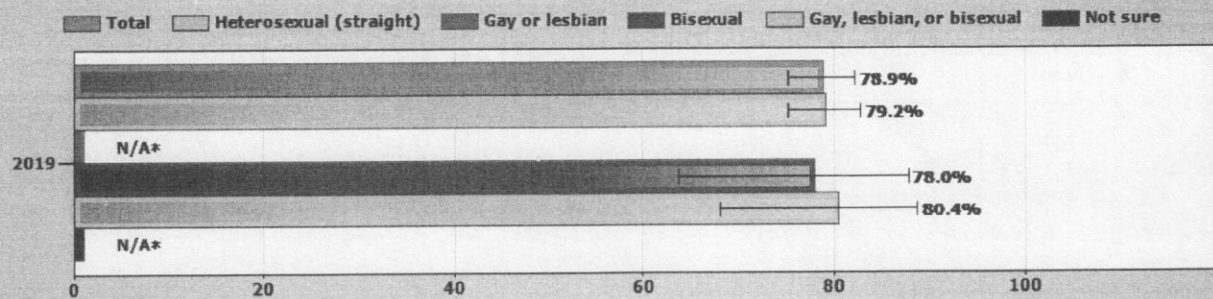


Footnotes

N/A* < 30 respondents for the subgroup

Did not use birth control pills; an IUD (e.g., Mirena or ParaGard) or implant (e.g., Implanon or Nexplanon); or a shot (e.g., Depo-Provera), patch (e.g., OrthoEvra), or birth control ring (e.g., NuvaRing) before last sexual intercourse

(to prevent pregnancy, among students who were currently sexually active)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



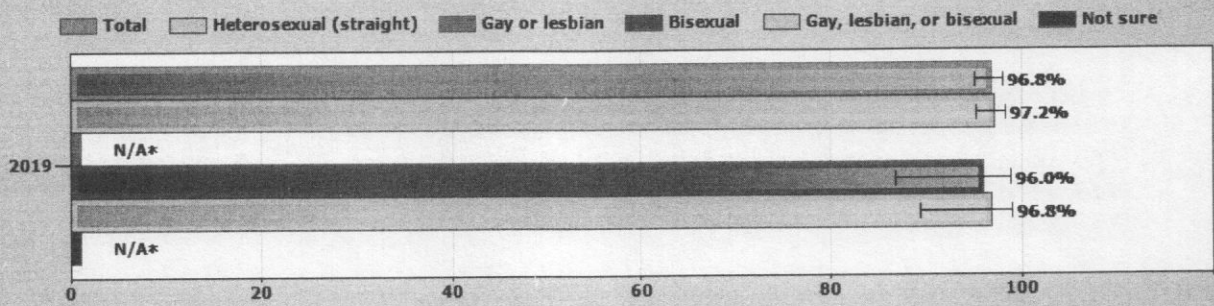
Footnotes

N/A* < 30 respondents for the subgroup

Did not use both a condom during last sexual intercourse and birth control pills; an IUD (e.g., Mirena or ParaGard) or implant (e.g., Implanon or Nexplanon); or a shot (e.g., Depo-Provera), patch (e.g., OrthoEvra), or birth control ring (e.g., NuvaRing) before last sexual intercourse

(to prevent pregnancy, among students who were currently sexually active)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



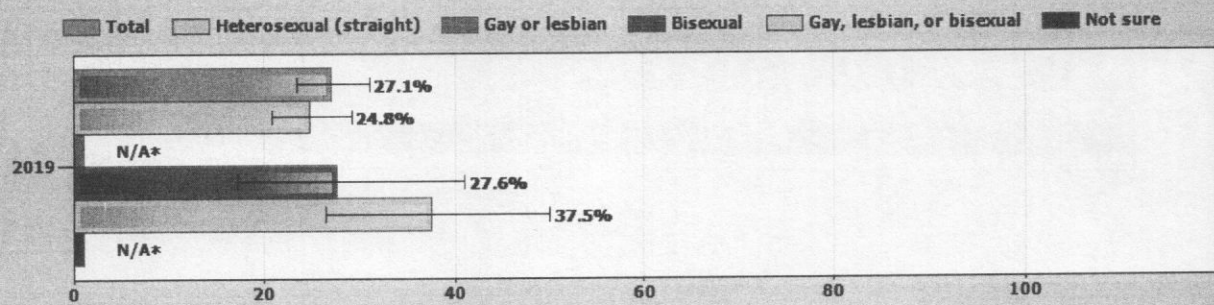
Footnotes

N/A* < 30 respondents for the subgroup

Did not use any method to prevent pregnancy during last sexual intercourse

(among students who were currently sexually active)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



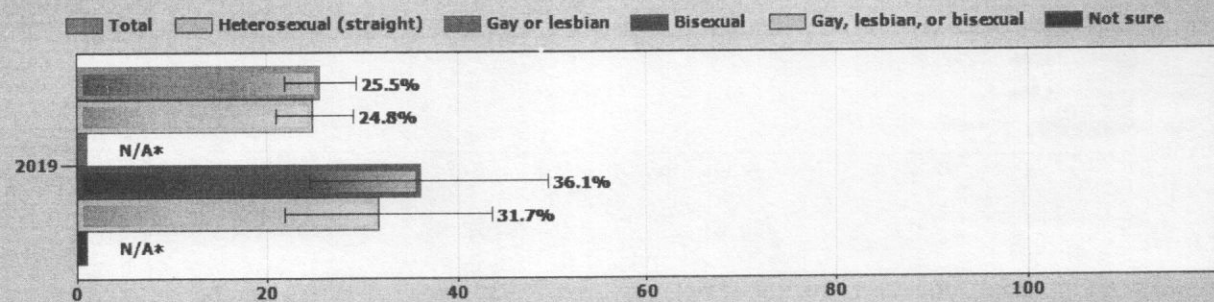
Footnotes

N/A* < 30 respondents for the subgroup

Drank alcohol or used drugs before last sexual intercourse

(among students who were currently sexually active)

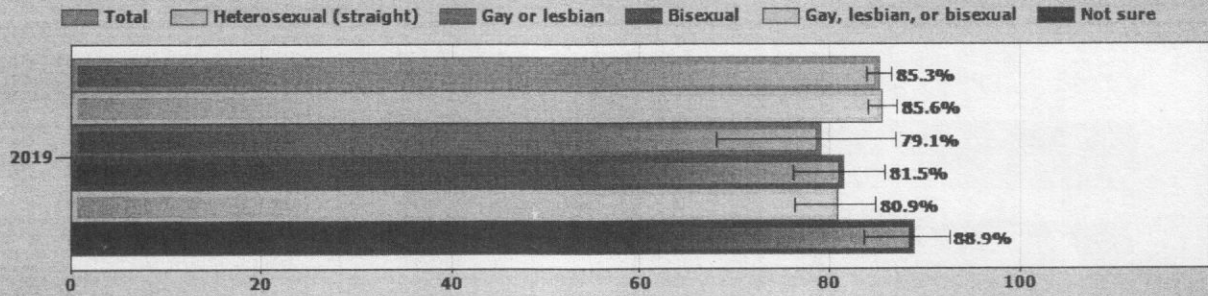
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



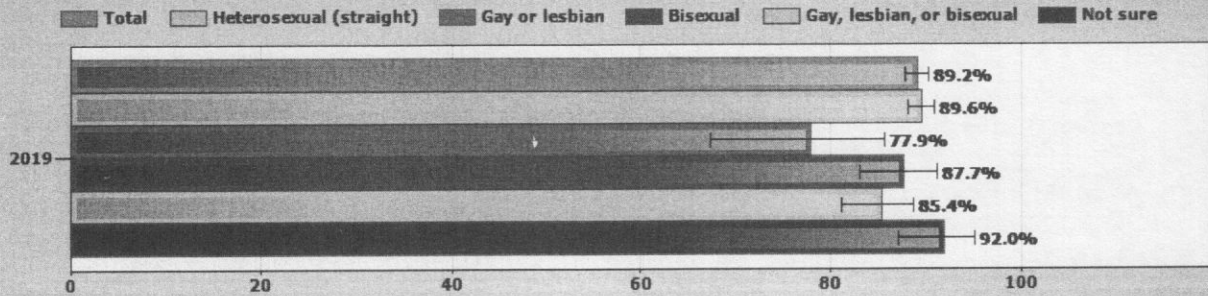
Footnotes

N/A* < 30 respondents for the subgroup

Were never tested for human immunodeficiency virus (HIV)
 (not counting tests done if they donated blood)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019

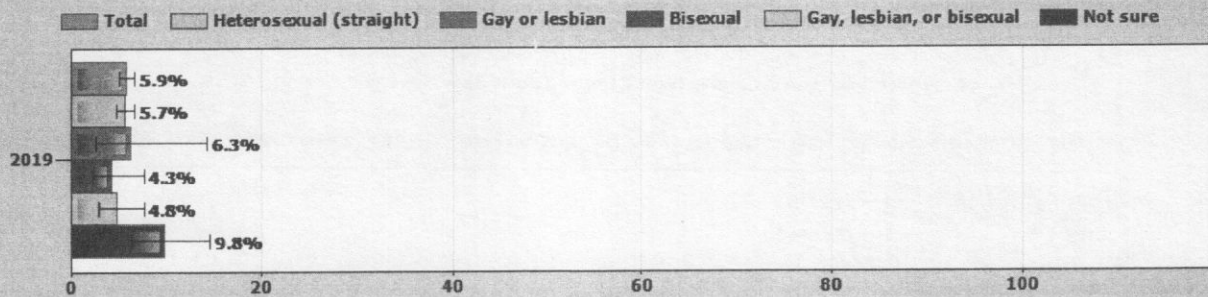


Were not tested for a sexually transmitted disease (STD) other than HIV
 (such as chlamydia or gonorrhea, during the 12 months before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Did not eat fruit or drink 100% fruit juices
 (such as orange juice, apple juice, or grape juice, not counting punch, Kool-Aid, sports drinks,
 or other fruit-flavored drinks, during the 7 days before the survey)

