The Lavander Scare: Discrimination and Inequality Towards the LGBTQIA+ Community in the Past and Present U.S.

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**ABSTRACT**

This paper focuses on the ongoing challenges faced by the LGBTQIA+ community in the United States in accessing equitable treatment and opportunities in multiple sectors. A starting point for understanding the issue is going to be an analysis of the Lavender Scare, the U.S. government's systematic persecution of suspected homosexuals during the Cold War. Considering that historical precedent, the research navigates how discrimination and inequality towards LGBTQIA+ individuals persist today: In the employment sector, sexual discrimination is pervasive in the hiring process, career advancement, and working conditions, leading to disparities in salary and economic marginalization. Regarding education, American students who identify as LGBTQIA+ are often victims of harassment at school, which has a detrimental impact on their social lives and academic performance. In healthcare, disparities arise in the availability of high-quality care, the treatment healthcare professionals reserve for LGBTQIA+ individuals, and the consequent lack of policies that fully protect the community. Inequality also has a significant effect on mental health outcomes, with higher rates of anxiety, depression, and suicide risk among LGBTQIA+ individuals. The study is supported by a thirty-year literature review of governmental reports and academic studies from 1993 to 2022 and it seeks to analyse inequality from a horizontal point of view, that is between groups within a region with different identities. This paper also aims to promote awareness of the status of LGBTQIA+ rights in the United States and hopes to highlight the urgent need for more efficient anti-discrimination policies and holistic LGBTQIA+ inclusive practices.

1. Introduction

Lesbian, gay, bisexual, transgender, and queer or questioning are expressions used to characterise one person's sexual orientation or gender identity and they are all together referred to as the LGBTQIA+ community (Parent, DeBlaere and Moradi, 2013). LGBTQIA+ people have long faced discrimination in the areas of education, employment, and healthcare as well as hatred from the public, socio-cultural norms, and legal persecution. Inequalities for gay and
transgender people were reduced in the twentieth century because of the rise of organised advocacy for civil rights. Yet, LGBTQIA+ communities around the world still experience discrimination, especially in the United States, where the homosexual and trans fight for rights has begun (Singh and Durso, 2017).

The idea of composing this paper was conceived during my exchange period at the University of Bath when I had the opportunity to attend a class on Global Inequality. At the end of the course, it was required to write an essay on a type of inequality of our choice. This is how the first draft of this work was edited. My decision to explore the LGBTQIA+ community and its struggles came when I read a few extracts of Duberman’s book “Stonewall”. The Stonewall riots became a key episode in the history of the LGBT rights movement, and they occurred in June 1969 when the New York City police raided the Stonewall Inn, a well-known gay bar in Greenwich Village. Responding to the harshness of the police, spectators reacted violently, and the LGBTQIA+ community called for action and affirmed homosexual pride as the rioting continued for days (Duberman, 1993). That is why I have chosen to deepen my knowledge in this field and understand how the situation for LGBTQIA+ people has changed (or not) during the last decades. In particular, the report is going to cover three major areas that I believe are fundamentals in the existence of a human being and in which the discrimination towards the LGBTQIA+ community is still effective:

1) Employment: the gay wage gap and the rate of unemployment, considering also the impact of the Covid-19 pandemic among the LGBTQIA+ community;
2) Education: the effects of inequality on education and the performance of LGBTQIA+ children and young adults;
3) Healthcare and Mental Health: the unequal possibilities to access healthcare and the treatment of mental illness affect LGBTQIA+ people's capabilities to cure their illnesses and to live a dignified life.

While studying this case, it is not always simple to exhaustively track gay and trans people's experiences because of the scarcity of high-quality data on the subject since, for a long time, the community has been excluded from the collection of disaggregated federal data (Hasenbush et al., 2021).

