



## **The Health & Wellness of New York City's LGBTQ Asians and Pacific Islanders**

### EXECUTIVE SUMMARY

Apicha Community Health Center (CHC) undertook an ambitious effort to address the health and wellness needs of New York City's lesbian, gay, bisexual, transgender, and queer (LGBTQ) Asian, Asian American, South Asian, Southeast Asian, and Pacific Islander<sup>i</sup> (API) communities. Apicha CHC explored:

- (1) the health and wellness needs of the New York City LGBTQ API community
- (2) barriers or "social determinants" that frustrate access to these needs
- (3) services and programs or "delivery models" to address these needs

This comprehensive needs assessment will help Apicha CHC develop programs at its new Center in Jackson Heights, Queens.

Formerly named the Asian and Pacific Islander Coalition on HIV/AIDS, Apicha CHC was founded in 1989 to address unmet HIV/AIDS-related needs of Asians and Pacific Islanders in New York City. After two decades of HIV-focused practice, in 2009, Apicha CHC expanded its nationally recognized HIV care model to include general primary care. Then in 2015, Apicha became a full-fledged Federally Qualified Health Center (FQHC), providing a wide range of health and wellness services. Today, Apicha Community Health Center provides Primary Care, Behavioral Health, Dental Care, Pediatric Care, Registered Dietitian Care, Care Management and other vital support services to clients and patients regardless of race, ethnicity, sexual orientation, or gender identity.

Yet the needs of LGBTQ API people still remain overlooked. Many studies have examined the needs of LGBTQ people<sup>ii</sup> or APIs,<sup>iii</sup> but few have examined the needs of those living at the intersection<sup>iv</sup> and specifically in New York City.<sup>v</sup> Many Asian American healthcare providers are reluctant to provide services to LGBTQ people. LGBTQ providers often only speak English or do not understand culturally specific API experiences. Apicha CHC provides culturally-competent, linguistically-appropriate, and LGBTQ-sensitive care to the most vulnerable New Yorkers.

Apicha CHC's needs assessment is a groundbreaking, comprehensive, and multi-faceted study that explores the breadth, depth, and priority of LGBTQ API health needs. Every aspect explores health and wellness needs, social determinants, and services. The assessment includes:

- A confidential and anonymous survey of 344 LGBTQ APIs in 10 languages
- Discussions with local LGBTQ API organizations
- Focus groups of specific underserved high-risk groups
- Individual interviews with people belonging to groups with special needs
- Professional assessments from Apicha CHC staff, physicians, and other healthcare providers.

This study contributes to the larger body of literature and studies that assess the health or wellness of LGBTQ or API communities. But Apicha CHC's study adds a more precise intersectional analysis. It also builds off of and addresses needs that might have been missing in the New York City Department of Health and Mental Hygiene's acclaimed 2021 report, *Health of Asians and Pacific Islanders in New York City*.

The findings in this assessment are quantifiable, assessing how widespread certain needs are, as well as qualitative, revealing specific needs and social determinants affecting access to care. Data was collected over five (5) months, from June through October 2022.

The **key recommendations** that address the most prevalent **health and wellness needs** of New York City's LGBTQ API community are:

- Expansion of **Mental Health Services** and **Psychiatry**
- More publicity about **Free Testing for STDs / HIV/AIDS**
- Health Education on **Sexual Health & Hygiene**
- **Dermatology**
- Culturally-competent, bilingual, LGBTQ-sensitive, and nonjudgmental healthcare providers

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## **The Health & Wellness of New York City's LGBTQ Asians and Pacific Islanders**

### **SUMMARY OF KEY FINDINGS**

The most prevalent **health and wellness needs** of New York City's LGBTQ API community are:

- Mental Health Services
- Testing for STDs / HIV/AIDS
- Sexual Health & Hygiene
- Dermatology
- Culturally-competent, bilingual, LGBTQ-sensitive, and nonjudgmental healthcare providers

Mental health services often include the need for culturally competent, bilingual, LGBTQ-sensitive, and nonjudgmental psychotherapists or peer support groups. Treatments for depression, anxiety, Attention Deficit Disorder (ADD), Attention Deficit Hyperactivity Disorder (ADHD), Obsessive-Compulsive Disorder (OCD), and Post-Traumatic Stress Disorder (PTSD) are also highly ranked. Other wellness needs are treatment for addiction (e.g., smoking, alcohol, crystal meth, etc.) and finding LGBTQ-sensitive providers.

Apicha CHC currently incorporates mental health in its primary care services. An expansion of services is needed to provide free psychotherapy, regular peer-support groups for vulnerable or struggling individuals facing similar challenges, and psychiatrists who can diagnose and prescribe necessary psychotropic medications.

