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OUR PURPOSE

- Inform & educate our region in what is happening in the LGBTQIA+ community & how we can help
- Affirm & support the lives of the LGBTQIA+ individuals
- Create brave spaces for all individuals
- Create inclusivity where we can in our spaces, paperwork, policies, language and more
- To inform and empower advocates & allies
- To create movement in supporting "at risk" populations

WHAT IS SHARED HERE, STAYS HERE

WHAT IS LEARNED HERE, LEAVES WITH US

IT'S OKAY TO SAY
"I DON'T KNOW"

KEEP AN OPEN MIND

EDUCATE, NOT DEBATE

GROUP AGREEMENTS



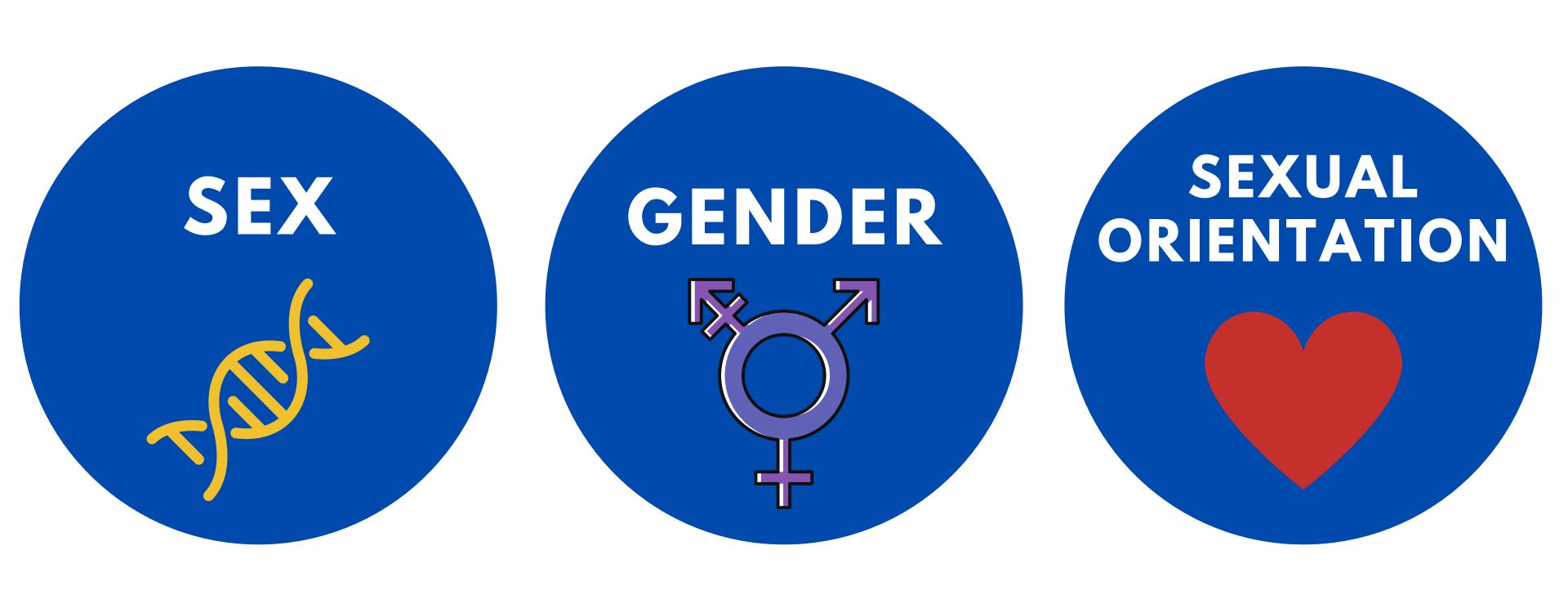
BE RESPECTFUL TO ALL

IF YOU ARE SHARING, AVOID OUTING!

