



IN
NOT
E
CE

FIGHT
POVERTY,
NOT THE
POOR

LEAVE NO ONE BEHIND

2022 DC LGBTQ ELECTION GUIDE

PAY WORKERS
THE \$
& RESPECT
THEY DESERVE

HOUSING
FOR
ALL!!!

GLAA

FIGHTING FOR LGBTQ EQUALITY
IN D.C. SINCE 1971



LEAVE NO ONE BEHIND

2022 DC LGBTQ Election Guide

March 31, 2022

GLAA Officers:

Benjamin Brooks, Vice-President of Communications
David Mullis, Vice-President of Legislative Affairs
Joe Servidio, Vice-President of Community Engagement
John Becker, Vice-President of Political Affairs
Tyrone Hanley, President

Thank you to the amazing law students who volunteered to help draft the guide, including:

Abigail Rosenthal, American University Washington College of Law
Arielle Aboulafia, American University Washington College of Law
Charles Iantorno, George Mason University
David Mullis, American University Washington College of Law
Dezhi Cao, Georgetown University Law Center
Elizabeth Pianucci, Georgetown University Law Center
Katelyn Buckles, American University Washington College of Law
Kenneth I. Macritchie, American University Washington College of Law
Lyra (Hanyu) Jiang, Georgetown University Law Center
Mariah Johnson, Georgetown University Law Center
Mingyan Hu, Georgetown University Law Center
RG Yamba, American University Washington College of Law
Yuchen Yang, Georgetown University Law Center

GLAA deeply appreciates the various community advocates and organizations that provided feedback and edits. We are honored to be in community with the each of you.

Cover by Michael Smith, Georgetown University Law Center

www.glaa.org equal@glaa.org

PRESIDENT'S MESSAGE

Last year, GLAA celebrated its 50th anniversary amid the ongoing pandemic. As the nation's longest running LGBTQ organization, we are humbled to continue a legacy of five decades of LGBTQ advocacy and activism in the District.

I know for many the pandemic has taught or reminded us that our lives are not ours alone. Our lives impact others, and we need each other. Plain and simple. Or, so it should be.

Sadly, these simple truths go ignored as the District government continues to neglect individuals and families struggling to get by in a wealthy city, demolish homeless encampments, blame city challenges on housing voucher holders, and stuff residents in decaying jails. We are leaving our own behind.

Our election guide outlines key priorities for addressing the needs of LGBTQ residents while focusing on racial and economic justice: including housing, workers' rights, health, and policing and incarceration. Our priorities reflect feedback from community partners and the work being done across D.C. to make it a better place for everyone. By focusing on the included priorities, we hope to uplift those in our LGBTQ community who are being left behind by economic prosperity and current systems.

As someone who was abandoned by his father, I know what it feels like to be left behind. Abandonment is a traumatic experience that can feel like dying, and in worse case situations lead to actual death. As social beings we need connection and community. As a city, our calling is to make sure no one is left behind. May this document and our work be a testament to our commitment to that vision.

We either move forward together, or perish alone.

In love,
Tyrone Hanley
GLAA President

GLAA POLICY PRIORITIES

Housing	Provide sufficient affordable housing units for all households earning less than 30% of the Area Median Income (AMI), such as, allocating vacant apartments to very low-income households, ensuring sufficient funds for the Housing Production Trust Fund are dedicated to these renters, and strengthening inclusionary zoning laws.	Pg 3
	Expand access to housing voucher programs by increasing the number available, as advocated for by The Way Home Campaign and LGBTQ+ Budget Coalition, and reforming program eligibility rules.	Pg 3
Workers' Rights	Support the full decriminalization of sex work for adults, including the selling and purchasing of sex and third-party involvement not involving fraud, violence, or coercion.	Pg 4
	Repeal the subminimum wage for tipped workers.	Pg 5
	Fund the Office of Human Rights (OHR) at a level that ensures the agency ends its case backlog, completes discrimination cases in a timely manner, and effectively engages in community education and outreach.	Pg 5
Health	Establish overdose prevention facilities to reduce deaths from drug overdoses.	Pg 6
	Remove the criminal penalties for drug possession for personal use and increase investments in health services.	Pg 6
Policing and Incarceration	Reduce D.C.'s total pre-COVID-19 incarcerated population by one-third to one-half by 2030.	Pg 7
	Ensure better oversight, transparency, and accountability in the process of investigating and improving D.C. jails, including establishing an independent oversight body, addressing issues impacting transgender individuals, repairing jails, and changing staff culture.	Pg 8
	Divest from the Metropolitan Police Department (MPD) to further invest in vital programs, including anti-poverty, violence prevention, crisis intervention, and reentry.	Pg 9

