



**Fairhaven Board of Selectmen
Meeting Minutes
June 7, 2021**

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FAIRHAVEN,
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Present: Chairman Daniel Freitas, Vice-Chairman Robert Espindola, Selectman Keith Silvia, Town Interim Administrator Wendy Graves and Videographer Nick Doyle

Present via Zoom: Administrative Assistant Vicki Oliveira and Production Coordinator Erick Sa.

The meeting was videotaped on Cable Access and Zoom meeting application.

Chairman Freitas opened the meeting at 6:30 pm in the Town Hall Banquet Room.

Town administrator's report

Ms. Graves told the Board she has been busy finalizing all Town Meeting materials before Saturday's meeting.

Committee liaison reports

Mr. Silvia said Historical Commission Chairman Wayne Oliveira will be filming a video to support Article 23 for the academy front entrance project.

Mr. Silvia said Town Planner Paul Foley will be doing a presentation of the status of the Dog Park committee at a future Board of selectmen's meeting.

Mr. Silvia said the Council on Aging will be hosting anyone who would like technical assistance in person for Town Meeting. This will be on a first come first serve basis.

Mr. Espindola said the Broadband Study Committee will be presenting a video for the annual town meeting on Article 34.

Boys Creek saltmarsh parcels

Allen Decker from the Buzzards Bay Coalition was in attendance to meet with the Board regarding the Boys Creek saltmarsh parcels. Mr. Decker reminded the Board this process was started at the special town meeting on October 20, 2020. The Buzzards Bay Coalition acquired the 5.75 acres from Eversource and this land will be used for conservation land to increase the north side of Fort Phoenix.

Mr. Espindola made a motion to approve the gift of Boys Creek - Saltmarsh parcels. Mr. Silvia seconded. Vote was unanimous (3-0)

Request to fly the Pride Flag

Kyle Bueno met with the Board with a request flying the Pride Flag over the archway of Town Hall for the month of August. Mr. Bueno presented the Board with some information about the meaning of the pride flag and some facts about the LGBTQ community. (Attachment A)

Mr. Espindola feels this is an important issue, especially after coming out of the COVID pandemic. Freitas is worried about approving this request and this starting a precedence with other groups that are associated with hate groups requesting to fly their flags.

Mr. Espindola reminded the Board that there was a flag policy put into place in 2020.

Mr. Espindola made a motion to approve the request. There was no second.

Mr. Freitas suggested to Mr. Bueno to fly the flag at Town Hall for a few hours like he did the first year in 2019. Mr. Bueno declined.

Appointment to the Historical Commission

Mr. Fruits read a memo from Historical Commission Chairman Wayne Oliver requesting John Medeiros be appointed to the full-time position on the Historical Commission due to an opening.

Mr. Espindola made a motion to appoint John Medeiros to the full-time position on the Historical Commission. Mr. Silvia seconded. Vote was unanimous. (3-0)

Appointment to the Lagoa Friendship Pact

Appoint Maria (MJ) Carvalho to the Lagoa Friendship Pact Committee as the Historical Commission representative

Mr. Espindola made a motion to appoint Maria Carvalho to the Lagoa Friendship Committee as the Historical Commission representative. Mr. Silva seconded. Vote was unanimous. (3-0)

Hive Motorcars, LLC

At 7:00 pm Mr. Freitas opened the public hearing by reading the public hearing notice that was published in the paper.

Andrew Medeiros met with the Board and explained he will be continuing the business previously owned by Howard Katz (Howie's Auto Sales) and there will be no changes.

Mr. Espindola made a motion to approve the Class II Car Dealers license. Mr. Silvia seconded. Vote was unanimous. (3-0)

After no comments, questions or concerns from the public, Mr. Freitas closed the public hearing at 7:03 pm.

99 Restaurant of Boston, LLC d/b/a 99 Restaurant and Pub

Mr. Freitas opened the hearing for the change of manager for 99 Restaurant. Pub 99 manager Amy Sherburne told the Board she has worked for the company for 19 years and is looking forward to being a

part of the community. Mr. Espindola made a motion to approve the change of manager for 99 Restaurant of Boston, LLC d./b/a 99 Restaurant and Pub. Mr. Silvia seconded. Vote was unanimous. (3-0)

After no comments, questions or concerns from the public, Mr. Freitas closed the public hearing at 7:07 pm.