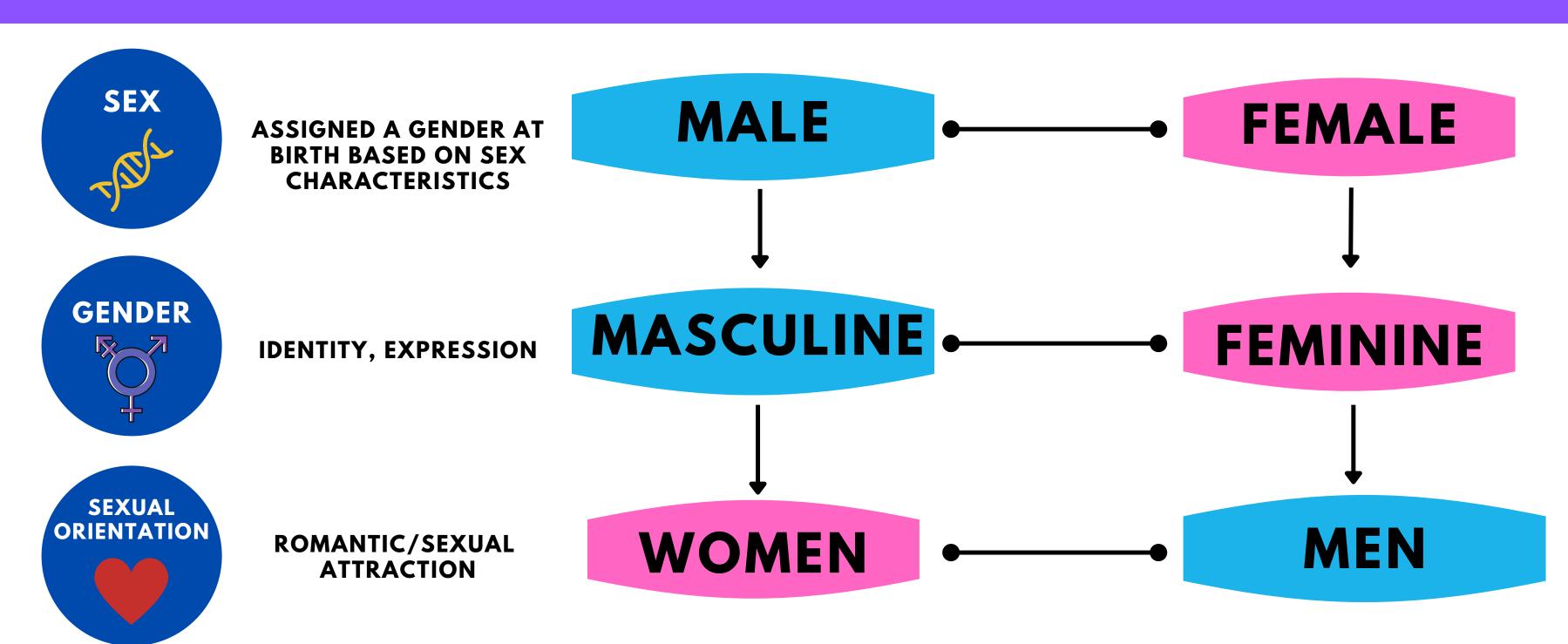
COMMIT TO LANGUAGE CHANGE & RECOGNIZE THAT LANGUAGE IS ALWAYS EVOLVING

STAY ENGAGED - USE THE MICROPHONE, CHAT OR REACTIONS

ASPECTS OF IDENTITY



CURRENT SOCIAL NORMS - A BINARY WORLD



SEX



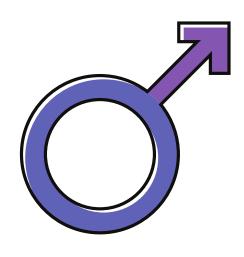
AFAB: ASSIGNED FEMALE AT BIRTH

AMAB: ASSIGNED MALE AT BIRTH

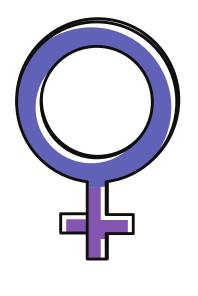
GENETICS

PRIMARY SEX CHARACTERISTICS GENITALIA

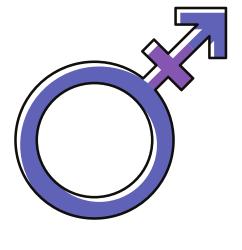
SECONDAY SEX CHARACTERISTICS



MALE



FEMALE



INTERSEX

GENDER - IDENTITY, EXPRESSION



GENDER

SOCIAL, PSYCHOLOGICAL AND EMOTIONAL TRAITS

GENDER IDENTITY

OUR WAY OF UNDERSTANDING OUR INNER SELF

GENDER EXPRESSION

PHYSICAL CHARACTERISTICS, BEHAVIORS AND PRESENTATION

LGBTQIA+ TERMS

GLOSSARY

LGBTQIA.UCDAVIS.EDU

CIS-GENDER, TRANS* GENDER, GENDER QUEER, NON-BINARY, NON-CONFORMING, GENDER FLUID, AGENDER

SEXUAL ORIENTATION



SEXUAL ORIENTATION

WHO WE ARE SEXUALLY ATTRACTED TO OR NOT