For this reason, the following paper was written considering governmental reports, academic studies and censuses edited between 1993 and 2022. These documents were found on federal agencies' websites like the Centers for Disease Control and Prevention, or through international organisations’ data, such as those collected by the Organization for Economic Co-operation and Development (OECD). The academic literature review was based on articles and essays written mainly by American and English professors.

In conclusion, academicals should extensively study this issue to promote action from the authorities, with utter worry. Anti-LGBTQIA+ bias and intolerance are highly affecting gay and trans people's rights, especially in the regions of the Midwest and Southern States, with dire outcomes on their social lives and consequentially, their mental health, increasing anxiety, depressive symptoms, and suicidal rates (Gruberg, Mahowald and Halpin, 2020).

1.1. History of the Issue

While homosexuality gradually came to be acknowledged and decriminalised throughout the nineteenth century in Europe, since 1814 the U.S. penal code has continued to refer to it as a "crime against nature" (Miller, 1995). However, it was in the twentieth century that people who identified as homosexual or transgender started protesting for recognition and equal rights.
The June 1969 raid on the popular homosexual bar in Greenwich Village, Stonewall Inn, by the New York City police, is considered a pivotal moment in the history of the LGBT rights movement. The crowd erupted violently in protest of the police's brutality, and as the riots carried on for days, the LGBTQIA+ community demanded action from the government. This act of civil disobedience is often cited as the beginning of the contemporary gay liberation movements, such as the Gay Liberation Front (Duberman, 1993).

The second half of the twentieth century was marked by profound social tensions in the United States, as regards the civil rights of homosexuals. In the years of the Cold War, the so-called "Lavender Scare" started to spread and it resembled the anti-communist "Red Scare" campaign to debunk the perceived Soviet threat inside the U.S.. The Lavender Scare consisted of the systematic fear of hiring homosexual people in the workplace because they were perceived as psychologically more fragile and therefore more easily circumvented by potential Soviet spies (Johnson, 2004).

The LGBT history is also linked irreversibly with the spurge of HIV in the 1980s, as they became the most affected group by the virus in the United States. In the first years of the epidemic, American doctors associated HIV/AIDS mostly with homosexual, bisexual and transgender individuals, as a consequence the condition was first known as "gay-related immune deficiency" (GRID). Before it was realised that the virus could not be communicated through physical contact, gay, bisexual, and transgender people regularly faced stigma and marginalisation, which had major negative effects on their career and personal lives (Center for Disease Control, 2010).

Fortunately, after years of struggle and protest, the LGBTQIA+ community received full civil rights in 2003, when sodomy was decriminalised by the U.S. Supreme Court in the Lawrence v. Texas case. Despite this success, discrimination against LGBTQIA+ people is still legal in 29 states, leading to LGBT people enduring discrimination in their everyday lives. Although other legislation of a similar nature has been suggested since the 1970s, the 117th Congress proposed again a draft for an Equality Act in 2021. The bill aims to outlaw discrimination based on sex, sexual orientation, gender identity, and intersex status in public spaces, educational institutions, employment, and housing (Steinmetz, 2019).

For what concerns more specifically transgender rights, there has been a turning point in 2020, when the Supreme Court of the United States set a landmark in the 2020 R.G. & G.R. Harris Funeral Homes Inc. v. Equal Employment Opportunity Commission case. On that occasion, the Court decided that Title VII protects transgender employees against sex discrimination in employment and workplaces and set the agenda for further recognition of rights for trans people (Flynn, 2020).