Precinct One

Precinct One Chairman Brian Bowcock met via Zoom with the Board. Mr. Bowcock thanked Mr. Charbonneau, highway superintendent, Public Works Superintendent Vinnie Furtado and the public works department for finishing up the green street project.

Rogers School lease proposal

Members of the Rogers School Reuse Committee were in attendance to discuss the possible lease of the 1950's addition of Rogers school.

The members discussed the idea of adding Solar to the building and other uses for the Original portion of Rogers School and also applying for grants for the building. Town Planner Paul Foley told the Board he would like to search for possible grants but the Town would need to know what the use would be before he could apply for any grants

Selectman Silvia feels the Board is moving in the right direction and this could lead to other opportunities for Rogers School.

Ms. Loo, Chairwoman of the Rogers Reuse Community, reminded the Board that the mothball process for the former school is already in place and the roof has already been fixed and the bricks have been resealed. Currently there will be dehumidifiers in the school to help preserve it.

Mr. Brady expressed that there is a group that is ready and willing to lease the space at the school and if the Board puts them off, they will find a space elsewhere. The mothball process will still go on for the original part. Mr. Brady reminded the Board, if Article 57 passes, there will be no money spent unless a lease is signed.

Mr. Espindola said the Economic Development Committee has been discussing options for Rogers School and discussed multiple uses and ideas for the former school. Mr. Freitas and Mr. Silvia are both in favor of Article 57.

Handicap sign- 54 Bayview

Resident Scott Hyman resident of 54 Bayview Street met with the Board to request a handicap sign across the street from his property. Mr. Hyman stated that he lives on the hydrant side of the street therefore the sign cannot go directly in front of his property, and he has a driveway but he has his hot rod parked there. Mr. Espindola reminded the Board at their previous meeting; the Police Safety Officer did not recommend the handicap sign at this time.

Mr. Silvia told the Board he spoke to the Department of Fair Housing and was told Mr. Hyman is entitled to a handicap space even though he has a driveway.

Mr. Espindola made a motion to approve the handicap space at 54 Bayview Street as determined by the Police Safety Officer, as soon as possible. Mr. Silvia seconded. Vote was unanimous. (3-0)

Remote Town Meeting participation

Mr. Espindola told the Board the Mass Municipal Association is trying to extend the remote participation for government meetings. This would allow members of the community to participate remotely in meetings. Mr. Espindola would like to see the Board of Selectmen endorse this. (Attachment B)

Mr. Silvia is not in favor of remote meetings continuing, he likes having the community in the room in person. Mr. Freitas also would like to see in person meetings be brought back and feels that it is more personal to have people in the room and not on Zoom.

Cable Access Director Derek Frates discussed with the Board the drawbacks of the remote meetings and the challenges it causes for his department including the coordination for multiple meetings to take place at the same time when time, space and zoom permissions are limited.

Mr. Silvia made a motion to go back to "in person" meetings on June 15, 2021. Mr. Freitas seconded. Vote was passed. (2-1)

Preparation for Annual Town Meeting, June 12, 2021

Board members reviewed the Articles for Town meeting.

Mr. Espindola made a motion to Pass Over Article 33: Land Acquisition and engineering design services for Public Safety Facility and disposal of Bridge Street pier- FY22. Mr. Freitas seconded. Vote was unanimous. (3-0)

Mr. Espindola made a motion to Pass Over Article 58: Land Acquisition North Street. Mr. Silvia seconded. Vote was unanimous. (3-0)

Notes and Announcements

Mr. Espindola congratulated the Fairhaven High School seniors that graduated this past Sunday.

At 8:02 pm Mr. Espindola made a motion to adjourn to Executive session, not to reconvene to open session to discuss Real Estate Matters: MGL Chapter 30A, Section 21 (6): Rogers School lease. Mr. Silvia seconded. Vote was unanimous. (3-0)

Roll Call vote: Mr. Espindola in favor, Mr. Silvia in favor, Mr. Freitas in favor

Respectfully submitted,



Vicki L. Oliveira
Administrative Assistant
(Approved 6/21/2021)

- A. Pride fact sheets
- B. MMA remote participation article

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Attachment A
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PREVENTING SUICIDE

(<https://www.thetrevorproject.org/resources/preventing-suicide/>)

