From: Public Testimony
To: Rice, Howard
Cc: Sanders, Monica
Subject: FW: Support of Ordinance #2000907
Date: Monday, November 30, 2020 2:42:17 PM

From: Cox, Ryan S <Ryan.Cox@tmcmed.org>
Sent: Monday, November 30, 2020 9:36 AM
To: Public Testimony <Public.Testimony@kcmo.org>
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Subject: Support of Ordinance #2000907

Good morning. My name is Ryan Cox, and I am a clinical psychologist at Truman Medical Center. Within that role I am also the Behavioral Health Director of Truman's new LGBTQ Specialty Clinic, as well as Program Manager for Infectious Diseases, and assistant professor at the UMKC School of Medicine. I am also a resident of Kansas City's 4th district.

I am writing to you today in support of ordinance #2000907 to develop a Kansas City LGBTQ Commission. In the last years and decades, the United States has made incredible and almost unthinkable strides and advances for LGBTQ rights, from marriage equality in 2015, to transgender individuals being formally included in the 1964 Civil Rights Act last year. On the surface it would appear we have "made it," that equality has been achieved, and that no more work is to be done. In a legal sense, this is somewhat true, but every day we are witness to how many disparities still exist in this community, how much bias there still is against LGBTQ folks, and, as activists like to say, how much work still needs to be done.

It is still more dangerous in the United States to be a transgender woman of color than any other identity, and they are murdered at a rate of approximately one per week, according to the Southern Poverty Law Center. Gay men as a group exhibit psychological symptoms of PTSD throughout the lifespan at a far greater rate than their heterosexual counterparts. Lesbians have worse health outcomes overall than heterosexual women, and are much less likely to seek out preventative medical care, and are more likely to experience long-term chronic health conditions. A gay African American man in this country has a 50% chance of becoming HIV positive, and has an average lifespan 12-15 years shorter than a white man with HIV. None of this is acceptable.

I believe that the formation of an LGBTQ Commission in Kansas City is an opportunity to begin to address these facts, all of which are just as applicable to Kansas City as they are to the country at large. By bringing together disparate and diverse voices, identities, and locales all to one table, we can start conversations and initiatives to solve problems within unique communities as well as the city at large. Kansas City has an opportunity to be a national leader in the field of LGBTQ health, civil rights, and visibility. There are already many organizations doing amazing work here – challenging work, grassroots work, and very impactful work. This commission could help to synthesize those needs and the organizations already on the ground, and foster greater and more effective interaction, inclusivity, and advocacy.

As a gay man myself, I have chosen to make Kansas City my home. This is a professional issue to me, but it is also personal. It is my fervent wish today that the good men and women of the Kansas City City Council will vote affirmatively to create this much needed commission. Thank you very much.

Sincerely,
Ryan Cox

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