2. Materials and Methods

The paper will analyse inequality from a horizontal point of view, considering homosexual and transsexual groups and the range of capabilities they experience in their everyday life. Horizontal inequalities are differences between groups that have a common cultural background, for example, race or ethnicity, faiths or religious practices, or again sexual orientation and gender (Stewart, 2009). During the report, we will attempt to understand how the discrimination experienced by LGBT people spreads from one sector of their life to another, following the pattern of the capacity inequality trap. This latter position conceptualises inequalities as the outcome of different opportunities that a society reserves for a particular group of people and it has been acclaimed by many well-known scholars, for instance, John Rawls and Amartya Sen (Stewart, 2009, Ferreira and Walt on, 2005).
Once I decided that the object of my work would have been the inequality in the U.S. towards the LGBTQIA+ community a vertical approach was immediately rejected, as it is utilised for determining inequalities among individuals and not groups. It is also interesting to mention another component that can be used in the study of inequalities which is intersectionality. Unfortunately, due to a lack of data, a general analysis of the problems of gay and transgender people had to be carried out, but it would have been fascinating to examine increasingly specific realities within the American LGBTQIA+ community itself, for example, the condition of black lesbian women.

After the focus of the study, it was essential to understand the research question. As previously stated, the research question is defining how inequality affects the lives of LGBTQIA+ people in three major sectors of human life, that are: employment, education, and health. I considered this question to be manageable since the first draft of the paper was aimed at the evaluation at the end of my Global Inequality course and my professor, Dr. Aidan Barlow, had asked us to analyse the chosen inequality under three or four fundamental aspects. I also decided to emphasise in the introduction the history of the LGBTQIA+ community, as the description of the Lavender Scare period made by Duberman in “Stonewall” interested me a lot. And this is where the mention of this historical period in my title comes from.

There is still little data on U.S. federal records regarding employment, education, and healthcare in the LGBTQIA+ community, so the research was not easy. As my initial assignment required a minimum of ten sources, I confronted about thirty documents and references before opting for those that I believed were more suitable. I deemed it more suitable to rely on authoritative sources such as databases of the U.S. government or international organizations (e.g. OECD). For the academic literature, I have chosen articles from American and English professors with proven experience, making sure to first analyse the content of the abstracts of their works carefully, to comprehend if they were the sources I needed. At the same time, I tried to understand what their research question was, and, in many cases, it happened to be very close to mine. It was also vital to understand the methodology and the sources they used, from which I drew a lot of knowledge. A year after the academic evaluation of my course, I wanted to test my abilities in writing and public speaking, by submitting my object of study to the International Conference on Gender Studies and Sexuality. The article was obviously expanded, following the same methodology for researching sources used a year earlier for my academic evaluation.

3. Results

3.1. The Gay Wage Gap and Unemployment, with a Focus on the COVID-19 Economic Crisis

The terms “gay wage gap” or “sexuality pay gap” are applied to describe the earnings difference between homosexuals and heterosexuals. According to studies, gay men with the same background as formation, job, marital status, and place of residence earn less than their heterosexual counterparts (Badget, 1995). On the contrary, lesbians are paid more than heterosexual women, the so-called “lesbian wage premium”. (Antecol and Steinberger, 2009).

In 2011, the Williams Institute issued a report, which denounced that 42% of homosexual people had been discriminated against because of their sexuality, and 16% of them had therefore lost their job. With regards to transgender people, the percentage is even worse reporting 78% of transgender people facing harassment and unfair behaviours. Economic inequality is frequently linked to discrimination, and it influences several employment-related areas, such as productivity, job satisfaction, earned pay, and job opportunities, but also the
capability to pay for health insurance, mortgages, and other necessary services (Sears and Mallory, 2011).

Another study in 2015, developed by the U.S. Transgender Survey, found that transgender people frequently earn less money, experience more harassment, and are more likely to be unemployed (James, et al., 2016). Considering unemployment, in 2020 the U.S. Census Bureau decided to include sexual orientation and gender identity (SOGI) people in the Household Pulse Survey, to comprehend how the Covid pandemic and the consequent economic regression affected American households. The survey revealed that LGBTQIA+ workers were more affected by the economic crisis than non-LGBTQIA+ interviewed, as 28% of LGBTQIA+ respondents reported job loss and unemployment during the same period, compared to only 18% of the non-LGBTQIA+ respondents (see Figure 1).