THE **TREVOR** PROJECT

(<https://www.thetrevorproject.org>)

Facts About Suicide

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- Suicide is the 2nd leading cause of death among young people ages 10 to 24.¹
- ([/#facebook](#)) • LGB youth seriously contemplate suicide at almost three times the rate of heterosexual youth.²
- ([/#twitter](#)) • LGB youth are almost five times as likely to have attempted suicide compared to heterosexual youth.²
- ([/#email](#)) • Of all the suicide attempts made by youth, LGB youth suicide attempts were almost five times as likely to require medical treatment than those of heterosexual youth.²
- Suicide attempts by LGB youth and questioning youth are 4 to 6 times more likely to result in injury, poisoning, or overdose that requires treatment from a doctor or nurse, compared to their straight peers.²
- In a national study, 40% of transgender adults reported having made a suicide attempt. 92% of these individuals reported having attempted suicide before the age of 25.³
- LGB youth who come from highly rejecting families are 8.4 times as likely to have attempted suicide as LGB peers who reported no or low levels of family rejection.⁴
- 1 out of 6 students nationwide (grades 9–12) seriously considered suicide in the past year.
[5]
- Each episode of LGBT victimization, such as physical or verbal harassment or abuse, increases the likelihood of self-harming behavior by 2.5 times on average.⁶

SOURCES:

[1] CDC, NCIPC. *Web-based Injury Statistics Query and Reporting System (WISQARS)* [online]. (2010) {2013 Aug. 1}. Available from: www.cdc.gov/ncipc/wisqars.

[2] CDC. (2016). *Sexual Identity, Sex of Sexual Contacts, and Health-Risk Behaviors Among Students in Grades 9-12: Youth Risk Behavior Surveillance*. Atlanta, GA: U.S. Department of Health and Human Services.

[3] James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). *The Report of the 2015 U.S. Transgender Survey*. Washington, DC: National Center for Transgender Equality.

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[5] CDC. (2016). Sexual Identity, Sex of Sexual Contacts, and Health-Risk Behaviors Among Students in Grades 9-12: Youth Risk Behavior Surveillance. Atlanta, GA: U.S. Department of Health and Human Services. (tel:1-866-488-7386)

[6] IMPACT. (2018). Mental health disorders, psychological distress, and suicidality in a diverse sample of lesbian, gay, bisexual, and transgender youths. American Journal of Public Health. 100(12), 2426-32.



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RECENT NEWS (/BLOGS- EVENTS/TREVOR-NEWS/)



[The Trevor Project Responds to The Supreme Court's Decision In Fulton V. City Of](https://www.thetrevorproject.org/trevor-project-responds-to-the-supreme-courts-decision-in-fulton-v-city-of-philadelphia/)

[\(https://www.thetrevorproject.org/trevor-project-responds-to-the-supreme-courts-decision-in-fulton-v-city-of-philadelphia/\)](https://www.thetrevorproject.org/trevor-project-responds-to-the-supreme-courts-decision-in-fulton-v-city-of-philadelphia/)



[The Trevor Project Applauds the Education Dept. for Protecting Trans Students](https://www.thetrevorproject.org/trevor-project-applauds-the-education-dept-for-protecting-trans-students-under-title-ix/)

<https://www.thetrevorproject.org/trevor-project-applauds-the-education-dept-for-protecting-trans-students-under-title-ix/>



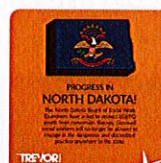
[Research Brief: Pride Among LGBTQ Youth](https://www.thetrevorproject.org/brief-pride-among-lgbtq-youth/)

[brief-pride-among-lgbtq-youth/](https://www.thetrevorproject.org/brief-pride-among-lgbtq-youth/)



[The Trevor Project Applauds Michigan Governor for Banning State & Federal](https://www.thetrevorproject.org/trevor-project-applauds-michigan-governor-for-banning-state-federal-funding-of-conversion-therapy/)

[trevor-project-applauds-michigan-governor-for-banning-state-federal-funding-of-conversion-therapy/](https://www.thetrevorproject.org/trevor-project-applauds-michigan-governor-for-banning-state-federal-funding-of-conversion-therapy/)



[The Trevor Project Applauds North Dakota's Bold Action Against Conversion](https://www.thetrevorproject.org/trevor-project-applauds-north-dakotas-bold-action-against-conversion-therapy/)