HOUSING

- **Provide sufficient affordable housing units for all households earning less than 30% of the Area Median Income (AMI), such as, allocating vacant apartments to very low-income households, ensuring sufficient funds for the Housing Production Trust Fund are dedicated to these renters, and strengthening inclusionary zoning laws.**

The District of Columbia ranks among the [most expensive cities to live](#) throughout the United States; among the states, D.C. [ranks first](#) in the rate of unhoused people per capita. This issue is especially magnified for members of the LGBTQ community who experience heightened rates of [poverty](#) and face unique issues in [accessing housing](#). Considering that D.C. is home to the [highest LGBTQ population](#) in the U.S., this unique intersection of issues requires attention. While the stock of high-end residential developments in D.C. explodes, the city is more than [20,000 units short](#) of the housing it needs for extremely low-income renters. Each year, the U.S. Department of Housing and Urban Development calculates the Area Median Income (AMI) of different regions, which is then used in places, such as D.C., to calculate income thresholds for affordable housing. Housing advocates call for D.C. to increase the number of affordable housing units for households earning 30% or less of AMI to address this alarming shortage. D.C.'s AMI for 2021 was [\\$129,000 for a family of four](#), which means that households earning less than 30% of that made less than \$38,700. Fortunately, implementing this policy change only requires the political will to do so given that the infrastructure is already in place. For example, [activists are calling for vacant apartments](#) in already existing buildings to be opened to low-income renters. Due to the high rates of residential development in D.C., thousands of units remain vacant; they just need to be made more affordable. By allocating vacant apartments to people earning less than 30% of the AMI, the shortage of housing can be addressed without having to build any new buildings. Other approaches can include strengthening inclusionary zoning laws and ensuring sufficient funds from the Housing Production Trust Fund are being dedicated to the 30% AMI renters.

- **Expand access to housing voucher programs by increasing the number available, as advocated for by The Way Home Campaign and LGBTQ+ Budget Coalition, and reforming program eligibility rules.**

Homelessness is a serious concern in the District. LGBTQ adults are disproportionately [more likely to experience homelessness](#). The rate is significantly higher among people between the ages of 18 and 24: LGBTQ people account for [29%](#) of those in this age group experiencing homelessness. The tenant voucher programs, administered by the DC Housing Authority (DCHA), seeks to address homelessness by providing vulnerable individuals access to affordable housing. Many barriers exist that make vouchers inaccessible to people who desperately need them. Currently, DCHA has issued emergency regulations to accept self-certification of an applicant's eligibility when obtaining verification documents is difficult and to eliminate barriers based on interaction with the criminal justice system or immigration status. But the agency's regulations and practices are still problematic and need to be reformed— for example, the agency will not allow applicants to self-certify identity (requiring a government identification card) and is requiring applicants to provide the verification documents at recertification. The DC Council

sought to address these barriers by funding an increase in tenant vouchers, instructing DCHA to allow applicants to self-certify their documentation, and to prevent discrimination against applicants for their immigration or criminal status.

The Washington Legal Clinic for the Homeless [recommended](#) changes to DCHA's current tenant voucher application in order for it to comply with the DC Council's instructions. The recommendation letter calls on the agency to explicitly allow self-certification by changing the Methods of Verification section in the DC Municipal Regulations (DCMR). Under this change, applicants would fill out a self-certification document, stating that they cannot easily obtain the requested verification forms. Regarding applicants with immigration and criminal history, the [recommendations](#) call for the removal of a section that allows DCHA to deny an applicant if any member of the household is "proven to have committed " specific offenses. Furthermore, the agency should comprehensively review its procedures and regulations that exclude applicants dealing with immigration concerns. Unfortunately, the emergency regulations, and the protocols put in place for compliance, do not meet all of these objectives.

In addition to improving the voucher process, the District must increase the number of vouchers available to single people and families. For the FY23 budget The Way Home Campaign is [supporting](#) Mayor Bowser's proposed number of permanent housing vouchers and the LGBTQ+ Budget Coalition is asking for [100 LGBTQ+ housing vouchers](#).