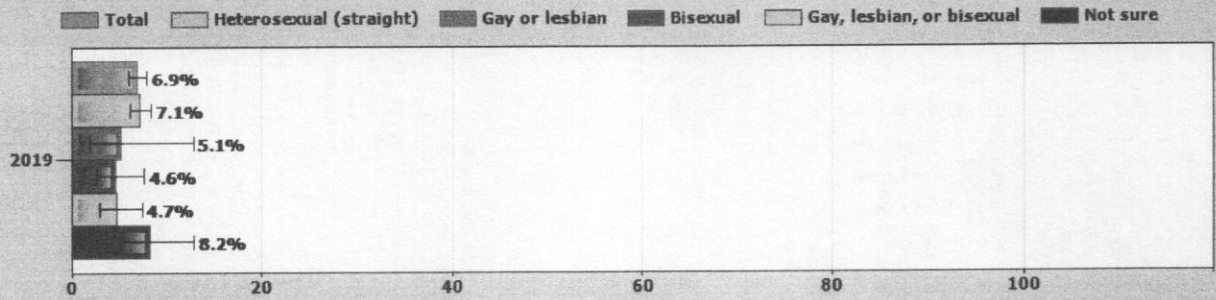
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Did not eat vegetables

(green salad, potatoes (not counting French fries, fried potatoes, or potato chips), carrots, or other vegetables, during the 7 days before the survey)

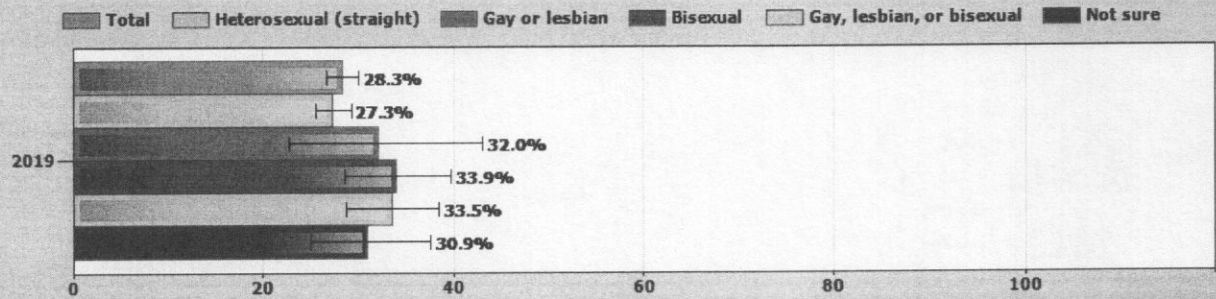
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Did not drink milk

(counting milk in a glass or cup, from a carton, or with cereal and the half pint of milk served at school as equal to one glass, during the 7 days before the survey)

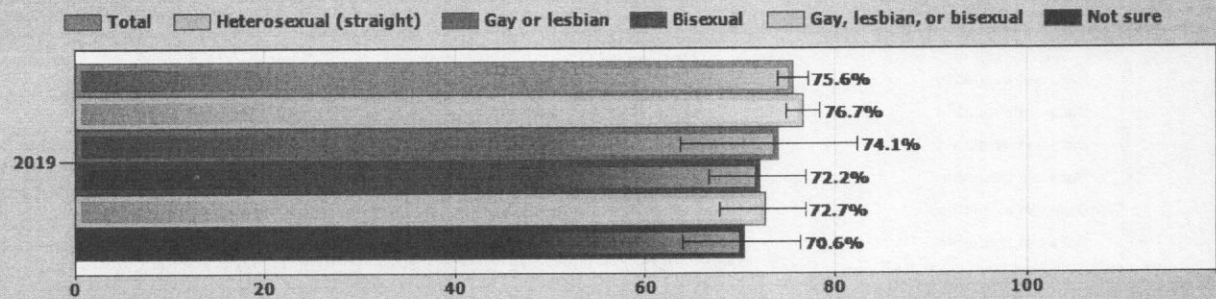
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Drank soda or pop

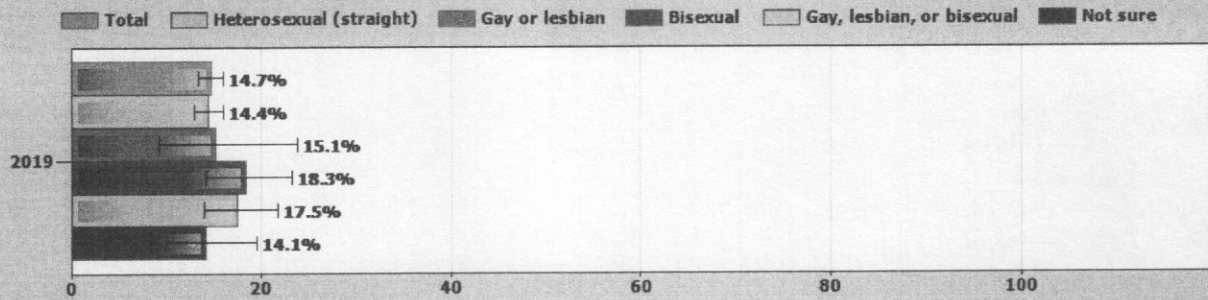
(such as Coke, Pepsi, or Sprite, not counting diet soda or diet pop, during the 7 days before the survey)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



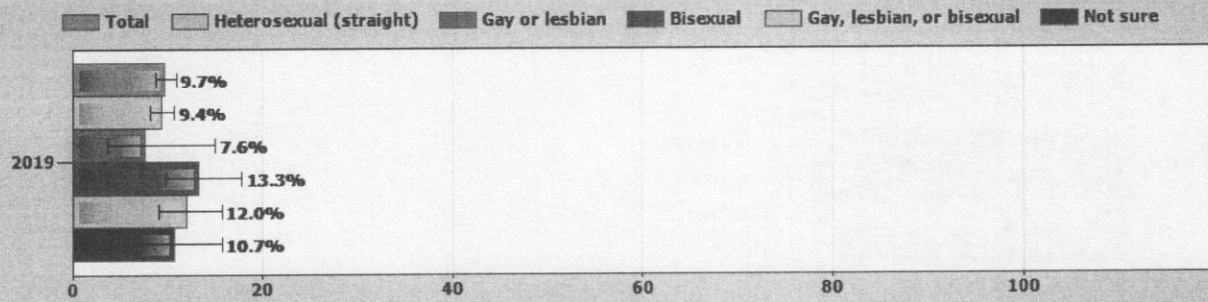
Drank a can, bottle, or glass of soda or pop one or more times per day
 (such as Coke, Pepsi, or Sprite, not counting diet soda or diet pop, during the 7 days before the survey)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



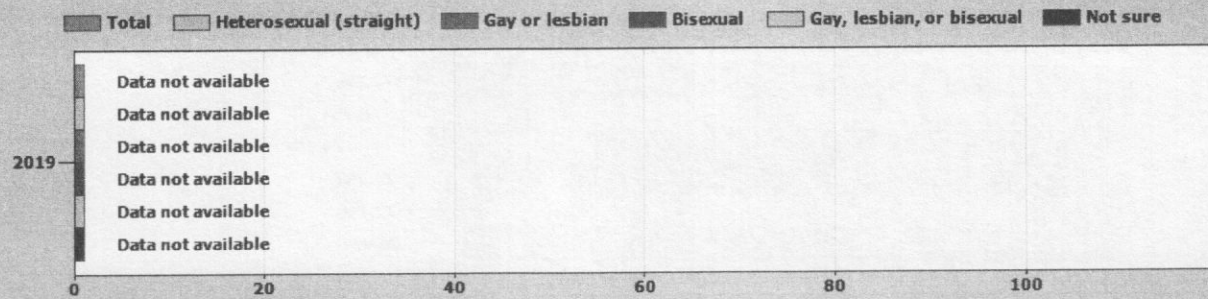
Drank a can, bottle, or glass of soda or pop two or more times per day
 (such as Coke, Pepsi, or Sprite, not counting diet soda or diet pop, during the 7 days before the survey)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



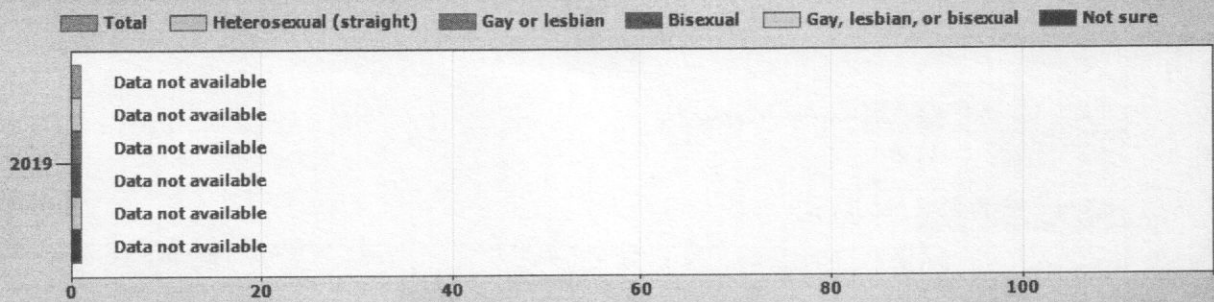
Drank a sports drink
 (such as Gatorade or Powerade, not counting low-calorie sports drinks such as Propel or G2, during the 7 days before the survey)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



