

2026 GLAA Questionnaire

The following questions are based on [Back to Basics: GLAA Policy Brief 2026](#). If you have questions about the issues raised in the questionnaire, please seek the brief for guidance and clarification.

Please give more than a simple "yes" or "no" response to our questions — though you should begin with a "yes" or "no." The depth and completeness of your answers play a major role in determining your final rating.

Your record is part of your rating. Please list any actions that you have taken that may help illustrate your record on behalf of LGBTQ people—particularly actions that relate to the topics in recent GLAA policy briefs. Feel free to link relevant documents such as letters to the editor, legislative testimony, campaign literature, etc. Assume that GLAA is unfamiliar with your record.

1. Fight for Home Rule. To protect DC's LGBTQ+ communities, will you oppose every single effort to infringe on DC's autonomy?

Yes. I have spent six years as DC's elected U.S. Shadow Representative fighting for statehood and home rule including lobbying Congress directly, traveling the country to organize coalitions, and taking more than 250 meetings to advance DC's case for full self-government. In 2024, 267,661 DC voters returned me to that office with over 90 percent of the vote. That mandate was built on this fight.

Every protection DC's LGBTQ+ residents depend on like marriage equality, gender-affirming healthcare, nondiscrimination in housing and employment, reproductive autonomy — exists because the DC Council passed it. And every one of those protections can be erased by a single congressional vote as long as DC lacks statehood. That is not a hypothetical. Congress has already blocked needle exchange programs, restricted abortion funding, and overridden voter-approved initiatives. The same mechanism that stripped those protections can strip LGBTQ+ rights tomorrow. Home rule is not a procedural issue, it is a survival issue for LGBTQ+ DC residents.

I will oppose every effort to infringe on DC's autonomy such as appropriations riders, congressional resolutions, executive overreach. On the Council I will defend voter-approved initiatives, decouple DC policy from harmful federal actions, and use every available platform to advance statehood. Without it, no local protection is safe.

2. Stop Enabling Federal Overreach. Will you refuse to cooperate with the Federal Government in its undemocratic use of power, including the authoritarian deployment of National Guard troops?

Yes. As DC's Shadow Representative I have been one of the loudest voices against federal overreach in the District. During the 2020 protests I watched federal agents deploy against DC residents on DC streets — without the consent of DC's elected government, without accountability to DC voters. I spoke out then and I have never stopped.

The authoritarian deployment of National Guard troops in DC is not law enforcement. It is suppression. DC residents did not ask for it. DC's elected officials did not authorize it. And it falls hardest on the communities — LGBTQ+ residents, immigrants, and people of color — already most vulnerable to state violence. When armed federal forces patrol our streets without democratic oversight, no one is safe. That is especially true for transgender residents and LGBTQ+ people of color who face compounded risk in every encounter with law enforcement.

On the Council I will push for legislation requiring DC to publicly oppose and refuse logistical cooperation with any unauthorized federal military deployment. I will fight to ensure no DC agency — MPD, HSEMA, OUC, or any other — provides intelligence, staging, or coordination support to federal military operations targeting DC residents. And I will continue building the national coalitions demanding that Congress end its undemocratic authority over the District. The deployment of troops against the people of DC is the clearest argument for statehood. I will make that case everywhere it needs to be heard.

3. Invest In a Just Legal System. To support LGBTQ+ people involved in the legal system, do you support limiting pre-trial detention at a minimum to the evidence-based laws in place before 2023 and investing more resources into civil legal help?

Yes. I oppose the expansion of pretrial detention and support returning at minimum to the evidence-based legal framework in place before the 2023 changes. Expanding pretrial detention does not make communities safer. It destabilizes families, costs the District money it should be spending on prevention, and disproportionately harms Black, Latino, and LGBTQ+ residents who already face bias in the legal system. For transgender people in particular, pretrial detention is not just destabilizing it can be life-threatening. Placement in facilities that do not respect gender identity, denial of hormone therapy, and exposure to violence make detention uniquely dangerous for transgender DC residents.

I know what it looks like when the legal system works against people instead of for them. After my own home in Congress Heights was shot into, I spent time with the young men who gathered outside. They told me the same thing – they wanted to work but could not get jobs because of their records and did not know how to navigate the systems that could help them. I did not call for longer sentences. I launched quarterly expungement clinics that have served more than 600 DC residents and helped inspire the District's expanded investment in record

sealing.

I will fight for full funding of the right to counsel in eviction proceedings and expanded civil legal aid, particularly for LGBTQ+ residents facing housing discrimination, family law disputes, employment retaliation, immigration proceedings, and name and gender marker correction. I will oppose any new crimes or longer sentences that do not demonstrably improve public safety. The safest communities are the ones with the most resources, not the most incarceration.