WORKERS' RIGHTS

- **Support the full decriminalization of sex work for adults, including the selling and purchasing of sex and third-party involvement not involving fraud, violence, or coercion.**

Currently, D.C. criminalizes prostitution as a misdemeanor and penalizes first offenders with up to 90 days in jail and a fine up to \$500. Those re-arrested are penalized with sentences up to two years in jail and a fine up to \$12,500. From 2019-2021, Black people were disproportionately arrested for prostitution-related offenses, according to data from the DC Sentencing Commission. In 2019, the DC Council held a hearing for the [Community Health and Safety Act](#), which would have removed penalties for sex workers and other consenting adults while continuing to outlaw human trafficking. The District must pass a similar bill to remove criminal penalties for consenting adult commercial sex. The [United Nations Human Rights Council](#), the [World Health Organization](#), [UNAIDS](#), [Amnesty International](#), and [Human Rights Watch](#) have stated that criminalizing adult consensual sex is incompatible with the human right to personal autonomy and privacy.

Criminalization of sex work harms sex workers by making them [targets of violence and stigma](#) from the community and the police. Enforcement of D.C.'s prostitution laws is [costly](#) for the District, [corrupts](#) the Metropolitan Police Department, and ultimately [degrades public safety](#) by diverting resources from needed social support to ineffective policing. These issues are [worse](#) for

Black and brown, indigenous, transgender, and immigrant sex workers, who live at the intersection of multiple marginalized identities. Decriminalization [allows](#) sex workers to better organize for their own safety and reduces violence and STI transmission.

It is crucial to decriminalize not simply the selling of sexual services, but the buying of sexual services and third-party support as well. Criminalizing the purchasing of services means the interaction remains policed. Sex workers also report the importance of being able to work with others for safety. In places which have criminalized the buying of sexual services and third-party involvement, sex workers report challenges doing essential screening of clients, placing sex workers in more [difficult and dangerous situations](#). This makes sex work more dangerous and makes sex workers more vulnerable to abuse than they would be under a model of full decriminalization.

- **Repeal the subminimum wage for tipped workers.**

Presently, the D.C. minimum wage is \$15.20, and the subminimum wage for tipped employees is \$5.05. In every state without a tipped minimum wage, including where the minimum wage is comparable to D.C., [rates of sexual harassment](#) (the highest of any industry) are halved, [average tips are the same or higher](#), and employers have fared the COVID epidemic better than states that maintain the subminimum wage. Repeal of the tipped minimum wage is supported by [President Biden](#) and D.C. residents. In 2018, D.C. voters approved a referendum to repeal the subminimum wage by a vote of 55% to 45%, but the DC Council [voted 8 to 5](#) to overturn it, and Mayor Bowser [signed it](#) into law. [A current ballot initiative](#) is underway to give D.C. another chance to vote on the issue. If passed, D.C. would become the 8th state to have a single minimum wage, [following](#) Alaska, California, Minnesota, Montana, Nevada, Oregon, and Washington.

- **Fund the Office of Human Rights (OHR) at a level that ensures the agency ends its case backlog, completes discrimination cases in a timely manner, and effectively engages in community education and outreach.**

D.C. has some of the strongest nondiscrimination protections in the country. However, the Office of Human Rights (OHR), which is the primary enforcer of the city's nondiscrimination laws, has struggled to enforce those laws in part due to inadequate funding. The agency's chronic understaffing prevents it from managing its caseload in an efficient and timely manner. Insufficient staff also inhibits OHR from fulfilling its increased responsibilities due to recently enacted laws. Following three years of advocacy from LGBTQ, civil rights, and legal organizations, the DC Council has significantly increased the agency's [budget](#) to address the case backlog by adding more staff positions for its investigations teams and to expand its community education and outreach. Despite this victory, OHR has thus far been [unable to hire for all of the budgeted positions](#) in part due to constraints caused by the government hiring process. The Mayor and Council must avoid cutting OHR positions, including those that still need to be filled, and ensure new laws requiring OHR implementation are adequately funded.

HEALTH

- **Establish overdose prevention facilities to reduce deaths from drug overdoses.**

The opioid crisis has devastated communities across the U.S.--in 2020, there were more than [93,000 overdose](#) deaths. D.C. is no exception to this crisis and the devastation here is particularly egregious among [Black and elderly populations](#). In recent years, as the global pandemic has increased individuals' isolation and daily stress, opioid-related deaths in D.C. surged to an all-time high in 2020 of roughly [411 deaths](#). In February 2018, the D.C. government released [Live. Long. DC.](#), a strategic plan to reduce opioid use, misuse, and deaths, representing the work of over 40 government and nongovernment stakeholders. The plan's goal was to halve opioid-related deaths in D.C. by 2020, using a variety of strategies, including increasing distribution of Naloxone, a life-saving medication that helps reverse opioid overdose, and increasing access to medication assisted treatment. One goal was for the government to "consider safe injection sites." According to a [progress report](#) from December 2019, the working group focused on this task delivered a report outlining viable options for such a facility to the directors of the departments of Health, Behavioral Health, and Human Services that month. Unfortunately, this goal was not mentioned again in any monthly progress report since. However, an [updated version](#) of the strategic plan, in August 2021, reiterated the goal of "explor[ing] the feasibility of supporting ... safe consumption sites." The failure of the D.C. government to advance on this goal is a missed opportunity to implement a crucial evidence-based practice.