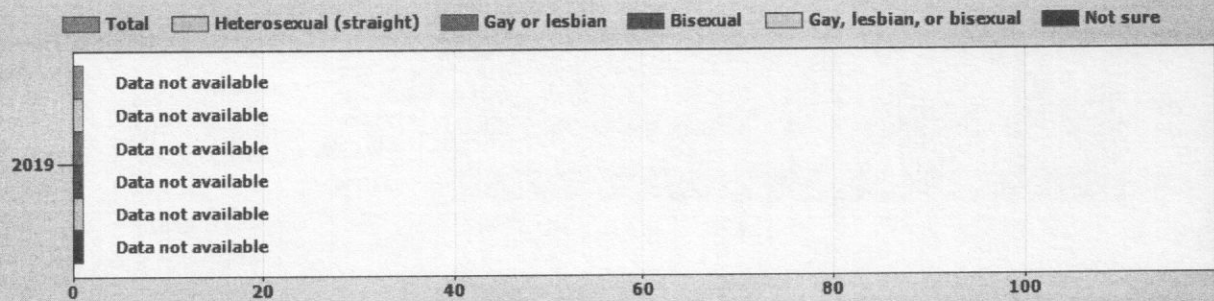
Drank a can, bottle, or glass of a sports drink one or more times per day
(such as Gatorade or Powerade, not counting low-calorie sports drinks such as Propel or G2, during the 7 days before the survey)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



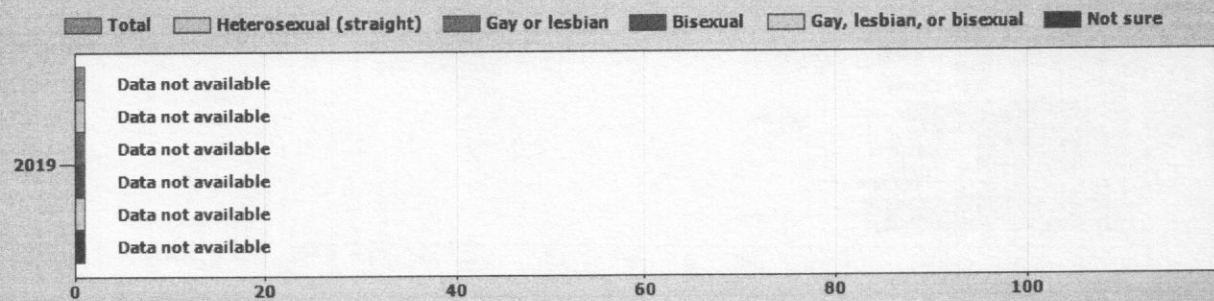
Drank a can, bottle, or glass of a sports drink two or more times per day
(such as Gatorade or Powerade, not counting low-calorie sports drinks such as Propel or G2, during the 7 days before the survey)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019

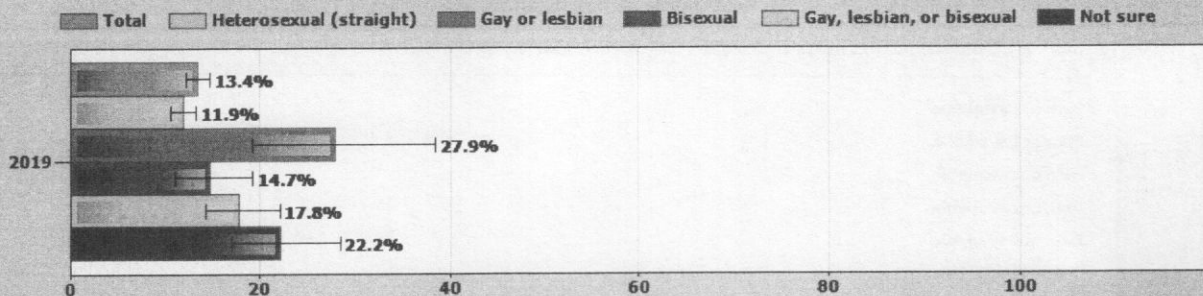


Did not drink a bottle or glass of plain water
(counting tap, bottled, and unflavored sparkling water, during the 7 days before the survey)

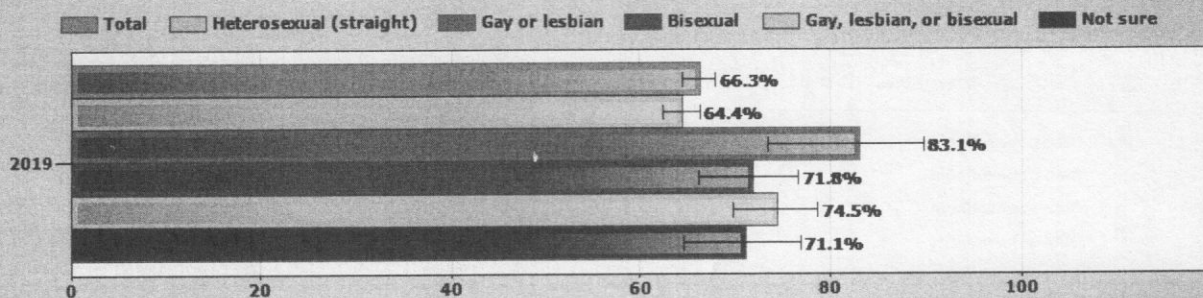
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Did not eat breakfast
 (during the 7 days before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019

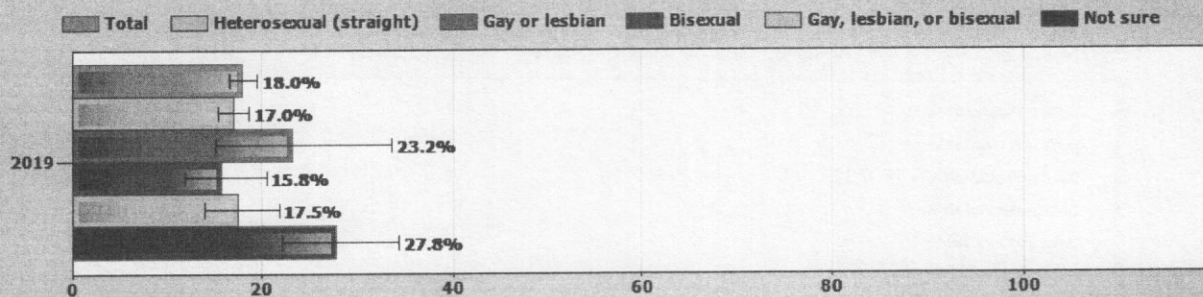


Did not eat breakfast on all 7 days
 (during the 7 days before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



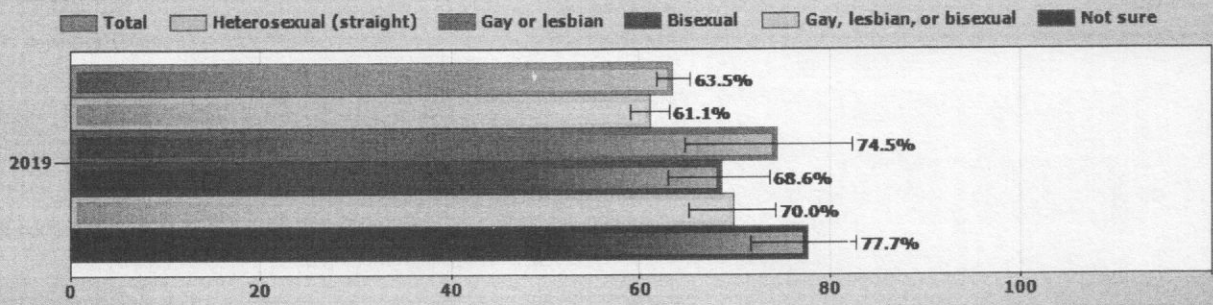
Did not participate in at least 60 minutes of physical activity on at least 1 day
 (in any kind of physical activity that increased their heart rate and made them breathe hard some of the time, during the 7 days before the survey)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



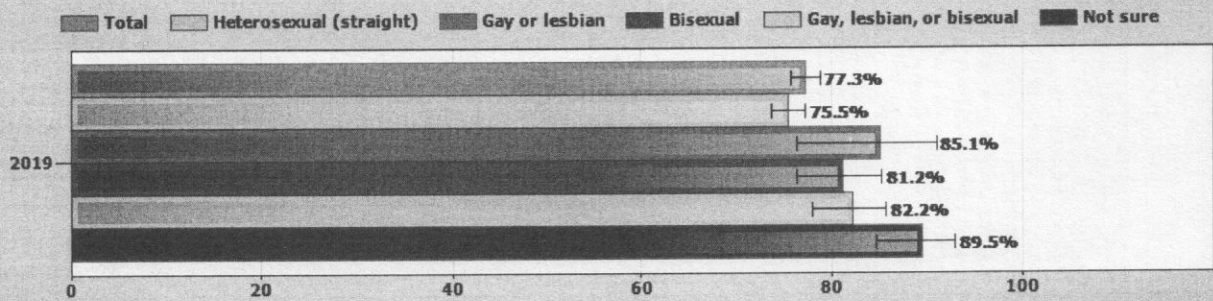
Were not physically active at least 60 minutes per day on 5 or more days
 (doing any kind of physical activity that increased their heart rate and made them breathe hard some of the time, during the 7 days before the survey)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