[trevor-project-applauds-north-dakotas-bold-action-against-conversion-therapy/](https://www.thetrevorproject.org/trevor-project-applauds-north-dakotas-bold-action-against-conversion-therapy/)



[The Trevor Project Applauds California Assembly for Passing First-of-Its-Kind](https://www.thetrevorproject.org/trevor-project-applauds-california-assembly-for-passing-first-of-its-kind-lgbtq-inclusive-life-data-bill/)

[trevor-project-applauds-california-assembly-for-passing-first-of-its-kind-lgbtq-inclusive-life-data-bill/](https://www.thetrevorproject.org/trevor-project-applauds-california-assembly-for-passing-first-of-its-kind-lgbtq-inclusive-life-data-bill/)



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Sexual Orientation and Gender Identity Among Massachusetts High School Students



Summary of LGBTQ Data in 2020 Annual Report

The Massachusetts Youth Risk Behavior Survey (MYRBS) is a biannual, representative study of youth statewide. In the most recent 2017 MYRBS, 15.2% of Massachusetts youth identified as LGBTQ. 14.3% of students surveyed described themselves as gay, lesbian, bisexual, or not sure (questioning) of their sexual orientation and 2.9% identified themselves as transgender or questioning their gender identity. These categories overlapped, with 78% of transgender/questioning youth also identifying as LGBTQ. More female- than male-identified adolescents were LGBTQ (20.2% vs. 10.0%). The percent of youth who said they were LGBTQ varied across racial and ethnic groups, with LGBTQ youth comprising 14% of White, 12% of Black, 18% of Hispanic/Latinx, 12% of Asian, and 22% of multiracial youth. For a full analysis, see our 2020 Annual Report at mass.gov/annual-recommendations.

Percent of Students Who Reported Risk Behaviors and Experiences	LGBTQ Students	Others Students	Relative Risk for LGBTQ Students
Bullied at school in the past year	22.3	12.8	1.7x
Skipped school in past month because felt unsafe	11.5	3.3	3.5x
Been in a physical fight at school in the past year	9.8	5.2	1.9x
Threatened or injured with weapon at school	9.0	4.4	2.1x
Bullied electronically in the past year	20.7	11.9	1.7x
Hurt self on purpose in the past year (e.g., by cutting, burning self)	35.6	11.2	3.2x
Seriously considered suicide in the past year	31.2	9.9	3.2x
Made a suicide attempt in the past year	16.3	4.1	3.9x
Can talk to parents about "things that are important to you"	73.9	81.1	0.9x
Any lifetime heroin use	5.2	0.9	5.8x
Experienced sexual contact against their will	16.3	6.1	2.7x
Homelessness	2.2	0.8	2.8x

All differences between LGBTQ and other students are statistically significant, $p < .01$.

<http://mass.gov/annual-recommendations>



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2015 Health Related Behaviors Survey

Sexual Orientation, Transgender Identity, and Health Among U.S. Active-Duty Service Members

by Sarah O. Meadows, Charles C. Engel, Rebecca L. Collins, Robin L. Beckman, Matthew Cefalu, Jennifer Hawes-Dawson, Molly Waymouth, Amii M. Kress, Lisa Sontag-Padilla, Rajeev Ramchand, et al.

Related Topics: Gay, Lesbian, Bisexual, and Transgender Populations, Health Risk Behaviors, Health-Related Quality of Life, Military Personnel, United States Air Force, United States Army, United States Coast Guard, United States Marine Corps, United States Navy

Citation

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RESEARCH BRIEF

The Health Related Behaviors Survey (HRBS) is the U.S. Department of Defense (DoD)'s flagship survey for understanding the health, health-related behaviors, and well-being of service members. Fielded periodically for more than 30 years, the HRBS includes content areas — such as substance use, mental and physical health, sexual behavior, and postdeployment problems — that may affect force readiness or the ability to meet the demands of military life. The Defense Health Agency asked the