Safe injection (or consumption) sites are also known as Overdose Prevention Centers (OPCs). OPCs provide space for people to use pre-obtained illegal substances under the supervision of trained medical professionals and with direct access to life-saving resources. These centers are crucial to protecting the lives and health of people who use drugs until they are able to seek treatment. OPCs also uniquely address the intense stigma that people who use drugs experience—a significant barrier to treatment.

There are currently [120 OPCs](#) operating in ten countries across the globe, including several European countries, Australia, and Canada. At the end of 2021, the first two centers in the U.S. opened in New York City, [preventing over 59 overdoses](#) in their first three weeks of operation. Over 100 evidence-based, peer-reviewed [studies](#) have consistently demonstrated the positive impacts of OPCs including: decreased rates of HIV and Hepatitis C, increased entry into substance abuse treatment programs, reduced costs for emergency medical services, and reduced overdose death rates.

Expert groups such as HIPS, the [Drug Policy Alliance](#), and the [Decrim Poverty DC Coalition](#) have long heralded harm-reduction as the best approach to the overdose crisis. Rather than penalize and alienate people who use drugs as criminals, [harm reduction techniques](#) choose approaches that prioritize their well-being. Legislators cannot afford to wait on these life-saving measures when the life and health of D.C. residents are at risk.

- **Remove the criminal penalties for drug possession for personal use and increase investments in health services.**

Despite drug use being the same across social groups, the poor and communities of color are disproportionately targeted by the criminal legal system for punishment for drug possession. Consequently, the criminalization is not about the punishment of drug use but punishing people of color and poor communities. Additionally, evidence demonstrates criminalization has done little to curb the prevalence of drugs in our communities and is not an effective way of getting people into treatment because it stigmatizes drug users.

D.C. needs a drug policy that makes the lives and health of residents the top priority. The removal of criminal penalties for the possession of drugs for personal use and stronger investments in health services are a proven and compassionate solution that [is supported by over 80% of D.C. residents](#), including over 70% of who reported they would be more likely to vote for candidates who embraced drug decriminalization. As the [DecrimPoverty DC Coalition](#) advocates, the decriminalization of drug possession can help reduce overdose deaths, increase community support for addressing addiction, and destigmatize drug users. The decriminalization of drug possession is rooted in the philosophy of harm reduction and community wellness that has been successfully implemented around the world since the 1970s. Recognizing the harms of criminalization, the DC Council [decriminalized](#) possession of drug paraphernalia for personal use in 2020.

In addition to decriminalizing drug possession, D.C. [must](#) make more investments in health services for people who use drugs. This should include harm reduction and overdose prevention centers, drug education and testing programs, and other supports for the well-being and safety of people who use drugs.

Roughly two dozen countries and several states have pursued drug decriminalization. For example, in 2001, Portuguese legislators [decriminalized low-level possession and consumption of all illicit drugs](#). Prior to 2001, drug-related deaths in Portugal were commensurate with the rates in other EU countries. Today, drug-related death rates in Portugal are some of the lowest in the EU. Portugal's HIV rates show similarly striking results. In 2001, Portugal had over 50% of the EU's new HIV diagnoses attributable to drug injection, yet by 2019 it had only 1.68% of the EU total. Initiatives to remove criminal penalties for drug possession, personal use, and paraphernalia are gaining traction in several states. Oregon residents voted to decriminalize drug possession in 2020, and Washington state [has proposed](#) a ballot initiative that would remove basic drug possession laws and direct \$150 million to treatment services. Drug decriminalization bills [are also pending](#) in other states.

POLICING AND INCARCERATION

- **Reduce D.C.'s total pre-COVID-19 incarcerated population by one-third to one-half by 2030.**

D.C. has [one of the highest incarceration rates](#) in the country. On average, pre-COVID, roughly 2,000 people were incarcerated on any given day in D.C. jails awaiting trial, or other case

dispositions, or serving sentences for misdemeanors. But about 12,000 people pass through the jails each year. Those convicted of felonies in D.C. are transferred to the Federal Bureau of Prisons. According to the [Prison Policy Initiative](#), there were about 6,000 D.C. residents incarcerated in federal prison in 2018.