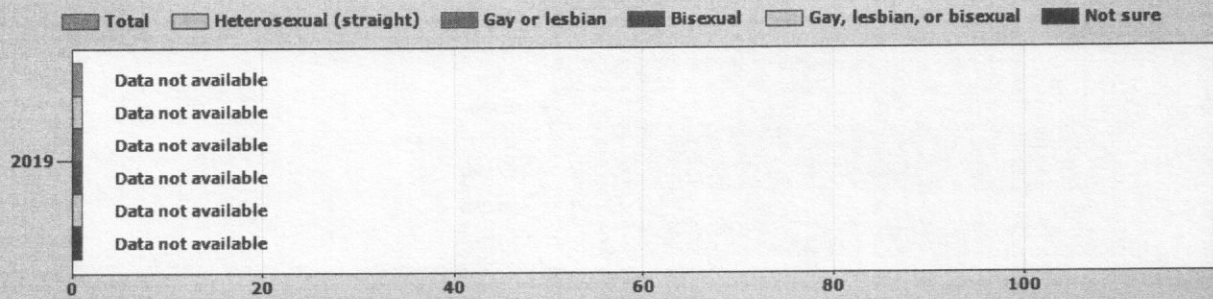
Were not physically active at least 60 minutes per day on all 7 days
 (in any kind of physical activity that increased their heart rate and made them breathe hard some of the time, during the 7 days before the survey)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



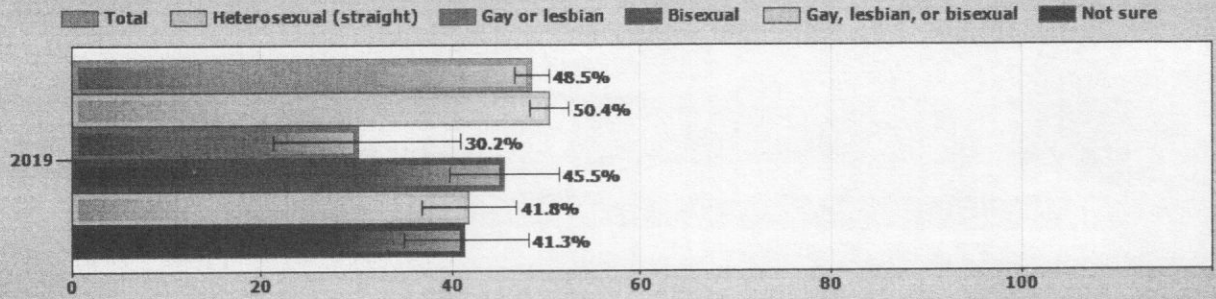
Did not do exercises to strengthen or tone muscles on three or more days
 (such as push-ups, sit-ups, or weight-lifting, during the 7 days before the survey)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



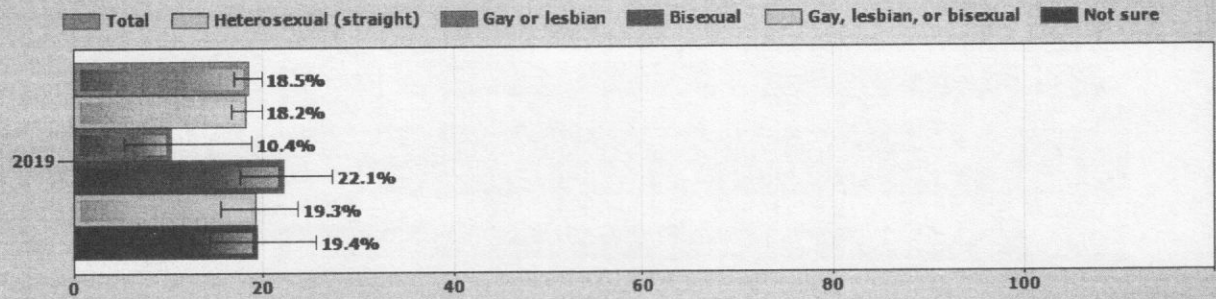
Played video or computer games or used a computer 3 or more hours per day
 (counting time spent playing games, watching videos, texting, or using social media on their smartphone, computer, Xbox, PlayStation, iPad, or other tablet, for something that was not school work, on an average school day)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



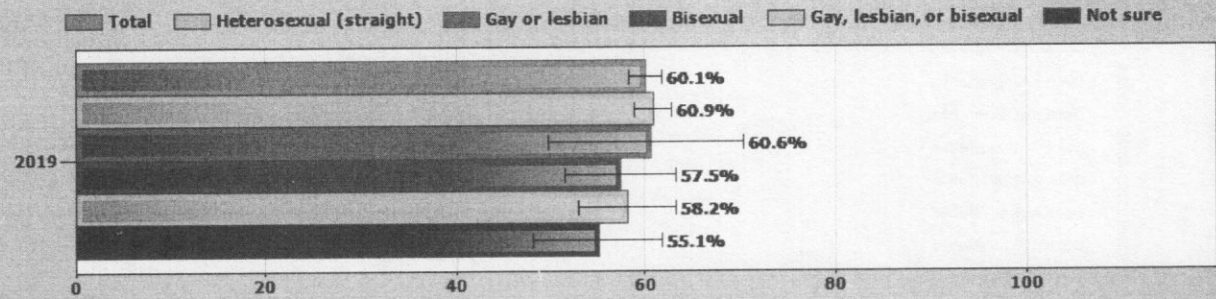
Watched television 3 or more hours per day
 (on an average school day)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019

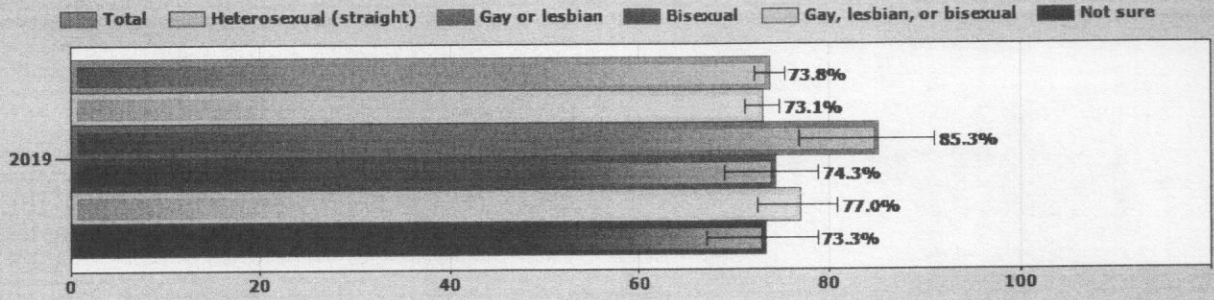


Did not attend physical education (PE) classes on 1 or more days
 (in an average week when they were in school)

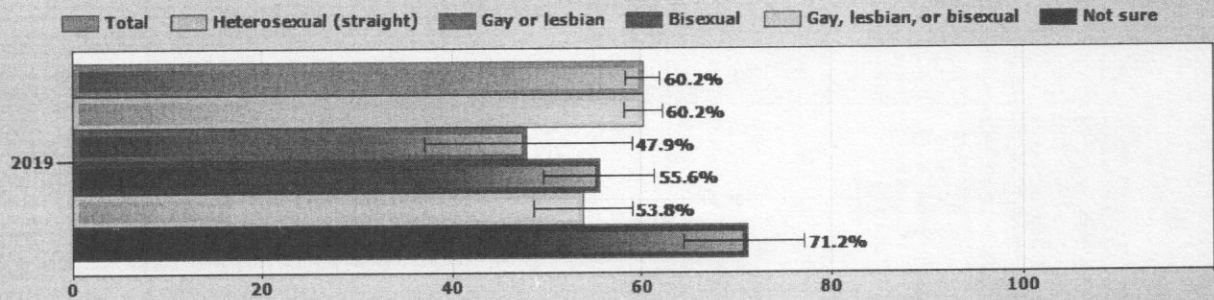
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



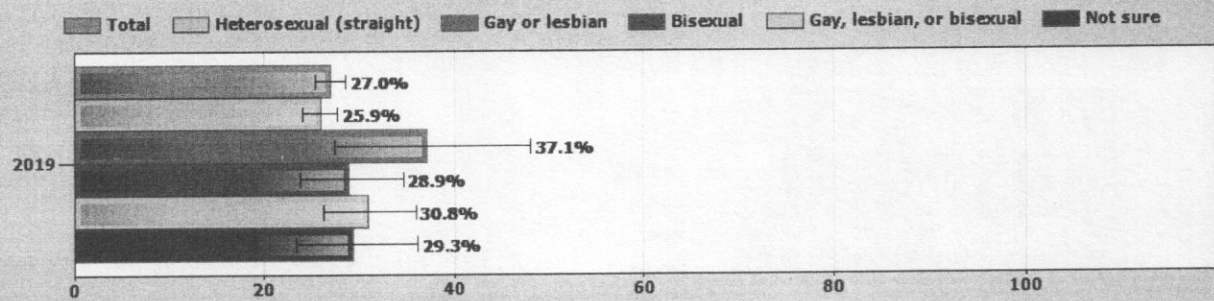
Did not attend physical education (PE) classes on all 5 days
 (in an average week when they were in school)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Did not play on at least one sports team
 (counting any teams run by their school or community groups, during the 12 months before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