Testing for STDs / HIV/AIDS and Sexual Health & Hygiene were both listed as recurrent needs. Respondents repeatedly identified the need for free testing for STDs / HIV/AIDS, especially more often than every six months. Apicha CHC currently provides free testing for STDs / HIV/AIDS, but respondents did not know of this service. Expanded promotion and communication to inform the LGBTQ API community of Apicha CHC's free testing for STDs / HIV/AIDS is needed.

Sexual Health & Hygiene arose as a need that is best addressed through public health education. This priority often arose in the survey as "anal health," but focus groups revealed that this was part of a larger need for overall sexual health, hygiene, and care. An emerging need is for family planning contraception and pregnancy testing. With the advent of PrEP, PEP, and increased sexual activity, anal sex has become more prevalent. The need for more regular free testing for STDs / HIV/AIDS and greater awareness on Sexual Health & Hygiene was voiced several times, especially by more vulnerable populations such as youth, immigrants, sex workers, and those in the kink/leather/BDSM communities.

Dermatology was ranked as a new emerging need (following Mental Health, STD / HIV/AIDS testing, and Sexual Health) in the survey. It was identified from a list of services that Apicha does not address in-house, but makes referrals for. Dermatology was also mentioned in focus groups and interviews. Respondents commented that occasional skin rashes, itchy

skin thought to be eczema, skin growths, or skin breaks in the genital area required a specialist in dermatology for diagnosis and treatment.

The most prevalent **social determinants** of health that frustrate access to these needs are:

- Lack of culturally competent, bilingual, LGBTQ-sensitive, and nonjudgmental healthcare providers
- Lack of insurance or navigating insurance bureaucracy, such as finding providers covered by one's insurance
- Finances; specifically high co-pays, deductibles, or the need to self-pay for mental health services. Many LGBTQ APIs are paying out of pocket for therapy from LGBTQ-affirming therapists of color.

Moreover, access to culturally competent, bilingual, LGBTQ-sensitive, and nonjudgmental mental health services is challenging because of clients' undocumented immigrant status, insurance limitations, or needing to self-pay for therapists since many do not take insurance.

Anti-Asian violence and hate crimes have increased significantly, especially in New York City, since the onset of the COVID-19 pandemic. However, survey respondents did not identify that violence or fear of violence was a continuing barrier in seeking health care. This was probably due to the timing of the survey. Survey responses were collected over five (5) months, from June through October 2022. During this time, most COVID-19 restrictions had already been lifted and anti-Asian hate crimes had subsided. Moreover, Apicha CHC participated in a quick community response to anti-Asian violence, along with agencies, community-based organizations, and state and municipal political leaders.

Few respondents said that they had no insurance. Apicha CHC's own efforts to sign up LGBTQ APIs for health care under the Affordable Care Act, along with the numerous "health care navigators" in both the LGBTQ and API communities in New York City seem to have been effective. However, problems with navigating insurance policies and finding a provider covered by insurance are widespread.

**Services and programs** to address these needs include:

- More frequent free testing for STDs / HIV/AIDS
- Peer support groups as a method to deliver mental health services
- Hiring culturally competent, bilingual, LGBTQ-sensitive, and nonjudgmental psychotherapists and psychiatrists
- Hiring culturally competent, bilingual, LGBTQ-sensitive, and nonjudgmental healthcare providers
- Health education on Sexual Health & Hygiene

Members of vulnerable communities—such as sex workers, young people struggling to come out to their families, and victims of violence—identified that peer support groups facilitated by licensed professionals, or at least a trained and experienced facilitator, could effectively address their needs.

The major **pharmaceutical needs** of LGBTQ APIs are PrEP / PEP as well as medications to treat mental illnesses such as ADD / ADHD / OCD / PTSD (Attention Deficit Disorder, Attention Deficit Hyperactivity Disorder, Obsessive-Compulsive Disorder, Post-Traumatic Stress Disorder).

Patient interviews revealed that doctors have become much more reluctant in prescribing psychotropic medications. Medications to treat ADD / ADHD / OCD / PTSD such as Adderall or Klonopin are stimulants. Though effective, they can be abused. The national opioid

epidemic has made doctors more cautious, if not resistant, toward prescribing these medications.

Primary care physicians have been more willing to prescribe antidepressants, but have been reluctant to prescribe other psychotropic medications. Sometimes they are unfamiliar with how to assess the appropriate dosage and how to make adjustments. Patients often assume that a primary care physician can diagnose and treat all conditions, but oftentimes specialists are needed.

This study recommends that Apicha CHC hire a **psychiatrist** who can provide comprehensive mental health care, including appropriate diagnosis, treatments, and prescription medications. Likewise, that psychiatrist should be familiar with the nuances of Asian cultures, possess some bilingual ability, and be LGBTQ-sensitive and nonjudgmental of various sexual practices and lifestyles.