The harms resulting from incarceration of thousands of our neighbors every year affect not only those behind bars. When people are locked up, they suffer negative effects to their [mental](#) and [physical health](#), while families and communities are disrupted. Being locked up not only destabilizes a person's housing, employment, education, public benefits and more, but makes reconnecting more difficult. Importantly, one negative consequence of incarceration is that recidivism becomes more likely, while the tough on crime approach does not meaningfully improve [public safety](#). LGBTQ people, particularly those who are transgender or gender non-conforming, face particular challenges [while behind bars](#): increased violence, isolation and harms to mental health, and discrimination.

The impact of incarceration lasts long after a person is released, including, for some, probation and parole. In 2018, [5,700](#) D.C. residents were on probation and [3,900](#) were on parole. Probation and parole violations, often technical, contribute significantly to our jail and prison populations. In 2019, the Court Services and Offender Supervision Agency reported [96,528 total](#) technical violations of parole, and [over 90% \(87,424\)](#) were drug related. [More than half](#) of those were for missing a test appointment, not for testing positive for an illegal substance.

The District Task Force on Jails & Justice recommends that the District reduce its incarcerated population by one-third to one-half by 2030 and outlines numerous steps to achieve this goal in its [2021 report](#). Divesting from incarceration as an approach to public safety would allow the District to focus more effort on the root causes of crime. The District should act on the Task Force's recommendations.

- **Ensure better oversight, transparency, and accountability in the process of investigating and improving D.C. jails, including establishing an independent oversight body, addressing issues impacting transgender individuals, repairing jails, and changing staff culture.**

Prior to June 2021, DOC placed transgender inmates by default based on their anatomy until a Transgender Housing Committee convened to determine their more permanent placement. In response to an [ACLU lawsuit](#), Department of Corrections (DOC) changed [policies](#) to state that the Department "shall house Transgender, Intersex, or Gender Nonconforming inmates in male or female units based on their preference, unless otherwise recommended by the Transgender Housing Committee and approved in accordance with this policy." In [a recent settlement](#), DOC also agreed to assign people to be housed based on their gender identity and limit the time they are held in solitary confinement, prior to receiving their housing assignment. Unfortunately, DOC continues to prohibit inmates from wearing wigs, exacerbating gender dysphoria. In 2014, [42%](#) of D.C. trans inmates reported being assaulted by inmates while in D.C. custody.

More broadly, following ongoing and recent complaints of conditions in DOC facilities, a [recent United States Marshals Service inspection](#) found people living in unsanitary conditions in the

D.C. jails, including toilets clogged with significant amounts of human waste. They also observed guards who inappropriately withheld food and water from individuals as punishment, as well as, other problems.

[An agreement](#) between DOC and the United States Marshals prohibits either agency from releasing a public statement or speaking to the media unless agreed upon by both parties. This provision only adds to the lack of transparency over issues in the D.C. jail system. In addition to addressing the U.S. Marshals agreement provision, the city must establish an independent body with the power to access the facility, without advance notice, and frequently issue public reports. The entity should include corrections experts, community members, formerly incarcerated people, their families, and advocates. Finally, the city must take effective action now to repair the D.C. jails, including changing staff culture.

- **Divest from the Metropolitan Police Department (MPD) to further invest in vital programs, including anti-poverty, violence prevention, crisis intervention, and reentry.**

In the wake of the increased visibility of police violence and over-policing of Black and brown people, the DC Council and Mayor have a responsibility to re-examine the use and funding of the police. The District over-invests in policing, while under-investing in vital programs, including anti-poverty, violence prevention, crisis intervention, and reentry. By not adequately funding non-law enforcement solutions to social issues, D.C. residents - disproportionately those who are Black - end up in jail instead of receiving support, services, and treatment in the community.

While the DC Council [cut a portion](#) of the Metropolitan Police Department's (MPD) local budget in fiscal year 2021, the reduction was just 1.7% of MPD's total operating budget. This action hardly responds to the call to divest from the police. Mayor Bowser is currently calling for increasing MPD's budget to add more police officers. To meaningfully support District residents, address the systemic causes and effects of crime, and reimagine comprehensive public safety, investments must be made directly in the community itself. Defund MPD, a Black-led multi-racial coalition, [recommends](#) that the District cut MPD's budget to help better fund community programs and services, such as anti-poverty programs and homeless and harm reduction initiatives. Other organizations have also proposed ways for the District to invest in the community, including the [LGBTQ+ Budget Coalition](#) and [Fair Budget Coalition](#).