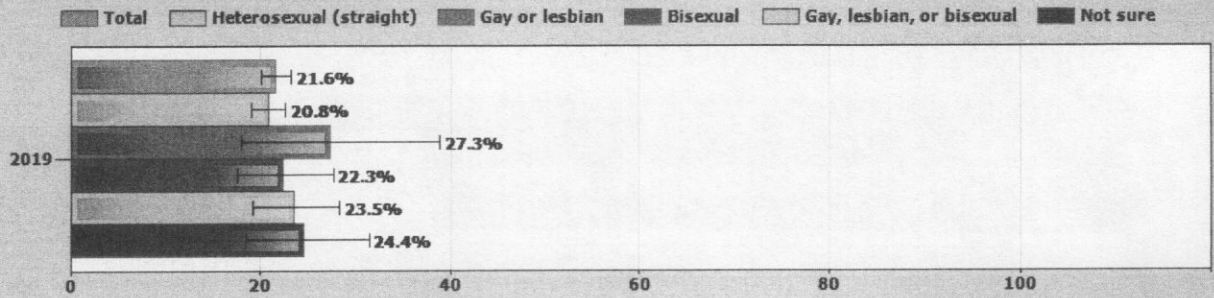
Had a concussion from playing a sport or being physically active
 (one or more times during the 12 months before the survey)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Had obesity

(students who were \geq 95th percentile for body mass index, based on sex- and age-specific reference data from the 2000 CDC growth charts)

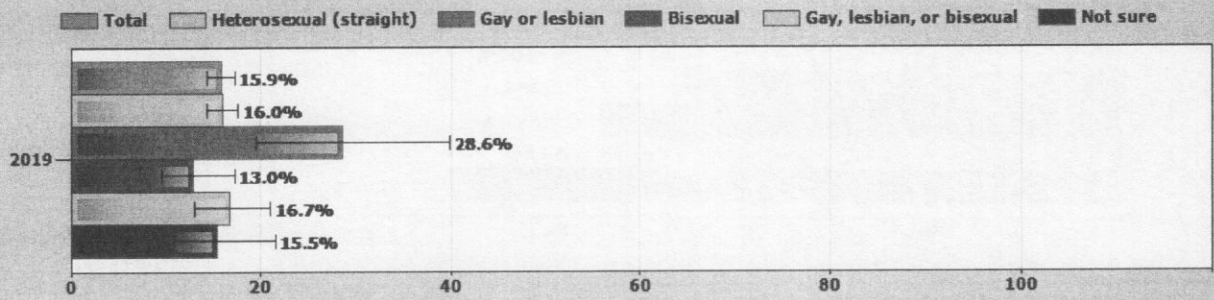
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Were overweight

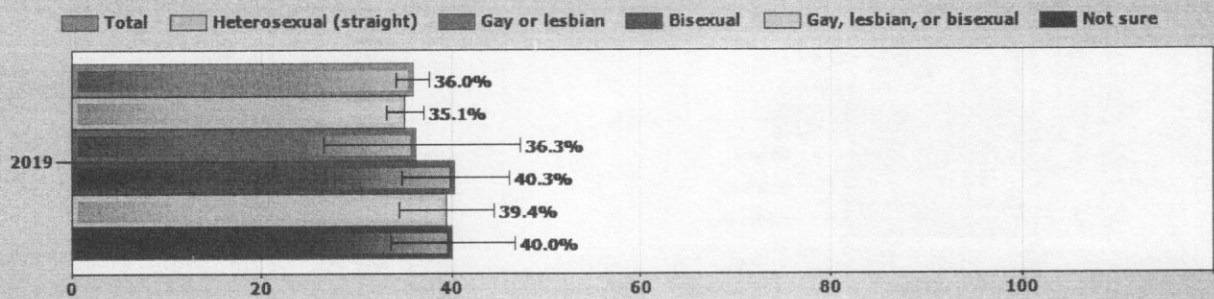
(students who were \geq 85th percentile but $<$ 95th percentile for body mass index, based on sex- and age-specific reference data from the 2000 CDC growth charts)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019

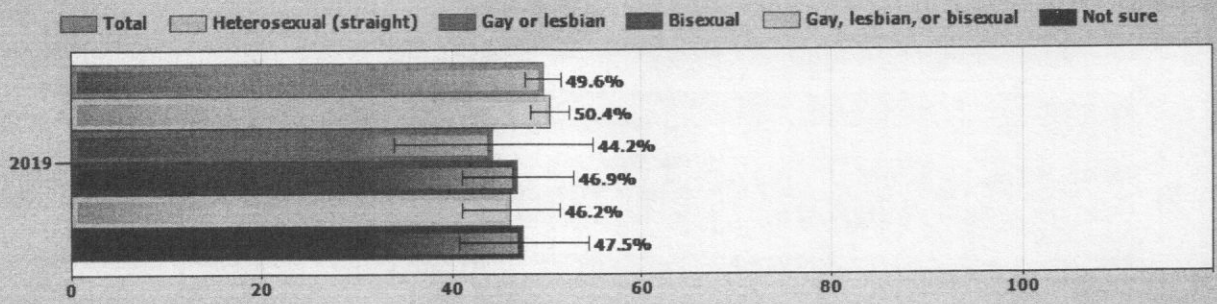


Described themselves as slightly or very overweight

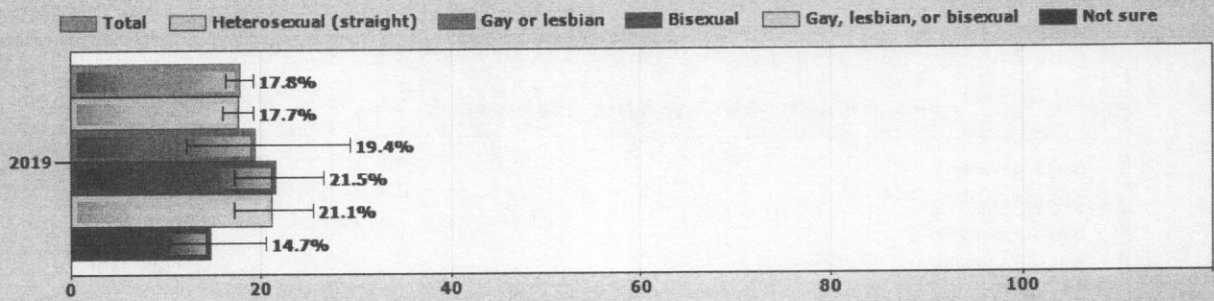
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



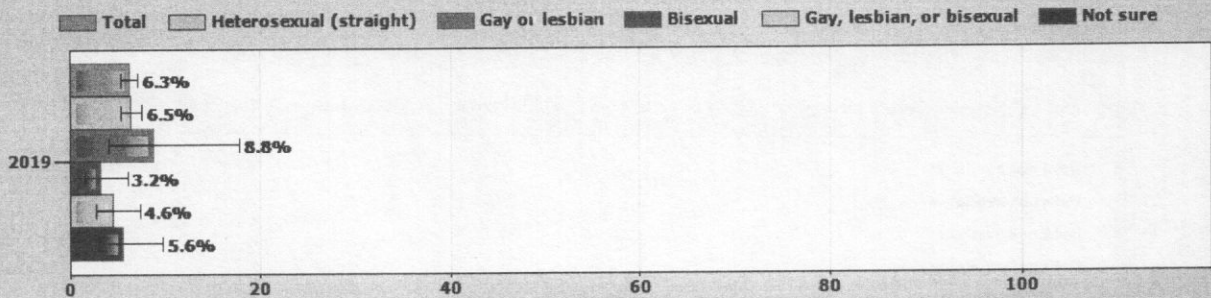
Were not trying to lose weight
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



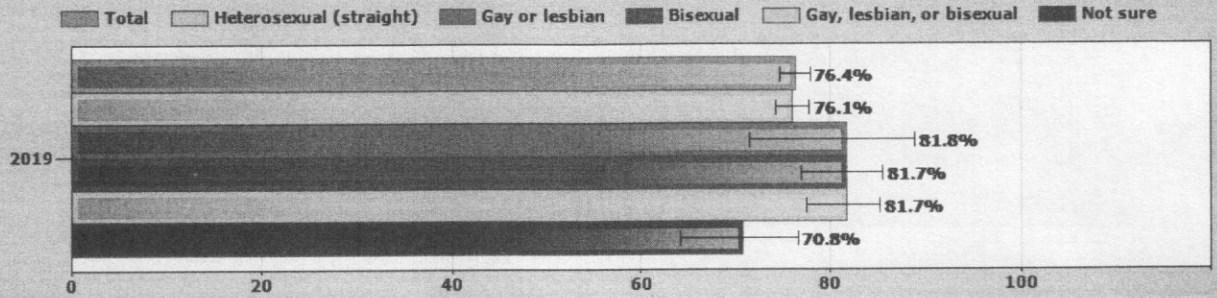
Ever told by a doctor or nurse that they had asthma
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Never saw a dentist
(for a check-up, exam, teeth cleaning, or other dental work)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019

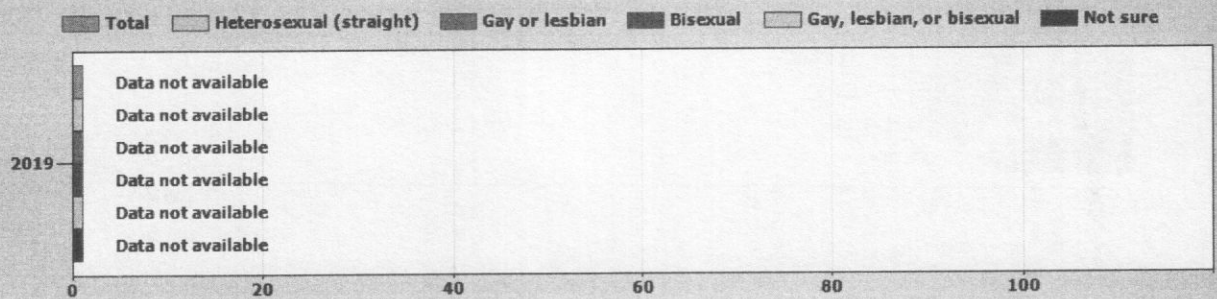


Did not get 8 or more hours of sleep
 (on an average school night)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019