Methods

RAND fielded the 2015 HRBS among active-duty U.S. military service members in the Air Force, Army, Marine Corps, Navy, and Coast Guard between November 2015 and April 2016. The survey used a random sampling strategy, stratified by service branch, pay grade, and gender (as obtained from Defense Manpower Data Center records). Respondents completed the anonymous survey online, with a response rate of 8.6 percent. This resulted in 16,699 usable surveys (of 201,990 invited to participate).^[3] For some analyses, the number of usable surveys may differ because of differences in nonresponse for individual items. To represent the active-duty population, we weighted responses to account for the oversampling of service members in certain strata. In



RESEARCH BRIEF

2015 Health Related Behaviors Survey
Sexual Orientation, Transgender Identity, and Health Among U.S. Active-Duty Service Members

The 2015 Health Related Behaviors Survey (HRBS) is the U.S. Department of Defense's flagship survey for understanding the health, health-related behaviors, and well-being of service members. Fielded periodically for more than 30 years, the HRBS includes content areas — such as substance use, mental and physical health, sexual behavior, and postdeployment problems — that may affect force readiness or the ability to meet the demands of military life. The Defense Health Agency asked the

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RAND Corporation to revise and field the 2015 HRBS.

In this brief, we review results describing sexual orientation, transgender identity, and how they are related to health. The 2015 HRBS provides the first direct estimate of the percentage of service personnel who identify as lesbian, gay, bisexual, or transgender (LGBT).^[1] It is also, to our knowledge, the first to examine the health-related behavior or health status of LGBT service members, a fact made even more important by the 2010 DoD policy changes allowing for open LGBT service in the military.^[2]

Research on the general U.S. population suggests that the health issues and needs of LGBT individuals may differ somewhat from the needs of others. Smoking, alcohol, and other drug use are greater in this group than in the rest of the population, as are some mental health problems and sexual and reproductive health issues. LGBT individuals may experience overweight and obesity more often than others and may access routine health care less often. Such disparities could affect readiness among LGBT service members.

Sexual Orientation and Transgender Identity

Sexual orientation can be measured as (1) relative attraction to same-sex individuals, (2) sexual activity with same-sex individuals, and (3) sexual identity (i.e., lesbian, gay, or bisexual [LGB]). The 2015 HRBS assessed sexual orientation in all of these ways. The survey also assessed transgender identity, or when a person experiences a different gender identity from their sex at birth. Table 1 summarizes overall estimates of sexual orientation and transgender identity for men and women in the HRBS.

Overall, as Table 1 shows, 5.8 percent (CI: 5.0–6.6) of HRBS respondents identified as LGB. This estimate falls between estimates for U.S. adults aged 18–64 years and for U.S. high school students, which is not surprising given the age profile of the military.

this research brief, we report point estimates and 95-percent confidence intervals (CIs).^[4]

We tested differences in each outcome across levels of key factors or by subgroups — service branch, pay grade, gender, age group, race/ethnicity, and education level — using a two-stage procedure based on (1) a Rao-Scott chi-square test for overall differences across levels within a single factor and, if the overall test was statistically significant, (2) two-sample t-tests that explore all possible pairwise comparisons between levels of the factors (e.g., junior officers compared with noncommissioned senior officers). Readers interested in these differences should consult the full 2015 HRBS final report.

This brief is one of seven, each corresponding to a different chapter in the full report. An eighth brief summarizes the entire report.

Table 1 Sexual Orientation and Transgender Identity

	Men ^a	Women ^a	Overall
Sexual attraction			
Only attracted to men	1.7% (1.1–2.3)	68.2% (66.2–70.2)	
Mostly attracted to men	0.5% (0.2–0.8)	16.1% (14.6–17.7)	
Equally attracted to men and women	1.2% (0.7–1.8)	5.2% (4.2–6.3)	
Mostly attracted to women	4.3% (3.4–5.1)	3.2% (2.4–4.0)	
Only attracted to women	90.1% (88.8–91.4)	4.4% (3.5–5.3)	
Not attracted to either men or women	0.7% (0.3–1.0)	1.3% (0.7–1.9)	
Not sure	1.5% (0.9–2.1)	1.7% (1.1–2.3)	
Sexual activity			
Sex with one or more same-sex partners in the past 12 months	3.3% (2.6–4.1)	9.4% (8.1–10.6)	
Sexual identity			
Gay or lesbian	1.9% (1.3–2.5)	7.0% (5.8–8.1)	
Bisexual	2.0% (1.4–2.6)	9.1% (7.8–10.4)	
Total LGB ^b			5.8% (5.0–6.6)
Transgender identity			
Transgender	0.5% (0.2–0.8)	1.2% (0.6–1.7)	
Total transgender ^c			0.6% (0.3–0.9)
Total LGBT identity ^d			6.1% (5.3–6.9)

NOTE: All data are weighted. 95-percent CIs are presented in parentheses. Percentages are reported for the sample overall, not among only LGBT respondents.

