



Feeling Alone: The Impact Mental Health and Substance Abuse has on the LGBTQ+ Community

CASEY LUCARELLI, LCSW
(ALL PRONOUNS)



OBJECTIVES

- Define terms within the LGBTQ+ Community
- Understand the impact addiction and mental health has on the LGBTQ+ Community
- Describe challenges and minority stress within the LGBTQ+ Community
- Learn how shame plays a part in honoring identity
- Understand how shame leads to isolation
- Understand the benefits of LGBTQ+ affirming care

ABOUT ME





L

Lesbian

G

Gay

B

Bisexual

T

Transgender

Q

Queer or
Questioning

DEFINITION & MEANING

SEXUAL ORIENTATION

- This refers to whom you are attracted. This is different from gender or gender identity.
- You cannot assume one's sexual orientation – you have to ask to know. (gay, lesbian, bisexual, asexual, pansexual etc.)





TERMS

- Asexual- experiencing little or no sexual attraction to others and/or a lack of interest in sexual relationships/behavior.
- Pansexual- a person who experiences sexual, romantic, physical, and or spiritual attraction for members of all gender identities/expressions.
- Polyamorous-characterized by or involved in the practice of engaging in multiple romantic.
- Aromantic- is a term that's typically used to describe someone who experiences little to no romantic attraction.

GENDER IDENTITY

- Gender Identity describes a person's inner sense of being a boy/man/male, girl/woman/female, another gender, or no gender.
- Gender identity is determined by the individual, so you need to ask how one identifies.



TERMS

- Genderqueer- a gender identity label often used by people who do not identify with the binary of man/woman.
- Intersex- term for a combination of chromosomes, gonads, hormones, internal sex organs, and genitals that differs from the two expected patterns of male or female.
- Gender Non-Conforming- person who does not adhere to the traditional gender expression binary norm.
- Agender-You experience no attachment to any gender.
- Two-spirit- Native American identity in which one person contains female and male spirits within them.
- Gender Expansive-The feeling of expanding in your gender experience beyond current notions of gender identity, and not wanting to limit your identity to one or another.

GENDER EXPRESSION

- Describes the ways (e.g., feminine, masculine, androgynous) in which a person communicates their gender to the world through their clothing, speech, behavior, etc.
- Gender expression is fluid and is separate from assigned sex at birth or gender identity.



SEX ASSIGNED AT BIRTH

- Sex (male, intersex, female) assigned to a child at birth, most often based on the child's external anatomy.
- Also referred to as birth sex, natal sex, biological sex, or sex.
- Intersex- is a person is born with a combination of male and female biological traits.





TERMS

- Transgender: Describes a person whose gender identity and assigned sex at birth do not correspond. Also used as an umbrella term to include gender identities outside of male and female. Sometimes abbreviated as trans.
- "Trans woman/transgender woman/male-to-female (MTF)" refers to someone who was assigned male at birth and lives and/or identifies as a woman. Some will just use the term woman.
- "Trans man/transgender man/female-to-male (FTM)" refers to someone who was assigned female at birth and lives and/or identifies as a man. Some will just use the term man.

TERMS

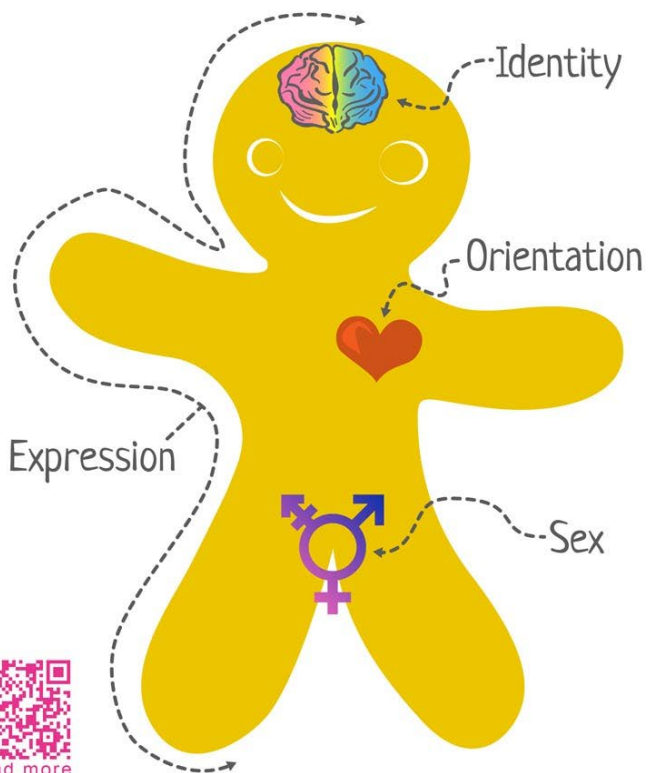
- Cisgender: Refers to people whose gender identity and gender expression correspond with the sex they were assigned at birth.
- Gender non-conforming: Describes a gender expression that differs from a given society's norms for males and females.
 - Gender Neutral Pronouns include "ze/hir/hirs" or "they/them/theirs".
 - Let individuals decide on their own pronoun and do not question its grammatical correctness.
- Gender transition: Many ways exist – medically (hormones, surgery), legally (name, pronoun).
- Do not assume that "transitioning" means medically – ask.
- If the name that the patient gives does not match the one on the ID, know that this is a scary issue for transgender people and ask with sensitivity.