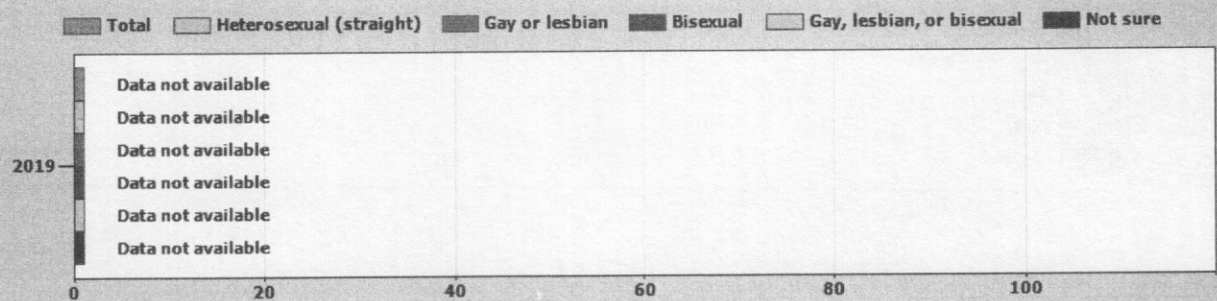


Used an indoor tanning device
 (such as a sunlamp, sunbed, or tanning booth, not counting getting a spray-on tan, one or more times during the 12 months before the survey)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



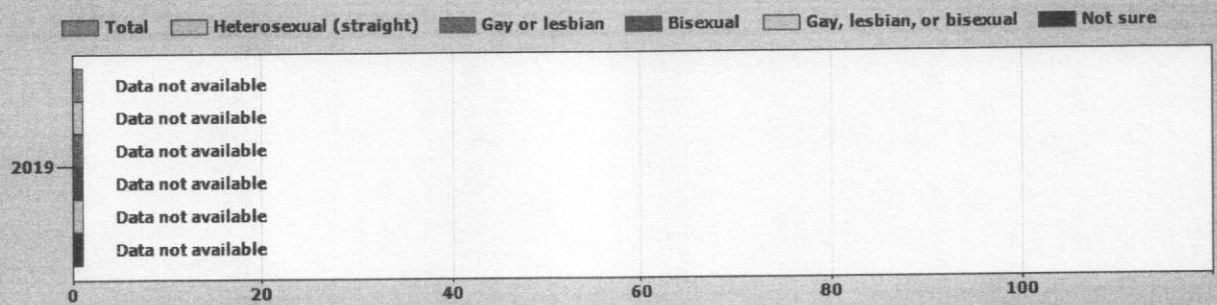
Rarely or never wear sunscreen with an SPF of 15 or higher
 (when being outside for more than one hour on a sunny day)
Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Had to avoid some foods because eating the food could cause an allergic reaction

(such as skin rashes, swelling, itching, vomiting, coughing, or trouble breathing)

Northern Mariana Islands, High School Youth Risk Behavior Survey, 2019



Application URL:

<https://nccd.cdc.gov/youthonline/App/Results.aspx?>

TT=A&OUT=1&SID=HS&QID=QQ&LID=MP&YID=2019&LID2=&YID2=&COL=I&ROW1=N&ROW2=N&HT=QQ&LCT=LL&FS=S1&FR=R1&FG=G1&FA=A1&FI=I1&FP=P1&FSL=S1&FRL=R1&FGL=G1&FAL=A1&FIL=I1&FPL=P1&PV=&TST=False&C1=&C2=&QP=G&DP=1&VA=CI&CS=Y&SYID=&EYID=&SC=DEFAULT&SO=ASC

My name is Dr. Jennifer Maratita, I represent myself as a community member and mother. Thank you for giving me the opportunity to speak with you and putting “Advancing LGBTQ+ equality and well-being in the CNMI” on the legislative agenda. I am a licensed mental health counselor, serving the CNMI for over 15 years. I founded Pride Marianas Youth, a grass roots organization, as a spin-off of Pride Marianas, and alongside a large group of volunteers, we aim to raise awareness of more inclusive, braver and safe spaces for our community. We also want to acknowledge our champion partner agencies and groups such as CHCC, CGC, PSS, NMC, MHS Pride Club, the Northern Marianas Coalition Against Domestic & Sexual Violence, the Pacific Century Fellows, Stellar Marianas, the Humanities Council, and many more to name a few, with countless families and individuals, several here today.

I have had the privilege of providing counseling services, have been close friends with, am a family member of people and youth who identify as LGBTQIA +, and with my son’s permission I am a mother of a child in the spectrum, along with my children who identify as allies.

Please take a look at Movement Advancement Project that maps out the status of LGBT equality on various laws and policies that impact LGBT+ people. As of 2019 there was an estimated total of 40 laws and policies. Puerto Rico ranked highest and had 21.75 out of 40. The CNMI was in the low range and is at 3.5 for sexual orientation policy and -1 in gender identity tally (<https://www.lgbtmap.org/equality-maps>). I didn't know we could be negative.

When we are talking about our youth who identify in the Pride community, were not just talking about sexuality, we are talking about gender identity (how you biologically feel to be your truth versus social norms and gender roles we grow up with), attraction (it can be romantic or emotional), we are talking about expression (how you dress or act whether it is conforming on non conforming with social/gender norms). Specific to our LGBTQIA youth, we have seen our CNMI youth reporting on surveys certain vulnerabilities and experiences. L = lesbian, G = gay, B = bisexual, T = transgender, Q = queer or questioning, I = intersex, A = ally, agender, or asexual, and ‘+’ = others (two spirit, non binary...)

According to the US statistics, 3-5% roughly people that identify as lesbian, gay, or bisexual (https://en.wikipedia.org/wiki/LGBT_demographics_of_the_United_States). However, according to our CNMI Youth Risk Behavior Survey (YRBS), conducted every 2 years by the CDC, in 2019 our LGB students represented 13.2% of the PSS students who were surveyed. In a PSS school population of an estimated 10,000 students, that would mean a generalized estimate of 1,320 of our students identify in the spectrum. (And the survey has not been updated to ask for those who identify as transgender, non-binary, or other expressions or identities.) In my research as a mother, I came across some hard statistics to share according to our 2019 YRBS. The numbers reflect percentages for those who completed the survey and the total numbers I share are generalizations of these percentages to the whole PSS community of an estimated 10,000 students (these numbers are estimates and vary with a 95% confidence interval) (<https://nccd.cdc.gov/Youthonline/App/Results.aspx?TT=A&OUT=0&SID=HS&QID=QQ&LID=XX&YID=2017&LID2=&YID2=&COL=S&ROW1=N&ROW2=N&HT=QQ&LCT=LL&FS=S1&FR=R1&FG=G1&FA=A1&FI=I1&FP=P1&FSL=S1&FRL=R1&FGL=G1&FAL=A1&FIL=I1&FPL=P1&PV=&TST=False&C1=&C2=&QP=G&DP=1&VA=CI&CS=Y&SYID=&EYID=&SC=DEFAULT&SO=ASC>)

In the Year 2019 PSS high school students were surveyed.

	Year 2019 LGB/(Heterosexual)
Were electronically bullied	21%(13%) = generalized estimate of 277 of 10,000 students
Were bullied on school property	26%(17%)= generalized estimate of 343 of 10,000 students
Did not go to school because they felt unsafe (at least 1x in past 30 days)	15%(8%) = generalized estimate of 198 of 10,000 students
Experienced sexual violence by anyone (including kissing, touching, or being physically forced to have sexual intercourse when they did not want to, one or more times during the 12 months before the survey)	27%(10) – generalized estimate of 356 of 10,000 students
Physically forced to have sexual intercourse: (when they did not want to)	22%(8%) = generalized estimate of 290 of 10,000 students
Felt sad or hopeless in the last 12 months:	65%(45%) = generalized estimate of 858 of 10,000 students
Seriously	46%(26%) = generalized estimate of 607 of 10,000 students

considered attempting suicide in the last 12 months::	
Made a plan about how they would attempt suicide at least once in the last 12 months	44%(25%) = generalized estimate of 580 of 10,000 students
attempted suicide at least once in the last 12 months:	34%(15%) = generalized estimate of 448 of 10,000 students
The suicide attempt resulted in needing medical attention	10.9 (3.6) = generalized estimate of 143 of 10,000 students

Let's take a pause to process these numbers. These are our kids.... Please take a moment of you time to pull these stats from the CDC website and trend data, showing that our CNMI kids are reporting increasing trends over the past 6 years.

I have 3 minutes so I'll need to wrap up. I invite you to conduct a needs assessment of where to start. These public comments are great, but gather your qualitative data with our community members.

I had three days to pull some thoughts:

1. I would like to see greater health care protection, so when a president says "your gender affirming health care will stop," it will not be an immediate cost to families and individuals, that can be upwards in the amount of \$2,000 per month.
2. Help the CNMI government establish policies so that there is no confusion about language.