^a As with all 2015 HRBS data, service members are categorized by gender as self-reported in the survey.

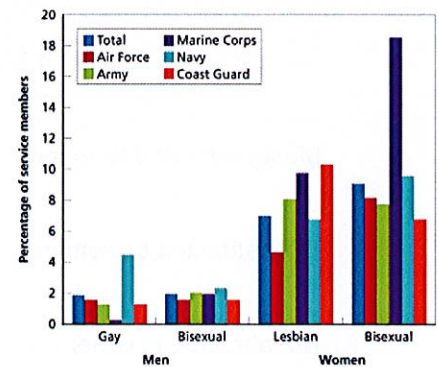
^b If all respondents who declined to answer this item (0.3 percent) were LGB, the overall percentage would be 6.0 percent.

^c If all respondents who declined to answer this item (0.4 percent) were transgender, the overall percentage would be 1.0 percent. If weights were calculated based on reported gender instead of the gender in Defense Manpower Data Center records, the overall percentage would be 1.1 percent.

^d The total LGBT percentage does not equal a simple sum of the LGB and the transgender percentages because of overlap in the two groups (n = 40) and some differences in item-level nonresponse across the two items.

Figure 1 summarizes the percentages of gay and bisexual men and lesbian and bisexual women, by service branch. A significantly larger percentage of Navy men identified as gay than did men in any other service branch, and there were no statistically significant differences by service in the percentage of men identifying as bisexual. The percentage of women who identified as lesbian was significantly lower in the Air Force than in all other services except the Navy, and the percentage of women who were bisexual was significantly higher in the Marine Corps than in all other services.

Figure 1 Lesbian, Gay, and Bisexual Identity, by Service Branch



Among HRBS respondents, 0.6 percent (CI: 0.3–0.9) identified as transgender. The most-recent estimate in the U.S. adult population also found that 0.6 percent (credible interval: 0.4–1.0^[5]) identified as transgender.

Altogether, 6.1 percent (CI: 5.3–6.9) of service members identified as LGBT. As Table 2 shows, LGBT identity was higher among personnel in the Navy than in other services and among junior enlisted personnel than other pay grades. Almost four times as many service members who reported being female identified as LGBT than those who reported being male.

Table 2 LGBT Identity, by Subgroup

	Percentage Reporting Use
Total	6.1% (5.3–6.9)
Service branch	
Air Force	5.3% (4.3–6.3)
Army	5.5% (4.0–6.9)
Marine Corps	4.4% (3.0–5.8)
Navy	9.1% (7.0–11.2)
Coast Guard	5.2% (4.4–6.0)
Pay grade	
E1–E4	8.4% (6.8–10.0)
E5–E6	5.2% (4.0–6.3)
E7–E9	3.0% (2.1–3.9)
W1–W5	2.4% (1.2–3.6)
O1–O3	4.6% (3.6–5.6)
O4–O10	2.7% (1.9–3.5)
Gender	
Male	4.2% (3.3–5.1)

LGBT Health

LGBT respondents were more likely to report several adverse health behaviors and some worse health outcomes than non-LGBT service members. We

compared the two groups on a wide variety of measures where prior studies of the general population have previously shown adverse behaviors or outcomes for LGBT individuals overall or the subgroups this category encompasses (Table 3). Compared with other personnel, LGBT service members were

Percentage Reporting Use	
Female	16.6% (14.9–18.3)

NOTE: All data are weighted. 95-percent CIs are presented in parentheses.

- equally likely to have a routine medical checkup in the past year
- less likely to be overweight or obese
- more likely to report binge drinking but equally likely to report heavy drinking in the past month
- more likely to be current cigarette smokers
- more likely to report symptoms of moderate or severe depression but less likely to report symptoms of mild depression
- more likely to report non-suicidal self-injury, suicide ideation, and a suicide attempt
- more likely to have ever experienced physical abuse or unwanted sexual contact
- more likely to have had unprotected sex with a new partner in the past year, as well as to have had more than one sex partner in the past year
- more likely to have had a sexually transmitted infection in the past year
- more likely to have not used contraception during the most-recent vaginal sex (in the past year).