![Figure 1](image1.png)

*Figure 1. LGBTQIA+ workers in the U.S. experience higher rates of job losses than non-LGBTQIA+ workers between July 2021-May 2022
Source: U.S. Census Bureau, 2023*

Homelessness is another topic that can be covered when talking about LGBTQIA+ inequalities. In the Generations Study and the U.S. Transgender Population Health Survey, conducted between 2016 and 2019, found that 17% of homosexual adults experienced homelessness sometime in their past and 8% of transgender people just in the past year (see Figure 2) (Wilson et al., 2020).

![Figure 2](image2.png)

*Figure 2. Recent experiences with homelessness among cis and genderqueer sexual minorities
Source: The Williams Institute*
3.2. The Effects of Inequality on Education

There are not any specific obstacles that LGBTQIA+ persons must overcome to enter education in the United States. However, it has been noted that homophobia is still a problem that children and adolescents must deal with today. Sometimes students are not the objects of harassment because they are gay or transgender or because they are falsely accused of being so, but rather because they are the offspring of one or both gay or trans parents (Bos et al., 2021). It is especially in public schools that both LGBTQIA+ students and teachers experience the most discrimination and unfair treatment. In some dire scenarios, the pressure of such situations can lead extremely young victims to unhealthy coping mechanisms or even commit suicide (Adelman and Lugg, 2012).

What is apparent is that persistent prejudice and a hostile environment contributed to a rise in dropout rates, with nearly one-third of LGBTQIA+ teenagers quitting school prematurely. Additionally, a survey showed that victimised LGBTQIA+ students had poorer overall GPAs than their peers who experienced no victimisation (Kosciw et al., 2014).

School policies reinforce mostly heteronormativity in covert and overt ways, which causes discomfort about the idea of homosexuality and sexuality in general. Two instances are the persistent use of pronouns that were not selected by the person or the usage of “dead names” for transgender people. Even the subjects addressed in the school curriculum exclude LGBTQIA+ history and identity from education. Thanks to the gay-straight alliances, a group of student organisations for middle schools, high schools, and universities, the State of California, succeeded in proposing the FAIR Education Act, for the institutionalised teaching of LGBTQIA+ history in public schools. As proved by Figure 3, an achievement like this can improve the quality of LGBTQIA+ students’ lives and their motivation to continue their studies (Schwartz, 2019).

![Figure 3. Students who learn about LGBTQIA+ issues in the curriculum report less harassment](Source: Casafeschools.org)

Other cases of heteronormativity that have been imposed on the LGBTQIA+ community concern all the practices necessary for fostering fruitful interpersonal relationships: school balls and athletic activities. The prom mandates the presence of same-sex student couples, forbids gender-nonconforming attire, and contemplates the election of a female event queen and a male event king. Athletes not being given the roles they deserve to play because of their sexuality has also been reported frequently in school sports (Adelman and Lugg, 2012).
3.3. Access to Healthcare and Treatment for Mental Illnesses

Inequality in the healthcare sector can occur both because of economic reasons (e.g., incapability to pay for health insurance) and/or discrimination portrayed by hospital and medical staff. In 2014, LGBTQIA+ adults were still more prone to be uninsured than non-LGBT people, even though the proportion had reduced due to the Affordable Care Act (Gates, 2014). Nearly ten years later, in 2021–2022, there is again a difference between LGBTQIA+ and non–LGBTQIA+ people, with 12.7% of LGBTQIA+ individuals without medical insurance compared to 11.4% of non–LGBTQIA+ adults (see Figure 5) (Kopparam, 2022).