3. When someone harasses you at work because of your orientation or does not validate your gender identity or name, that this is in the realm of harassment.
4. Require annual trainings of all health care workers, government staff, and educators on inclusive language and protection laws.
5. Protect our kids so that no coaches or parents will exclude transgender kids who cannot play on their authentic gender team.
6. Provide access to gender neutral bathrooms so that schools will not be left to interpret access and our kids are protected,
7. Secure funding towards improved protections for equality and access to mental health care and psychological specializations,
8. Training of medical professionals and educators and all government staff towards improvements on our local and national resources for youth,
9. Funding to support and improve advocacy and awareness efforts by our LGBTQ community members, and
10. Support protective factors and activities for our youth.

Thank you again for bringing this to the agenda.

**HOUSE STANDING COMMITTEE ON HEALTH AND WELFARE
HOUSE OF REPRESENTATIVES
TWENTY-SECOND CNMI LEGISLATURE**

VOICE/ROLL CALL VOTE

DATE: May 9, 2022

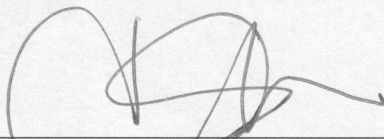
MOTION: To draft a Standing Committee Report for the passage of HB 22-87, "To prohibit discrimination on the basis of sex, gender identity, and sexual orientation, to be known as the CNMI Equality Act or Åktun Achá-Parehu or Alléghúl Aweewepagh of 2021." in its current form.

MOTION OFFERED BY: Rep. Blas Jonathan T. Attao

MOTION SECONDED BY: Rep. Leila C. Staffler

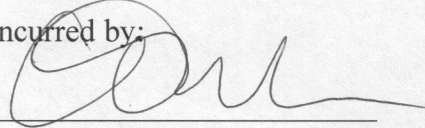
COMMITTEE MEMBERS			Present
1	Chairperson	Christina Marie Elise Sablan	X
2	Vice Chairperson	Leila Haveia Fleming Clark Staffler	X
3	Representative	Blas Jonathan "BJ" Tenorio Attao	X
4	Representative	Sheila Therese Jack Babauta	Excused Absence
5	Representative	Donald Manalang Manglona	X

(VOICE) ACTION TAKEN: Chair declares that the "ayes" have it and the motion is carried.



Clarissa Sablan, House Legislative Assistant

Date: May 9, 2022

Concurred by:


Rep. Christina E. Sablan, Chair

Date: 6/7/2022

**TWENTY-SECOND NORTHERN MARIANAS COMMONWEALTH
LEGISLATURE**

IN THE HOUSE OF REPRESENTATIVES

DECEMBER 20, 2021

Second Regular Session, 2021

H. B. 22-87

A BILL FOR AN ACT

To prohibit discrimination on the basis of sex, gender identity,
and sexual orientation, to be known as the CNMI Equality Act or
Åktun Achá-Parehu or Alléghúl Aweeweppagh of 2021.

**BE IT ENACTED BY THE 22ND NORTHERN MARIANAS
COMMONWEALTH LEGISLATURE:**

- 1 **Section 1. Findings and Purpose.** The Legislature finds that discrimination
2 can occur on the basis of sexual orientation, gender identity, and gender expression.
3 Each of these is considered a form of sex discrimination.
4 Lesbian, gay, bisexual, transgender and queer (also referred to as
5 “LGBTQ”) individuals or those who are perceived to be LGBTQ have been
6 subjected to a history and pattern of persistent, widespread and pervasive
7 discrimination in accessing public accommodations, healthcare, employment,
8 gender affirming identification documents, and services. The Legislature finds that
9 LGBTQ individuals in the Commonwealth of the Northern Mariana Islands have
10 experienced this type of discrimination, which has caused painful and unnecessary
11 hardship for LGBTQ individuals, especially for transgender people.
12 The Legislature finds that the absence of explicit prohibitions against

1 discrimination on the basis of sexual orientation and gender identity in the CNMI
2 has created social and economic disparities and unequal opportunities to life,
3 liberty, and the pursuit of happiness for LGBTQ individuals or individuals
4 perceived to be LGBTQ. This lack of protection promotes a culture of stigma and
5 hate that negatively impacts the safety, health, and well-being of LGBTQ people,
6 and has fostered systemic discrimination, including barriers to basic necessities
7 such as healthcare, employment, and identification documents.

8 In the words of U.S. Supreme Court Justice Anthony Kennedy, joined by
9 Associate Justices Ruth Bader Ginsberg, Stephen Breyer, Sonia Sotomayor, and
10 Elena Kagan, “The Constitution promises liberty to all within its reach, a liberty
11 that includes specific rights that allow persons within a lawful realm, to define and
12 express their identity.” The purpose of this Act is to ensure that everyone in the
13 CNMI, regardless of sexual orientation or gender identity, may enjoy the same
14 protections and equal access to advancement as provided by the Constitution.

15 The Legislature finds that the CNMI is a close-knit community founded
16 upon cultural values of respect and love for one another. Academic publications
17 like *Gender in the Pacific* (Volume 2 of Teaching Oceania Series, Fourth Edition,
18 2016) suggest that in pre-colonial times, indigenous cultures throughout the Pacific
19 including Micronesia, Polynesia, and Melanesia, respected and even revered people
20 of gender variance. In expanding the language of the Commonwealth’s
21 nondiscrimination laws and policies to expressly include sexual orientation and

1 gender identity, the Legislature affirms these deeply rooted values of love,
2 tolerance, and respect – the very fabric of the cultures of the Marianas and Oceania.

3 **Section 2. Enactment.** The following is enacted subject to codification by
4 the Commonwealth Law Revision Commission:

5 § 101 Short Title.

6 This Act shall be known and may be cited as the CNMI Equality Act
7 or Åktun Achá-Parehu or Alléghúl Aweeweppagh.

8 § 102 Purpose.

9 The purpose of this Act is to prohibit discrimination on the basis of
10 sex, gender identity, and sexual orientation. No person shall be denied the
11 equal protection of the laws or the enjoyment of civil rights, nor be
12 discriminated against in the exercise thereof, on account of sex, gender
13 identity, or sexual orientation.

14 § 103. Discrimination in Employment Prohibited.

15 (a) No person shall discriminate against any other person in
16 employment, including but not limited to hiring, promotion, dismissal, and
17 the granting of appropriate salary and benefits because of race, color,
18 religion, national origin, sex, gender identity, or sexual orientation.

19 (b) It shall be an unlawful employment practice for an employer,
20 employment agency, labor organization, or joint labor-management
21 committee controlling apprenticeship or other training or retraining

1 (including on-the-job training programs) to fail or refuse to hire or to
2 discharge any individual, or otherwise to discriminate against an individual,
3 based on the individual's hair texture or hairstyle, if that hair texture or that
4 hairstyle is commonly associated with a particular race or national origin.

5 (c) Any violation of this section shall be:

6 (1) punishable by a fine of not more than \$2,000; and

7 (2) actionable as a civil tort within the jurisdiction of the
8 Northern Mariana Islands. A court that has found such
9 discrimination may grant punitive damages if it deems fit.”

10 **Section 3. Amendment.** Title 1, Division 8, Section 8141 of the
11 Commonwealth Code is hereby amended to read as follows:

12 “§ 8141. Prohibited Activities: Discrimination Practices.

13 No person holding any position in the civil service shall be favored
14 or discriminated against on account of age, race, sex, gender identity, sexual
15 orientation, religion, political affiliation, or place of origin.”

16 **Section 4. Amendment.** Title 1, Division 9, Section 9513(a) subsections
17 (7) and (8) of the Commonwealth Code is hereby amended to read as follows:

18 “§ 9513. Eligibility Requirements.

19 (a) General. A sports organization is eligible to be recognized, or to
20 continue to be recognized, as a national federation only if it:

1 (7) Provides an equal opportunity to athletes, coaches,
2 trainers, managers, administrators, and officials to participate in
3 athletic competition, without discrimination on the basis of race,
4 color, religion, sex, sexual orientation, gender identity, age, or
5 national origin, and with fair notice and opportunity for a hearing to
6 any athlete, coach, trainer, manager, administrator, or official before
7 declaring the individual ineligible to participate;

8 (8) Is governed by a board of directors or other governing
9 board whose members are selected without regard to race, color,
10 religion, national origin, sexual orientation, gender identity, or sex,
11 except that, in sports where there are separate male and female
12 programs, it provides for reasonable representation of both males
13 and females on the board of directors or other governing board;”

14 **Section 5. Amendment.** Title 1, Division 2, Section 20216 of the
15 Commonwealth Code is hereby amended to read as follows:

16 “§ 20216. Nondiscrimination.

17 The Commonwealth Medicaid Agency shall assure that no
18 individual shall be subjected to discrimination under the plan in this Article
19 on the grounds of race, color, sex, sexual orientation, gender identity,
20 national origin, religion or disability.”

1 **Section 6. Amendment.** Title 2, Division 4, Section 40103 subsections
2 (a) - (e) of the Commonwealth Code are hereby amended to read as follows; to add
3 a new subsection (f) to Title 2, Division 4, Section 40103 of the Commonwealth
4 Code to read as follows and to re-number all subsequent subsections accordingly:

5 “§ 40103. Discrimination in the Sale or Rental of Housing and Other
6 Prohibited Practices.

7 As made applicable by 2 CMC § 40102 and except as exempted by
8 2 CMC § 40102(b) and 2 CMC § 40106, it shall be unlawful:

9 (a) To refuse to sell or rent after the making of a bona fide offer, or
10 to refuse to negotiate for the sale or rental of, or otherwise make unavailable
11 or deny, a dwelling to any person because of race, color, religion, sex,
12 sexual orientation, gender identity, familial status, marital status, disability,
13 or national origin.