4. Safe and Warm Homes. In light of disproportionate representation of LGBTQ+ among people without stable housing, do you support strengthening and enforcing the existing laws and investing the District's resources to end homelessness in DC?

Yes. Housing is a human right. LGBTQ+ youth and seniors are disproportionately represented among DC residents experiencing homelessness and LGBTQ+ youth aging out of foster care face some of the highest housing instability rates in the District. The current approach, underfunding proven programs while allowing landlords and developers to extract public resources without public accountability, is a policy choice that falls hardest on the people with the least power to absorb it.

As an ANC Commissioner in Ward 8, I saw TOPA save people's homes. I worked directly with a group of seniors whose building was being targeted by a slumlord. Using their TOPA rights, we slowed the sale, organized tenants, and brought public attention to what was happening. I authored an ANC letter of support that helped kickstart a broader coalition, which ultimately led then-Attorney General Karl Racine to remove Sanford Capital from the deal and replace it with a nonprofit housing provider. Those seniors stayed housed because TOPA gave them leverage. Without it, they would likely have been displaced or homeless.

I will fully restore and fund ERAP, cut from \$63 million in FY24 to \$8.6 million in FY26 — a devastating reduction that pushes vulnerable residents, including LGBTQ+ seniors and youth, toward homelessness. I will restore TOPA rights for 2–4 unit buildings, cap rent increases at CPI, expand social housing and community land trusts, and fund right to counsel in eviction cases. I will fully fund permanent supportive housing, bridge housing, and the Local Rent Supplement Program. I will oppose encampment sweeps and the criminalization of homelessness. Housing First is not a slogan, it is the only approach that works, and I will govern like I believe it.

5. Abundant and Nutritious Food. Do you support increasing the nutrition assistance program benefits to fill the gap created by the federal government?

Yes. As a pharmacist I have seen what happens when patients cannot afford to eat well — chronic conditions worsen, medications become less effective, and emergency rooms become the primary care provider for people whose real prescription is a grocery store within walking

distance. Food access is a health issue. For people living with HIV, proper nutrition is not optional, it is part of the treatment protocol. When federal nutrition assistance falls short, it is not just hunger. It is compromised health outcomes for some of DC's most vulnerable residents.

Wards 7 and 8, the neighborhoods I call home, have the fewest grocery stores, the highest rates of food insecurity, and the least access to fresh, nutritious food in the District. That is a policy failure, not a market outcome. LGBTQ+ residents facing poverty, housing instability, or immigration barriers are among those hardest hit when federal benefits disappear.

I will support increasing DC-funded nutrition assistance to fill the gap left by federal cuts and fight to protect local programs serving residents regardless of immigration status, including ITIN filers. I will push for grocery incentive programs in food deserts, support community gardens and urban agriculture, and invest in the DC Food Policy Council. Public dollars require public standards — and that includes making sure every resident can access the food they need to be healthy.

6. Power to the People. Do you commit to providing economic relief to DC's LGBTQ+ residents and businesses by investing in energy and water infrastructure that prioritizes the people of DC over corporate profits?

Yes. Residents should never lose power or water because they cannot afford a bill, and no corporation should be extracting profit from a public necessity while DC families sit in the dark. As a pharmacist I have seen what utility shutoffs actually look like in practice – insulin spoiled because the refrigerator went off, refrigerated medications interrupted, patients showing up in crisis because a disconnection notice broke their care chain. Utility shutoffs are a health emergency. They are a housing stability emergency. And they fall hardest on LGBTQ+ seniors, people living with HIV, and low-income households who can least afford the consequences.

I will fight for a permanent ban on utility shutoffs for inability to pay and push for utility debt relief programs that prevent disconnection from becoming a pathway to housing loss. I support the Healthy Homes Act, which provides electric appliances at no cost to low-income residents, reducing energy costs while moving DC away from fossil fuels. I oppose new fossil fuel furnaces and water heaters and support the Clean Heat Standard.

DC's infrastructure, water and energy alike, must serve people, not shareholders. I have been working with We Power DC to push for a public utility because when a private monopoly is the only option, DC residents deserve to know if public ownership would deliver better service at lower cost. I will push for accelerated lead pipe replacement, protect the Sustainable Energy Trust Fund and the Anacostia River Cleanup Fund from budget raids, and vote against any weakening of DC's building energy performance standards.

7. Health Care is Human Right. Will you use every tool within your power to ensure transgender youth and adults have access to healthcare in DC? Yes. Healthcare is a human right, and that includes gender-affirming care for transgender youth and adults. There is no exception, no qualification, and no political calculation that changes that.