Table 3 Health-Related Behaviors and Outcomes, by LGBT Status

	LGBT	Non-LGBT
Routine medical checkup in the past year	81.7%	81.4%
Overweight or obese	54.2%	67.0%
Binge drinking in the past month	37.6%	29.3%
Heavy drinking in the past month	5.6%	5.2%
Current cigarette smoker	24.8%	16.0%
Minimal or mild depression	73.1%	82.8%
Moderate depression	13.2%	8.5%
Severe depression	13.7%	8.8%
Lifetime non-suicidal self-injury	26.5%	10.3%

	LGBT	Non-LGBT
Lifetime suicide ideation	32.7%	17.1%
Suicide ideation in the past year	15.3%	5.8%
Lifetime suicide attempt	13.0%	4.6%
Suicide attempt in the past year	4.8%	1.2%
Lifetime unwanted sexual contact	39.9%	15.4%
Lifetime physical abuse	21.4%	12.4%
Sex with a new partner without a condom in past 12 months	42.4%	35.6%
More than one sex partner in the past year	40.2%	17.7%
Sexually transmitted infection in the past year	7.4%	1.4%
HIV test in the past year	75.7%	73.2%
No birth control during the most-recent vaginal sex (within the past year)	31.5%	21.6%
Unintended pregnancy in the past year	1.6%	2.5%

NOTE: All data are weighted.

Conclusions and Policy Implications

While LGBT personnel obtained routine medical care in percentages similar to non-LGBT personnel, they reported more smoking, binge drinking, risky sexual behavior, and adverse sexual health outcomes. The percentages of LGBT personnel experiencing mental health issues and those with a history of physical abuse and sexual assault were particularly high. These observed differences were similar to those observed for LGBT people in the general U.S. population.

Although these individuals are a small portion of the force, these disparities warrant close attention and tracking by DoD and the Coast Guard so that the specific needs of this subgroup can be addressed. This is particularly important for the Navy, which has the highest percentage of gay men serving and of LGBT service members overall, and in the Marine Corps, which has the highest percentage of bisexual women serving. Policies that enhance, for example, efforts to prevent substance use and sexual risk behaviors may address LGBT health disparities. Although one option is to target the LGBT population with clinical and population efforts, such an approach may stigmatize LGBT service members. Therefore, it may be best to apply these efforts equally across the military, which could lead to broader population benefits.

Limitations

HRBS response rates were lower in 2015 than in prior iterations of the survey. Low response rates do not automatically mean that the results are biased, but they do increase the likelihood that service members who responded differ qualitatively from those who did not. Those differences, then, could bias our estimates of health and health-related behavior; however, it is impossible to know whether the potential bias would result in better or worse outcomes than those observed in the data. Thus, the results of this survey should be interpreted cautiously and in conjunction with other existing data. In addition, comparing the HRBS with other civilian populations (e.g., all U.S. adults) may be difficult to interpret because of both observed (e.g., demographic) and unobserved differences between the two populations. Finally, because we altered the wording of some questions in the 2015 HRBS, the results presented in this brief may not always be comparable to prior versions of the HRBS.

Notes

[1] As this brief was in the final stages of production, findings from the 2016 Workplace and Gender Relations Survey of Active Duty Members were released, indicating that 12 percent of female service members and 3 percent of male service members identify as LGBT.

[2] On July 26, 2017, as this brief was in the final stages of production, President Donald Trump announced intentions to prohibit transgender individuals from serving in the military.

[3] When calculating response rates, we excluded service members whom we were unable to contact because of incorrect email or mailing addresses. The number we were unable to contact was 6,770, or 3.4 percent of the sample.

[4] CIs provide a range in which we expect the true population value to fall. They account for sampling variability when calculating point estimates but do not account for problems with question wording, response bias, or other methodological issues that, if present in the HRBS, might bias point estimates.

[5] The interpretation of a credible interval differs from that of a CI. In this context, the credible interval indicates that there is a 95-percent probability that the true percentage of service members who are transgender lies between 0.4 and 1.0.