![Figure 4](image4.png)

**Figure 4.** Percentage of uninsured LGBTQIA+ people in the U.S.
*Sources: Gallup-Healthways WellBeing Index, 2014*

![Figure 5](image5.png)

**Figure 5.** American LGBTQIA+ people have the lowest rate of health insurance
*Sources: The U.S. Census Bureau, 2023*

As aforesaid, homosexual people are particularly fragile individuals in the U.S., as the most affected group by HIV/AIDS, and transgender people as well require special attention, since their physical condition before and after the gender transition must be monitored constantly. Thus, the Centre for American Progress (CAP) surveyed in 2017, interviewing 1,864 people between self-identified LGBTQIA+ (n= 857) and heterosexuals (n= 1,007). Unsurprisingly, data showed that discrimination was highest for LGBTQIA+ people with 6% of them having experienced a healthcare provider refusing to give them healthcare related to their actual or perceived sexual orientation and another 12% saying a doctor refused to offer them gender-transition-related medical care (Mirza and Rooney, 2018).

Additionally, it is critical to address the issue with utter worry as the disparity in the treatment of self-identified LGBTQIA+ individuals and their heterosexual cisgender counterparts is also affecting gay and trans people's mental health, resulting in an increase of low self-esteem, anxiety, and depressive symptoms (Folch, 2022). According to the National Alliance on Mental
Illness (NAMI), transgender people are nearly four times as likely to experience mental health disorders than cisgender people while homosexual people are twice as likely. Indeed, according to Mental Health America (MHA), eating disorders are the most common mental illness among LGBTQIA+ people, as shown in Figure 6 (Mental Health America, 2019).

![Figure 6. Eating disorders screeners identified as LGBTQIA+ individuals](Source: Mental Health America, 2019)

4. Discussion

In this study, we covered various categories in which the LGBTQIA+ community in the United States is living in a condition of inequality. It is interesting to observe that discrimination against the LGBTQIA+ community frequently has a detrimental impact on a nation's economic growth, as the inclusion of marginalised groups can promote shared prosperity and economic progress, according to an increasing number of economists and policy officials around the world in the last decade (OECD, 2015). Nevertheless, some policies to address the issue in the field of employment could be developing mandatory LGBTQIA+ sensitivity training programs for employers and employees and allocating resources to support small and medium-sized belonging to LGBTQIA+ people (Benjamin and Reygan, 2016; NGLCC, 2024).

Regarding education, it is essential to implement comprehensive safe school policies, ensuring severe punishment for violators. The 2021 GLSEN National School Climate Survey also highlights how LGBTQIA+ teens want to be more represented in their schools’ curricula: hence, incorporating LGBTQIA+ history and contributions could be an excellent way to promote awareness and to make them feel safer and more recognised. However, this is not enough, it is important also to support LGBTQIA+ student associations via public funding and training programs for the teachers, to make them more responsive to the problems of these students (GLSEN, 2021).

Another important subject is the access to private healthcare, which governments have debated harshly during the last two decades. Increasing importance has been given to the issue of health, probably also due to the Covid 19 pandemic, which surprised healthcare systems all over the world, often highlighting their critical issues. According to a study published in the Lancet, if the United States adopted a universal over $450 billion could be cut off public expenditures on an annual basis, allowing more people to get access to health services and probably saving thousands of people (Galvani et al., 2020). Specifically concerning the LGBTQIA+ community, it should be enforced regulations that prohibit discrimination, through effective complaint mechanisms, training healthcare providers to enhance cultural competency in serving LGBTQIA+ patients (especially transgender people) and improving data collection.
methods to capture sexual orientation and gender identity data in healthcare settings (Bass and Nagy, 2023).

Lastly, as mentioned before, it could be interesting to further analyse the issue in a paper that takes into account intersectionality, to explore how race, ethnicity and socioeconomic status can shape discrimination towards the community. We should always remember that the fight against LGBTQIA+ discrimination is a collective commitment that requires joint advocacy across academic, legal, political, and social spheres. Through an interdisciplinary approach in academic research and meaningful action at the political level, we can strive towards a future where every human being, regardless of sexual orientation or gender identity, has equal rights, opportunities, and respect.

References


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