DON'T MAKE ASSUMPTIONS

- Ask patients about the pronouns they use.
 - If someone identifies as a trans man, they may use masculine pronouns.
 - if someone identifies as a transwoman, they may use feminine pronouns.
 - Don't make assumptions based on gender expression.
- If you need to ask body-related questions, explain why you need the information, so the person doesn't think you are just curious.
- You cannot assume a transgender person's sexual orientation; again, you must ask to know.
- Ask patients about their sexual orientation.
 - Use gender neutral terms; partner(s), spouse etc.

The Genderbread Person

by www.ItsPronouncedMetrosexual.com



Gender Identity

Woman Genderqueer Man

Gender identity is how you, in your head, think about yourself. It's the chemistry that composes you (e.g., hormonal levels) and how you interpret what that means.

Gender Expression

Feminine Androgynous Masculine

Gender expression is how you demonstrate your gender (based on traditional gender roles) through the ways you act, dress, behave, and interact.

Biological Sex

Female Intersex Male

Biological sex refers to the objectively measurable organs, hormones, and chromosomes. Female = vagina, ovaries, XX chromosomes; male = penis, testes, XY chromosomes; intersex = a combination of the two.

Sexual Orientation

Heterosexual Bisexual Homosexual

Sexual orientation is who you are physically, spiritually, and emotionally attracted to, based on their sex/gender in relation to your own.

COMING OUT

- **Out:** Generally, describes people who openly self-identify as LGBTQ in their private, public, and/or professional lives.
- **Outing:** Exposing someone's lesbian, gay, bisexual or transgender identity to others without their permission.
 - Outing someone can have serious repercussions on employment, economic stability, personal safety or religious or family situations.
 - Sometimes, individuals are outed by others who they may have already come out to.
 - Outing an LGBTQ person without their consent is disrespectful and potentially dangerous for the LGBTQ individual.
- **Coming Out:** refers to the process that people who are LGBTQ go through as they work to accept their sexual orientation or gender identity and share that identity openly with other people.

COMING OUT

- Coming out is a process.
- Coming out isn't a one-time thing.
- Choosing to come out depends on the situation.
- Coming out can have benefits and risks.
- Safety to share your truth with self and others

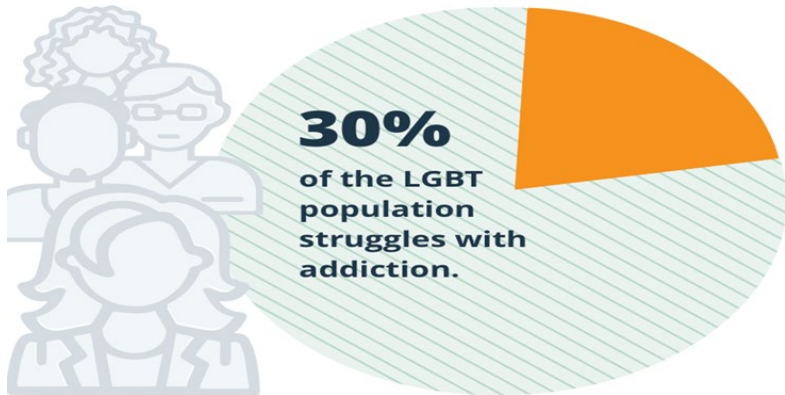


BARRIERS ACCESSING HEALTHCARE:

