The Hate Crimes Sentencing Enhancement Act goes into effect, allowing judges “to impose
harsher sentences if there is evidence showing that a victim was selected because of the ‘actual
or perceived race, color, religion, national origin, ethnicity, gender, disability, or sexual orientation
of any person.’” (5). The American Psychiatric Association “removes homosexuality from its list of mental disorders.” (3).

Embracing

Table 1. Examples of LGBTQ+ progress in the United States since 1969

<table>
<thead>
<tr>
<th>Decade</th>
<th>Milestone</th>
</tr>
</thead>
<tbody>
<tr>
<td>1970s</td>
<td>The American Psychiatric Association “removes homosexuality from its list of mental disorders.”</td>
</tr>
<tr>
<td>1980s</td>
<td>Wisconsin becomes first state “to outlaw discrimination based on sexual orientation.”</td>
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<tr>
<td>1990s</td>
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<td>2000s</td>
<td>The U.S. Supreme Court “strikes down the ‘homosexual conduct’ law, which decriminalizes same-sex sexual conduct,” and the “first legal same-sex marriage in the United States takes place in Massachusetts.”</td>
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<td>2010s</td>
<td>“Don’t Ask, Don’t Tell” is repealed, ending a ban on gay men and lesbians from serving openly in the military,” and the Military Equal Opportunity policy is “adjusted to include gay and lesbian military members.”</td>
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<tr>
<td>2020s</td>
<td>The U.S. Supreme Court “rules that federal law protects LGBTQ workers from discrimination,” and the Senate confirms the first “openly gay Cabinet member” (current U.S. Secretary of Transportation Pete Buttigieg) and “the first out transgender federal official” (current Department of Health and Human Services Assistant Secretary for Health Admiral Rachel L. Levine, MD).</td>
</tr>
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</table>

Reprinted from Cable News Network (2).

By Susan E. Quaggin

As physicians and other members of the kidney care team, we took an oath when we entered the profession: We must ensure trainees, faculty, and experienced practitioners receive appropriate education to provide effective and af-
firming care for all members of LGBTQ+ communities, and we must have leaders and professionals who represent diverse populations across all aspects of society and our profession to realize health justice.

In the health community, patients—those that we who rely on us daily to provide care—are facing a difficult, acrimonious, and uncertain world...
Climate Health Is Kidney Health

This is an abridged version of ASN’s Statement on Climate Change, which can be viewed in its entirety online at wwwASNonline.org.

The American Society of Nephrology (ASN) calls on kidney health professionals to take action to address the impact of climate change on the 850 million people—including more than 57 million Americans—living with kidney diseases across the world who are uniquely vulnerable to the effects of climate change.

Climate change—defined by the United Nations Framework Convention on Climate Change as “a change of climate which is attributable directly or indirectly to human activity that alters the composition of the global atmosphere and which is in addition to natural climate variability observed over comparable periods of time”—poses an existential crisis that threatens the viability of life on this planet. Projections by the Intergovernmental Panel on Climate Change show global surface temperatures are likely to increase by 2.0°Celsius by mid-century if emissions remain at current levels and by as much as 3.5°Celsius by the end of the century. If emissions continue to increase, global surface temperatures are likely to increase by as much as 5.7°Celsius.

The effects of climate change (heat waves, precipitation events, droughts, and cyclone activity) are expected to become more extreme and occur with greater frequency. Specifically, extreme weather patterns may lead to climate events, such as floods and droughts; a reduction in agriculture and food security; or a decrease in water supply and quality due to increases in temperature and changes in precipitation. The diverse detrimental effects of climate change are compounded for people with kidney diseases, as this population is both more susceptible to the direct health impacts of climate change and vulnerable to breakdowns in the health care infrastructure during natural disasters.

Multiple cardinal features of climate change directly impact kidney health. First, heat exposure and dehydration have been implicated in epidemics of chronic kidney failure in Latin America and elsewhere (i.e., Macedonian nephropathy) and are also risk factors for kidney stones and acute kidney injury. Second, poor air quality has been linked to progressive chronic kidney failure. Vector-borne illnesses transmitted by vector-human contact. Finally, given that people with kidney diseases tend to have multiple other chronic conditions, such as heart and lung disease, and are prone to infection, the impact of climate change is likely to disproportionately impact this population.

More than 500,000 Americans with kidney failure require dialysis thrice-weekly or thrice-weekly hemodialysis treatments in an outpatient dialysis center. Disruption of medical infrastructure and access to a medically pure water supply, necessary for dialysis during a natural disaster, can be immediately life threatening for this population.

More broadly, the population of people with kidney diseases is disproportionately composed of people at socioeconomic disadvantage who are also bearing the greatest burden of climate change. Kidney diseases are associated with social determinants of health and are even concentrated in geographic “hospots,” such as industrial farming areas, which are especially impacted by climate change. Furthermore, kidney diseases may be associated with occupations that involve extended exposure to extreme temperatures and increasingly hostile outdoor environment, such as agricultural labor, which are disproportionately held by people with lower socioeconomic status. The confluence of socioeconomic, geographic, and climate change risk factors may increase the incidence of kidney diseases and disrupt access to care.

Kidney health professionals must acknowledge that the health care industry is a significant contributor to greenhouse gas emissions and climate change. It is estimated that the delivery of health care accounts for up to 5% of annual global greenhouse gas emissions, and the management of kidney diseases contributes disproportionately to the overall environmental footprint of the health care industry due to the resource intensiveness of kidney replacement therapies. Hemodialysis, in particular, is an extremely water- and power-hungry therapy, consuming approximately 156 billion liters of water and 1.62 billion KWH of power in the treatment of about 2 million people per year. It also generates excessive amounts of plastic waste—approximately 625,000 tons per year—most of which is produced and discarded in an environmentally damaging way.

Climate change threatens to increase the incidence and prevalence of kidney diseases, disrupt access to care, and widen inequity in kidney health. The more than 21,000 kidney health professionals who comprise the American Society of Nephrology are dedicated to creating a world without kidney diseases. ASN believes that climate health is kidney health and calls on kidney health professionals across the globe to:

Support people with kidney diseases to survive climate change by:
- Researching the biological and population-level impacts of climate change on kidney health and developing interventions to mitigate these impacts
- Fostering community resilience to the impacts of climate change, including disaster preparedness focused on kidney health care systems for extreme weather events
- Broadening access to, and the supply chain for, existing therapies, such as home dialysis and transplantation, and developing new therapies, such as wearable or implantable artificial kidneys, which increase patient mobility and resiliency

Table 2. ASN will bring its values to Florida

Making a significant contribution to the onePULSE Foundation (10) in support of LGBTQ+ communities and sharing information about other worthwhile causes for participants to support in Orlando

| Supporting at-risk businesses in Orlando, including LGBTQ+-owned restaurants |
| Working with local media outlets to raise awareness of kidney diseases in Florida and voicing our opposition to the “Don’t Say Gay” bill and other discriminatory practices |
| Promoting ASN’s commitment to eliminate disparities based on sexual identity, gender, race, or ethnicity throughout the meeting (such as the annual Wesson-Himmelhard Diversity and Inclusion Lunch and the annual LGBTQ+ and Allies Reception) |

Providing educational sessions focused on transgender kidney health and equity issues (For the first time this year, Kidney Week will include a “health equity” abstract category.)

Celebrating our transgender kidney heroes and allies who are transforming care through their commitment to innovation.