As a pharmacist I have filled prescriptions for patients whose lives depend on the medications they receive — including hormone therapy. I have seen what happens when coverage is pulled, when a patient loses access to a provider, when bureaucracy becomes a barrier between a person and the care they need. It is not abstract to me. I have watched patients ration, delay, and go without. That is not a healthcare system. That is a system that has decided some lives matter less.

DC should not just be a sanctuary from Trump's attacks on transgender healthcare, it should be a model for what affirming, accessible, publicly funded care looks like. That requires statehood, because without it Congress can override any local protection the Council passes. And it requires governing like we mean it.

I will fight to restore and permanently fund DC Medicaid and the Healthcare Alliance so no transgender resident loses coverage. I will raise Medicaid reimbursement rates so providers can afford to serve patients seeking gender-affirming care. I will use Council oversight to hold DC agencies accountable for delivering inclusive, affirming care in every ward. Every patient deserves a pharmacist, a doctor, and a government that sees them fully.

8. Health Care is a Smart Investment. Do you commit to opposing cuts to the Health Care Alliance and Medicaid health insurance programs to balance DC's budget?

DC has already cut 25,000 residents from Medicaid and the Healthcare Alliance. Those are not budget line items, they are our neighbors, our family members, our community. They are disproportionately Black, Latino, immigrant, LGBTQ+, and low-income. They are transgender residents who depend on ongoing hormone therapy. They are people living with HIV who depend on uninterrupted antiretroviral treatment. They are seniors managing multiple conditions on fixed incomes. When coverage disappears for these residents, the District does not save money. It shifts the cost onto emergency rooms, onto families, onto communities, and onto the bodies of the people least able to absorb it.

I have seen what this looks like from behind a pharmacy counter. The patient who stops refilling. The one who splits doses to make them last. The one who stops coming in at all. That silence is not a budget solution. It is a policy failure with a human face.

Budgets are moral documents. I will oppose any local budget that balances itself on the backs of healthcare recipients. I will fully restore and permanently fund DC Medicaid and the Healthcare Alliance. I will end spread pricing, take on pharmacy benefit managers who inflate drug costs while pocketing the difference, and raise Medicaid reimbursement rates so providers can actually

afford to see the patients who need them most because coverage that no provider accepts is not coverage at all.

9. Access to Public Benefits. Do you commit to creating the most accessible system for program beneficiaries possible to minimize LGBTQ+ people not being able to access benefits due to bureaucracy?

Yes. A right that exists on paper but cannot be accessed in practice is not a right, it is a promise the government made and did not keep.

As Shadow Representative I answered more than 1,000 calls from DC residents trying to navigate government systems. What I heard most often was not that programs did not exist — it was that people could not get through the door. For LGBTQ+ residents the barriers are compounded: systems that do not recognize chosen names or accurate gender markers, intake workers not trained in cultural competency, documentation requirements that punish immigrants and undocumented residents for existing. A transgender resident who cannot get a caseworker to use their correct name is not going to keep coming back. That is not a personal failure. That is a system designed, whether intentionally or not, to turn people away.

I will push for streamlined enrollment systems that allow residents to apply for multiple benefits through a single portal. I will fight for expanded office hours, multilingual access, and community-based enrollment assistance in every ward. I will require DC agencies to accept chosen names and accurate gender markers across all benefit programs. And I will use Council oversight to require public reporting on application processing times, denial rates, and demographic breakdowns — because you cannot fix what you refuse to measure.

10. Fight Crime At The Source. Do you support decriminalizing sex work and making better investments in violence prevention activities?

I support both. Criminalization does not reduce sex work. It pushes it underground, making it more dangerous for the workers involved — disproportionately LGBTQ+ people, transgender women, immigrants, and people of color. It creates barriers to housing, employment, and healthcare. It makes workers less likely to report violence or trafficking because contact with the legal system means risking arrest. As a Councilmember I will support decriminalization legislation, oppose the use of DC resources to prosecute consensual adult sex work, and direct DC agencies to deprioritize enforcement that puts workers at risk rather than protecting them.

The same logic applies to violence prevention broadly. Criminalization is not safety — it is the appearance of safety that costs communities trust, resources, and lives. After my home in Congress Heights was shot into, I did not call for longer sentences. I asked why young men were gathering outside with nowhere to go. The answer led me to launch quarterly expungement

clinics that have now served more than 600 DC residents. That is the model: listen first, invest in people, treat the root cause.

I will fully fund violence interruption programs across every ward where gun violence concentrates. I will invest in non-police crisis response for mental health emergencies, expand youth employment and late-night safe spaces, and oppose youth curfews that criminalize young people instead of investing in them. One additional year of schooling reduces violent crime by more than 11 percent. Crime is a symptom. I will treat the system.

*Please return your questionnaire responses in PDF format **by 11:59pm ET on Friday, April 24 to equal@glaa.org.***