- LGBTQ+ individuals are less likely to have health insurance than their heterosexual counterparts.
- Insurance plan language may exclude coverage for routine care and for transition-related care (hormones, surgery often not covered)
- Insurance plan may have a narrow definition of families, and not include “chosen” family of LGBTQ+ people.
- Previous negative experiences in healthcare settings can discourage LGBTQ+ individuals from obtaining medical care.
- Lack of provider information and knowledge about LGBTQ+ health needs and risks prevent LGBTQ+ individuals from receiving proper medical care.
- A lack of LGBTQ+-specific research, policies and procedures can hinder proper medical care and treatment.
- LGBTQ+ individuals may experience multiple stigmas, including race, class, ability, geographic location, and immigrant status.
 - For example, studies show reduced access among LGBTQ+ people of color.

THE PROBLEM

High Rates of Addiction in LGBT Community



Source: National Association for Alcoholism and Drug Abuse Counselors.
(n.d.). Process Addictions and the LGBT Community: Diverse Population,
Diverse Treatment.



MENTAL HEALTH

- Much more likely to have depression, anxiety or other emotional or behavioral problems
- More likely think about or attempt suicide, all of which increase the risk of substance use.
- Adults are more than twice as likely as heterosexual adults to experience a mental health condition.
- Higher risk than the general population for suicidal thoughts and suicide attempts.
- Each time an LGBTQ person is a victim of physical or verbal harassment or abuse, they become 2.5x more likely to hurt themselves.



SUBSTANCE USE

- According to the National Survey on Drug Use and Health, LGBTQ adults were more than 2 times as likely as heterosexual adults to have used any illicit drug in the past year.
- LGBTQ adolescents were 90 percent more likely to use substances than heterosexual adolescents.
- LGBTQ had almost 3 times greater risk of opioid use disorder compared to heterosexual adults.



WHY?



CHALLENGES WITHIN THE LGBTQ COMMUNITY

- Minority Stress
- Internalized
Oppression
- Environmental
Factors



MINORITY STRESS



- A persistent feeling of loneliness; the creeping suspicion that if you are honest about yourself, others will reject you.
- It's the experience of outright bullying, violence and discrimination.

INTERNALIZED OPPRESSION

- LGBTQ individuals are subjected to society's negative perceptions, intolerance and stigmas towards LGBTQ people, and as a result, turn those ideas inward believing they are true.



ENVIRONMENTAL FACTORS

- **Violence**- nearly one in five hate crimes committed in the US was due to sexual orientation.
- **Parenting**-some states legally allow adoption agencies to deny adoption to a same sex couple because of their sexual orientation.
- **Conversion Therapy**-In a vast majority of states, kids can still be sent to so-called “gay conversion therapy.”
- **Acceptance**- About 40% of homeless youth in America identify as LGBT and often end up on the streets because they are rejected by their family members.

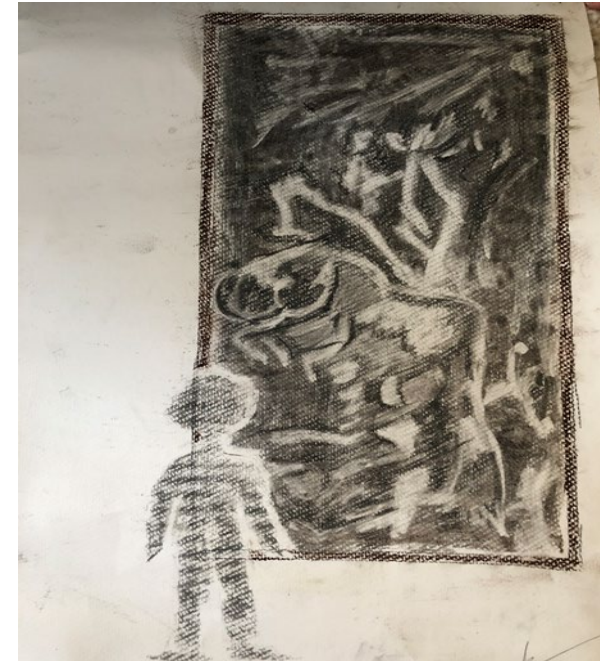
ENVIRONMENTAL FACTORS

- **Employment Discrimination**-In most states, LGBTQ individuals can be fired from their job on the basis of their sexual orientation or gender identity.
- **Housing Discrimination**-LGBT people can be also legally be denied housing based on their identities.
- **Unequal Healthcare**-insurance companies can discriminate based on sexual and gender identity.
- **Criminal Justice**- **LGBTQ** individuals face high rates of discrimination in prison, where trans inmates have a particularly grueling history of abuse, including being put in solitary confinement allegedly for their own protection.