14 (b) To discriminate against any person in the terms, conditions, or
15 privileges of sale or rental of a dwelling, or in the provision of services or
16 facilities in connection therewith, because of race, color, religion, sex,
17 sexual orientation, gender identity, familial status, marital status, disability,
18 or national origin.

19 (c) To make, print, or publish, or cause to be made, printed, or
20 published any notice, statement, or advertisement, with respect to the sale
21 or rental of a dwelling that indicates any preference, limitation, or

1 discrimination based on race, color, religion, sex, sexual orientation, gender
2 identity, disability, familial status, marital status, or national origin, or an
3 intention to make any such preference, limitation, or discrimination.

4 (d) To represent to any person because of race, color, religion, sex,
5 sexual orientation, gender identity, disability, familial status, marital status,
6 or national origin that any dwelling is not available for inspection, sale, or
7 rental when such dwelling is in fact so available.

8 (e) For profit, to induce or attempt to induce any person to sell or
9 rent any dwelling by representations regarding the entry or prospective
10 entry into the neighborhood of a person or persons of a particular race, color,
11 religion, sex, sexual orientation, gender identity, disability, familial status,
12 marital status, or national origin.

13 (f) No person in the Commonwealth shall be subjected to a
14 discriminatory housing practice based on the person's hair texture or
15 hairstyle, if that hair texture or that hairstyle is commonly associated with a
16 particular race or national origin."

17 **Section 7. Amendment.** Title 2, Division 4, Section 40104 of the
18 Commonwealth Code is hereby amended to read as follows:

19 "§ 40104. Discrimination in Residential Real Estate-Related
20 Transactions.

1 (a) *In general.* It shall be unlawful for any person or other entity
2 whose business includes engaging in residential real estate-related
3 transactions to discriminate against any person in making available such a
4 transaction, or in the terms or conditions of such a transaction, because of
5 race, color, religion, sex, sexual orientation, gender identity, disability,
6 familial status, marital status, or national origin.

7 (b) Definition. As used in this section, the term “residential real
8 estate-related transaction” means any of the following:

9 (1) The making or purchasing of loans or providing other
10 financial assistance:

11 (i) For purchasing, constructing, improving,
12 repairing, or maintaining a dwelling; or

13 (ii) Secured by residential real estate

14 (2) The selling, brokering, or appraising of residential real
15 property.

16 (c) Appraisal exemption. Nothing in this chapter prohibits a person
17 engaged in the business of furnishing appraisals of real property to take into
18 consideration factors other than race, color, religion, national origin, sex,
19 sexual orientation, gender identity, disability, familial status, or marital
20 status.”

1 **Section 8. Amendment.** Title 2, Division 4, Section 40105 of the
2 Commonwealth Code is hereby amended to read as follows:

3 “§ 40105. Discrimination in the Provision of Brokerage Services.

4 It shall be unlawful to deny any person access to or membership or
5 participation in any multiple-listing service, real estate brokers’
6 organization or other service, organization, or facility relating to the
7 business of selling or renting dwellings, or to discriminate against ~~him~~ any
8 person in the terms or conditions of such access, membership, or
9 participation, on account of race, color, religion, sex, sexual orientation,
10 gender identity, disability, familial status, marital status, or national origin.”

11 **Section 9. Amendment.** Title 2, Division 4, Section 40115 of the
12 Commonwealth Code is hereby amended to read as follows:

13 “§ 40115. Violations; Penalties.

14 Whoever, whether or not acting under color of law, by force or threat
15 of force willfully injures, intimidates or interferes with, or attempts to
16 injure, intimidate or interfere with:

17 (a) Any person because of ~~his~~ race, color, religion, sex, sexual
18 orientation, gender identity, disability (as such term is defined in 2 CMC §
19 40101), familial status (as such term is defined in 2 CMC § 40101), marital
20 status, disability, or national origin and because ~~he~~ that person is or has been
21 selling, purchasing, renting, financing, occupying, or contracting or

1 negotiating for the sale, purchase, rental, financing or occupation of any
2 dwelling, or applying for or participating in any service, organization, or
3 facility relating to the business of selling or renting dwellings; or

4 (b) Any person because ~~he~~ that person is or has been, or in order to
5 intimidate such person or any other person or any class of persons from:

6 (1) Participating, without discrimination on account of race,
7 color, religion, sex, sexual orientation, gender identity, disability (as
8 such term is defined in 2 CMC § 40101), familial status (as such
9 term is defined in 2 CMC § 40101), marital status, disability, or
10 national origin, in any of the activities, services, organizations or
11 facilities described in subsection (a) of this section; or

12 (2) Affording another person or class of persons opportunity
13 or protection so to participate; or

14 (c) Any citizen because ~~he~~ that citizen is or has been, or in order to
15 discourage such citizen or any other citizen from lawfully aiding or
16 encouraging other persons to participate, without discrimination on account
17 of race, color, religion, sex, sexual orientation, gender identity, disability
18 (as such term is defined in 2 CMC § 40101), familial status (as such term is
19 defined in 2 CMC § 40101), marital status, or national origin, in any of the
20 activities, services, organizations or facilities described in subsection (a) of
21 this section, or participating lawfully in speech or peaceful assembly

1 opposing any denial of the opportunity to so participate; shall be fined under
2 this chapter or imprisoned not more than one year, or both; and if bodily
3 injury results from the acts committed in violation of this section or if such
4 acts include the use, attempted use, or threatened use of a dangerous
5 weapon, explosives, or fire shall be fined under this chapter or imprisoned
6 not more than 10 years, or both; and if death results from the acts committed
7 in violation of this section or if such acts include kidnapping or an attempt
8 to kidnap, aggravated sexual abuse or an attempt to commit aggravated
9 sexual abuse, or an attempt to kill, shall be fined under this chapter or
10 imprisoned for any term of years or for life, or both.”

11 **Section 10. Amendment.** Title 4, Division 5, Section 5120 of the
12 Commonwealth Code is hereby amended to read as follows:

13 “§ 5120. Discrimination.

14 It is an offense for any merchant to discriminate in commerce with
15 any person on the basis of the race, color, creed, religion, sex, sexual
16 orientation, gender identity, age, ethnic background, national origin,
17 citizenship, or place of birth or residence of the person.”

18 **Section 11. Amendment.** Title 4, Division 7, Section 7103(kk) of the
19 Commonwealth Code is hereby amended to read as follows:

20 “§ 7103. Definitions.

1 (kk) *Unreasonable Rate Increase*. A rate increase that is, excessive,
2 inadequate or unfairly discriminatory for the purposes of this chapter and as
3 defined below:

4 (1) Excessive rate increase—The rate increase is an
5 excessive rate increase if the increase causes the premium charged
6 for the health insurance coverage to be unreasonably high in relation
7 to the benefits provided under the coverage.

8 (2) Unjustified rate increase—The rate increase is an
9 unjustified rate increase if the health insurance issuer provides data
10 or documentation to the Commissioner in connection with the
11 increase that is incomplete, inadequate or otherwise does not
12 provide a basis upon which the reasonableness of an increase may
13 be determined.

14 (3) Unfairly discriminatory—The rate increase is an unfairly
15 discriminatory rate increase if the increase results in premium
16 differences between insureds within similar risk categories that are
17 not permissible under applicable state and federal statutes and
18 regulations, including with regard to race, color, religion, sex, sexual
19 orientation, gender identity, or national origin.”

20 **Section 12. Amendment.** Title 7, Division 3, Section 3105 of the
21 Commonwealth Code is hereby amended to read as follows:

1 “§3105. Exclusion or Excuse from Service.

2 (a) A judge may, for good reason, excuse or exclude from jury
3 service any person called as a juror.

4 (b) Any class or group of persons may, for the public interest, be
5 excluded from the jury panel or excused from service as jurors by court
6 order based on a finding that the jury service would entail undue hardship,
7 extreme inconvenience, or serious obstruction or delay in the fair and
8 impartial administration of justice; provided, that no citizen of the Trust
9 Territory or of the United States shall be excluded from service as a juror
10 on account of race, color, ~~or~~ religion, sexual orientation, gender identity, or
11 national origin.”

12 **Section 13. Severability.** If any provisions of this Act or the application of
13 any such provision to any person or circumstance should be held invalid by a court
14 of competent jurisdiction, the remainder of this Act or the application of its
15 provisions to persons or circumstances other than those to which it is held invalid
16 shall not be affected thereby.

17 **Section 14. Savings Clause.** This Act and any repealer contained herein
18 shall not be construed as affecting any existing right acquired under contract or
19 acquired under statutes repealed or under any rule, regulation, or order adopted
20 under the statutes. Repealers contained in this Act shall not affect any proceeding
21 instituted under or pursuant to prior law. The enactment of the Act shall not have

1 the effect of terminating, or in any way modifying, any liability, civil or criminal,
2 which shall already be in existence on the date this Act becomes effective.

3 **Section 15. Effective Date.** This Act shall take effect upon its approval by
4 the Governor, or its becoming law without such approval.

Prefiled: 12/2/2021

Date: 12/2/2021

Introduced by: /s/ Rep. Christina M.E. Sablan
/s/ Rep. Roy C.A. Ada
/s/ Rep. Celina R. Babauta
/s/ Rep. Sheila J. Babauta
/s/ Rep. Richard T. Lizama
/s/ Rep. Edwin K. Propst
/s/ Rep. Leila H.F.C. Staffler

Reviewed for Legal Sufficiency by:

/s/ John B. Layde
House Legal Counsel