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2021

Testimony



MMA asks administration and oversight committee to support permanent option to hold remote meetings

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The Honorable Marc R. Pacheco, Senate Chair

The Honorable Antonio F.D. Cabral, House Chair

Joint Committee on State Administration and Regulatory Oversight

State House

Boston, MA 02133

(Delivered Electronically)

Dear Senator Pacheco, Representative Cabral, and Distinguished Members of the Committee,

On behalf of cities and towns across the Commonwealth, the Massachusetts Municipal Association is writing to express our strong and enthusiastic support for the framework established within H. 3213 and S. 2104, An Act Updating the Open Meeting Law to Support Remote Participation.

The abrupt end of the state of emergency on June 15 will create a number of major transition challenges for government and businesses. The most immediate and urgent issue that must be addressed is enactment of a permanent extension of the ability to conduct public meetings and hearings remotely.

On March 12, 2020, the Governor used his state-of-emergency powers to issue an executive order suspending certain provisions of Section 20 of M.G.L. Chapter 30A,

allowing cities and towns to conduct meetings remotely. This was necessary because the existing state statute is woefully inadequate, does not allow remote participation in meetings unless a physical quorum is present, and reduces the ability of officials who are participating virtually to fully engage. Nearly overnight, cities and towns adopted new technology and software platforms and created a new and remarkably successful remote meeting experience for municipal leaders and the public.

Remote meetings have engaged more residents than ever before and have significantly increased transparency and insight into government operations and decision-making. Communities do not want to snap back to the overly confining pre-pandemic rules, and most are not in a position to do so quickly. Many localities have closed public buildings, repurposed meeting rooms to provide safer distancing for municipal staff, or have longer-term ventilation concerns that have yet to be addressed. Further, with many residents yet to be vaccinated, and immuno-compromised officials and members of the public unable to achieve full protection from the coronavirus, it is imperative that we continue the remote meeting option for local government. With multiple councils, boards and commissions in place in each of our 351 cities and towns, there are well over 1,000 public entities that rely on remote meetings and virtual platforms to conduct everyday business in much greater public view than ever before.

Different public bodies have different capacity and preferences for remote or in-person meetings. That is why we believe maintaining flexibility is important and why we disagree with the language in H. 3152 and S. 2082, which would mandate that each public body create an alternative means of public access to their deliberations. How one board chooses or is capable of operating remotely varies widely from other boards in the same city or town, and this variation is even more drastic from municipality to municipality, especially in those regions that still lack robust broadband infrastructure. Further, this mandate could be interpreted as immediately requiring expensive hybrid meeting formats that integrate in-person and virtual interaction. While that may be the format of the future, nearly every city and town hall would be forced to retrofit all meeting spaces with expensive technology (cameras, microphone systems, multiple large-screen displays, and more costly platform licenses). The best policy is to allow the option of remote

meetings, providing communities with a base upon which they can build going forward, investing in technology on an affordable, self-funded timeline.

For these reasons, we ask that you consider allowing public bodies the permanent option to hold remote meetings and that this action be expedited as a top legislative priority to avoid disruption to local deliberations and decision-making.

With your support, Massachusetts can act on the innovations and lessons learned during the past 14 months and use them to improve government operations, transparency and public engagement to ensure a swifter recovery for our communities. Along with the option of permanent remote meetings of public bodies, we also ask you to advance permanent legislation to allow for remote Representative and Open Town Meetings, election provisions such as the option to vote by mail and the ability to move municipal election and caucus dates during emergencies, and expedited permitting for outdoor table service and take-out alcoholic beverages.

The MMA and NAIOP Massachusetts–The Commercial Real Estate Development Association have collaborated on this issue, and with the support of both organizations we have attached further language building upon the framework offered by H. 3213 and S. 2104. These provisions are designed to embrace municipal and business perspectives to lead our communities forward into a permanent new era of open, transparent and efficient governance. We respectfully ask that you report out this language favorably.

We thank you for your leadership during the pandemic, and for your strong support for cities and towns. With the state of emergency scheduled to end in less than two weeks, it is imperative that the transition to our “new normal” is seamless. With your support, Massachusetts can act on the innovations and lessons learned during the past 14 months, and use them to improve government operations, transparency and public engagement, and ensure a swifter recovery for our communities.

Thank you very much for your interest in these very important local government matters. If you have any questions, please do not hesitate to have your office contact me or MMA