SHAME AND ISOLATION

- Social Isolation
- Emotional Isolation
- Cognitive Isolation
- Concealment of Identity
- Different From
“Heteronormative”
Society
- Discrimination



ISOLATION

- **Social Isolation-** Not able to talk to anyone about his/her/their sexuality. Lack of social support, no contact with LGBT community, social withdrawal, and victimization.
- **Emotional Isolation-** Feelings of separation (emotionally) from social networks, including the family. They are often guarded about their sexuality, which may heighten the feelings of emotional isolation.
- **Cognitive Isolation-** No access to LGBT-specific information or LGBT role models. Much of the information they are exposed to is negative and harmful, and only reinforces the feeling of isolation.



SHAME

- Shame defined: a painful feeling of humiliation or distress caused by the consciousness of wrong or foolish behavior.
 - **Concealment of Identity** -Pressures to be “normal”, LGBTQ will often try to conform to heteronormative expectations.
 - **Different From Heteronormative Society**-Recognizing they are different than societal expectations as soon as they acknowledge their own sexual and/or gender identity
 - **Discrimination**- Experiencing discrimination in health care settings; that discrimination discourages them from seeking treatment.
 - **Hormone-modulating medications**- Fear of interacting with opioid treatments such as suboxone/methadone.

HEALTH ISSUES THAT AFFECT THE LGBTQ+ COMMUNITY:

- Smoking, alcohol, and substance abuse.
- Mental health illnesses, such as anxiety and depression.
- Sexual and reproductive health.
- Eating disorders, obesity.
- Cardiovascular health.
- Higher rates of sexually transmitted diseases.
- Increased risk of cancer, due to decreased screenings.
- Limited evidence-based research on hormones.
- Intimate Partner Violence (IPV)



SPECIAL CONSIDERATIONS FOR LGBTQ+ YOUTH:

- Increased risk for suicide and depression.
- Increased smoking, alcohol and substance use.
 - A huge percentage of homeless youth are LGBTQ+ because they have been kicked out of their homes.
- Higher levels of violence, victimization and harassment (including bullying in school).



INTEGRATING STRATEGIES

- Look around at the environment. Try to imagine what it will be like for an LGBTQ+ person to come in the door and use the facility, including the restroom facilities.
- Think about what LGBTQ+ people might have already experienced out on the street, such as violence or discrimination, on their way to the hospital.
- Look at the healthcare brochures available in your setting to see if they seem inclusive for LGBTQ+ people. If not, you can acknowledge that the information is not inclusive and say, “But here are the parts of it that I think are relevant to you.” Just being aware of this and acknowledging it will make someone more comfortable.
- Rainbow stickers go a long way to make LGBTQ+ people comfortable in a healthcare environment.
 - For example, employees should feel comfortable exhibiting rainbow stickers at their workstation.

USEFUL GUIDES FOR HEALTH PROFESSIONALS:

- Documentation:
 - Be sensitive to pronoun usage. Only document information that is relevant to patient care.
- Policies:
 - LGBTQ+ patients and their will feel most comfortable when written and posted policies regarding discrimination, diversity and non-harassment specifically include LGBTQ+ people. Health professionals should know the policies of the hospital, in case they are asked.
- Registration forms:
 - Ask for legal names and chosen names, partner information, sex assigned at birth, gender identity, sexual orientation, gender as listed in health insurance claim, and say why the information is needed. This is important because LGBTQ+ people may be afraid to provide this information.

ASKING QUESTIONS:

- Language
 - Be sure to use sensitive language when asking relevant questions.
 - Ask necessary questions using sensitive language:
 - “What gender pronoun would you like me to use?”
 - “How do you define/identify your gender?”
 - “What are the words you use to describe your body parts?”
- You have to ask everyone, not just patients who think “might” be LGBTQ+, otherwise this could be offensive.
- Ask open-ended questions:
 - “Are you in a relationship? – Tell me about it,” rather than, “Are you married?” or “Do you have a girlfriend/boyfriend?”
- When talking with patients, do not assume a patient calls himself “gay”. Everyone has their own terms – ask! Use the language they use, including pronouns. Be respectful and empathic. If you are not sure what terminology to use, ask the patient.