Additionally, ADD / ADHD medications must be taken daily, but patients are limited to refills of only 30 days at a time. Insurance coverage is very strict and pharmacies will not release the medication beforehand.

**Health education** on Sexual Health & Hygiene is highly needed, with a focus on anal health. Respondents also identified the need for education on Mental Health, Addiction, and Cancer. "Mental Health" included mental health in general, Emotional Issues / Anxiety / Depression, and ADD / ADHD / OCD / PTSD, and more than half (54%) of respondents identified it as the most important health/well-being need that they wanted to learn about.

Health education on cancer treatment and diagnosis is also needed, but to a lesser degree. Cancer arose as statistically significant in the survey as a widespread need, but it rarely arose during any focus group or community meetings examining issues more in depth. More vulnerable low-wage immigrant workers and seniors did identify cancer in individual interviews.

Further analysis through interviews revealed that the priority of cancer was not so much about respondents' own personal diagnoses and treatment plans, but rather a general lack of awareness of cancer, how it is diagnosed, and its treatability. Interviewees heard of "skin cancer," "ovarian cancer," and "testicular cancer," but had little awareness of the warning signs. Lymphoma has a higher preponderance among gay men and correlates closely with those who have HIV/AIDS. Nasopharyngeal (nasal) cancer has a higher preponderance among APIs. The perception that cancer is terminal, even though it is often treatable and manageable, heightened community fears and statistically elevated its ranking. Indeed, 40% of people are expected to get a cancer diagnosis sometime in their lives.

LGBTQ API New Yorkers are also generally healthy. Apicha CHC's assessment found that most LGBTQ API respondents exercise regularly, try to eat a balanced diet, and take time for self-care.

They generally feel "good" about themselves physically and about their attractiveness to others. But when asked about their mental health, most positive responses dropped from "good" to "fair." Women and transgender respondents reflected the same, but with small drops in the percentages of those who said "good"; more responded "fair." Men also experienced this drop when asked about their mental health. LGBTQ API respondents who engaged in unhealthy or high-risk activities did so infrequently.

Monkeypox was not identified as a frequent concern, even though the survey was conducted during the height of the monkeypox outbreak in New York City. This could have been because of city and nonprofit efforts to educate the larger LGBTQ community about monkeypox.

Certain issues like weight and body image, excessive drug use (including party drugs), and difficulty in coming out to Asian families were not widespread. However, when examining young people under the age of 24 specifically, these issues arose with much more frequency.

Detailed analysis and breakouts are provided at the end by:

- Ethnicity
- Borough
- Queens & Jackson Heights (Zip Code 11372)
- Income
- Age
- Special Needs Group: Immigrant, Leather/BDSM/Kink, Sex Worker

Apicha CHC's health and wellness needs assessment surveyed 344 LGBTQ APIs in New York City in 10 languages, and also collected qualitative input from local LGBTQ API organizational stakeholders, focus groups of specific underserved high-risk groups, and one-on-one interviews with people with special needs, front-line workers, physicians, and other healthcare providers. The findings leads to **five recommendations** for:

- Mental Health Services and Psychiatry
- Free Testing for STDs / HIV/AIDS
- Health Education on Sexual Health & Hygiene
- Dermatology
- Culturally-competent, bilingual, LGBTQ-sensitive, and nonjudgmental healthcare providers

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<sup>i</sup> The term "Asian Pacific Islander" or "API" is intended to be inclusive and is used throughout this report. However, we recognize that the term is also imperfect. Asian Americans and Pacific Islanders are each numerous in population size and have different needs across the country. But in New York City, as well as in this study, the overwhelming majority of "APIs" are Asian American and there are very few Pacific Islanders. Still, to be consistent with the New York City Department of Health, this report uses the terminology of "Asian Pacific Islander" or "API."

<sup>ii</sup> At the same time, the had a fear that the benefits that they are currently able to receive through various municipal and state programs, regardless of immigrant status, might end.

<sup>iii</sup> New York City Department of Health and Mental Hygiene (NYC Health Department), *Health of Asians and Pacific Islanders in New York City*, 2021. Hereinafter as "NYC Health Department, "Health of APIs in NYC" 2021."

<sup>iv</sup> Sel Hwahng & Alison J. Lin, "The Health of Lesbian, Gay, Bisexual, Transgender, Queer and Questioning People" in *Asian American Communities and Health: Context, Research, Policy, and Action*. (2009), eds. Chau Trinh-Shevrin, Mariano Jose Rey, Nadia S. Islam.

<sup>v</sup> National Gay and Lesbian Task Force Policy Institute, Alain Dang & Mandy Hu, *Asian Pacific American Lesbian, Gay, Bisexual and Transgender People: A Community Portrait. A report from New York's Queer Asian Pacific Legacy Conference*. New York (2005).