LGBTQ+ AFFIRMING CARE

- Safe place for individuals to explore LGBTQ specific challenges.
- Culturally sensitive to the LGBTQ population.
- Awareness of the impact of cultural victimization.
- Address internalized homophobia/transphobia, negative self-concept, and shame.
- Staff may have heterosexist assumptions uninformed, and insensitive, towards LGBTQ clients.
- Other clients may have negative attitudes towards LGBTQ, hindering the treatment process.

RESOURCES

- The Trevor Project – 24/7 Hotline [1-866-488-7386](tel:1-866-488-7386)
- La Fuente Hollywood Treatment Center – Los Angeles, CA
888-903-9898
- Breathe Life Healing Centers- Los Angeles, CA 877-312-3496
- Recovery at Wildwood Farm-Madison, CT 855-577-4333
- Pride Institute – Eden Prairie, MN – 888-616-5031

Treatment Resource Specialist

Karrie Campos 303-249-2435

LGBTQ+ LOCAL RESOURCES

- **CT Gay & Lesbian Chamber of Commerce**
The Connecticut Gay & Lesbian Chamber (CTGLC) provides valuable business development opportunities, financial access and educational resources to the lesbian, gay, bisexual and transgender (LGBT) and allied business community in the greater Connecticut area. As the official affiliate chamber of the National Gay & Lesbian Chamber of Commerce (NGLCC), CTGLC is the voice of hundreds of LGBT-owned businesses and actively promotes and creates supplier diversity and procurement opportunities for its growing base of corporate partners and business members. CTGLC holds a networking breakfast on the first Thursday of each month.
- **CT PrimeTimers**
Prime Timers is a social organization for older gay and bisexual men and younger men over the age of 21 who prefer the company of mature men. Members' social lives are enriched by many diverse activities. Members can enjoy the opportunities and friendships that develop with other Prime Timers throughout the world.
- **CT TransAdvocacy Coalition**
“The mission of the Connecticut TransAdvocacy Coalition (CTAC) is to make Connecticut a safe and tolerant place for the trans and gender non-conforming individual through education and social advocacy”. Each April, CTAC offers the conference “Transgender Lives: The Intersection of Health and Law” A great place to learn, present and/or host a table with information about your services.
- **CT VOICE (new magazine) - CT VOICE magazine premiered in March 2019.**
CT VOICE is a magazine that has the best of Travel, People, Business, Family, Youth, Celebrity and Feature stories from CT focusing on the LGBTQ community. CT VOICE has a rich digital, video and social media presence
- **Hartford Gay and Lesbian Health Collective (HGLHC)**
The Hartford Gay and Lesbian Health Collective currently provides medical services, dental services, support groups, and health education tailored to the lesbian, gay, bisexual, transgender, and queer communities, but serves clients of all genders and gender identities, sexual orientations, ages and ethnicities.

LGBTQ+ LOCAL RESOURCES

- **Hartford Gay Men's Chorus**
The Hartford Gay Men's Chorus uses choral music as a catalyst for enriching and educating both participants and audiences by demonstrating to individuals the many ways that beautiful music positively impacts our world.
- **LGBT Aging Advocacy**
A network of LGBT community members and aging service providers with some state agency participation organized to help promote inclusive services for the LGBT community. The Getting it Right program grew out of this initiative. LGBT Aging Advocacy has an active presence on Facebook including posts of relevant articles and resources.
- **LGBT Moveable Senior Center**
The LGBT MSC is a partnership among Senior Centers to provide a welcoming pathway for the LGBT senior community to Senior Centers and their programs and resources. The MSC program focuses on the health, social connections and engagement of LGBT seniors.
- **PFLAG – Parents and Friends of Lesbians and Gays**
This is a national network with local networks in CT. It was named in 1973 before the acronym “LGBTQ+” was created; it now is inclusive of all not only “lesbians and gays”.. Founded in 1973 after the simple act of a mother publicly supporting her gay son, PFLAG is the nation's largest family and ally organization. There are 4 chapters in CT: Hartford, Norwalk, Southeastern CT, Waterbury
- **Stonewall Speakers**
Stonewall Speakers, a program of the Connecticut Stonewall Foundation, Inc., is an all-volunteer speaker's bureau comprised of lesbian, gay, bisexual, transgender people and their allies.



Casey Lucarelli, LCSW

203-305-8816

Therapy@caseylucarelli.com

www.caseylucarelli.com

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