EMOTIONAL/ROMANTIC ORIENTATION

ATTRACTION, SEPARATE FROM SEXUAL

LGBTQIA+ TERMS

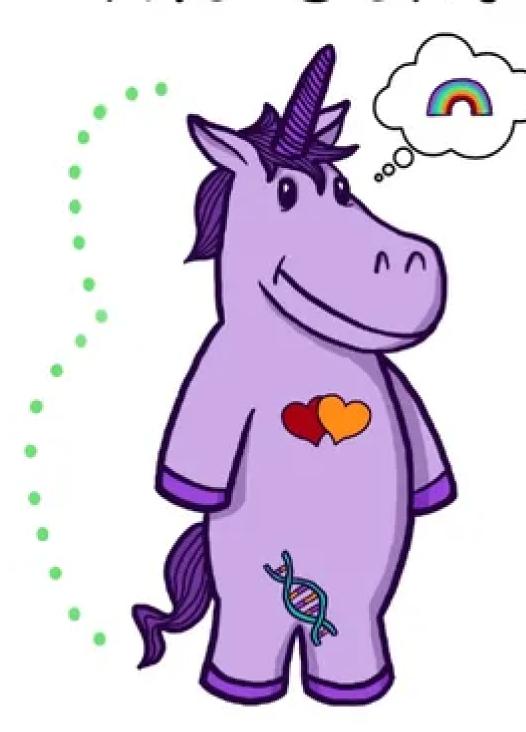
GLOSSARY

LGBTQIA.UCDAVIS.EDU

LESBIAN, GAY, BISEXUAL, QUEER, QUESTIONING, ASEXUAL (ACE), DEMISEXUAL, FLUID, PANSEXUAL, HETEROSEXUAL

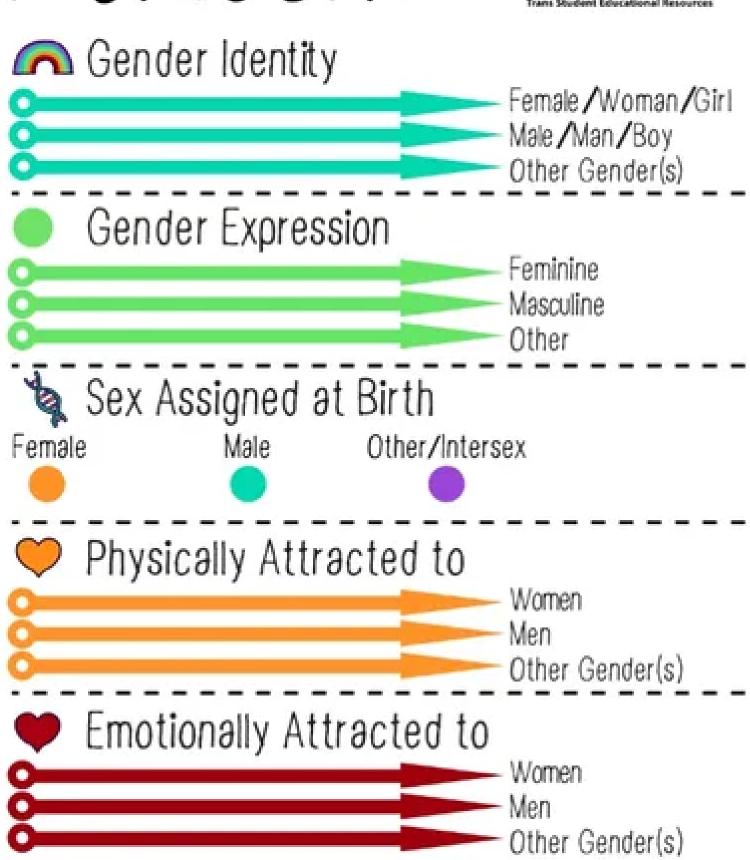
The Gender Unicorn



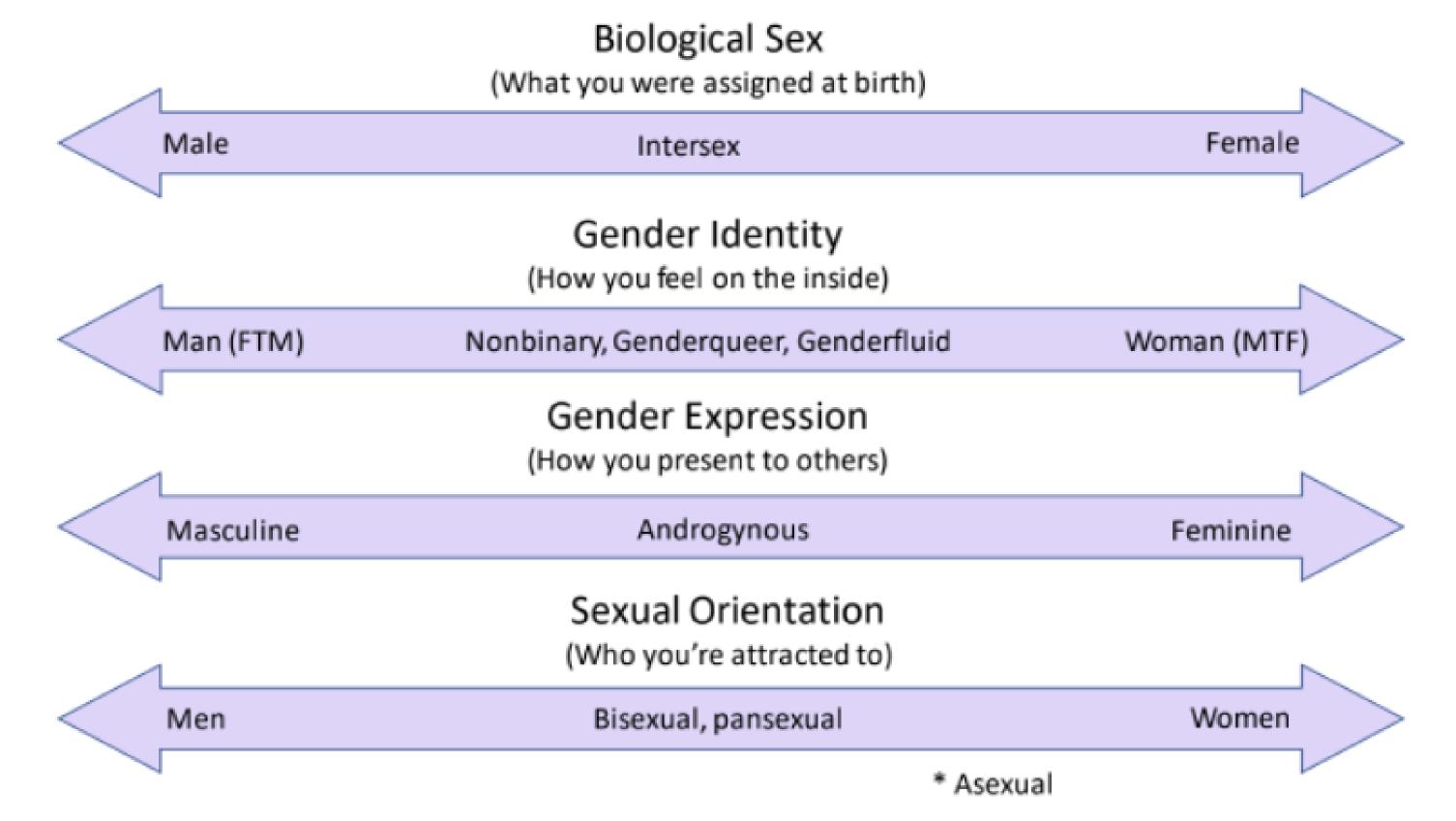


To learn more, go to: www.transstudent.org/gender

Design by Landyn Pan and Anna Moore



Gender and Sexuality Spectrums



STATISTICS

- The LGBTQ+ adult population in US has reached at least 20 million
- LGBTQ+ people live in every community in every state
- 7.6 million LGB adults have both a serious mental illness & SUD
- There has been an increase in LGB adults who have a serious mental illness
- Suicidality has increased in LGB adults
- There are huge treatment gaps for mental and substance use disorder
- LGB adults are more than twice as likely as heterosexual adults to experience a mental health condition
- Alcohol use disorder among LGB adults remain stable
- Opioid misuse declined for those ages 18-25 but increased for those 26 & older
- Marijuana use has significantly increased for everyone

Human Rights Campaign, 2021

National Survey on Drug Use & Health - LGB Adults, 2019

NAMI

National Survey on Drug Use & Health - LGB Adults, 2019

STATISTICS

- 70% of LGBTQ youth stated that their mental health was "poor" most of the time or always during COVID-19.
- 42% of LGBTQ youth seriously considered attempting suicide in the past year, including more than half of transgender and nonbinary youth.
- 12% of white youth attempted suicide compared to 31% of Native/Indigenous youth, 21% of Black youth, 21% of multiracial youth, 18% of Latinx youth, and 12% of Asian/Pacific Islander youth.
- LGBTQ youth in CT often hear anti-lgbtq remarks in schools. Mostly hearing "gay" in a negative way "That's so gay..."
- 57% of LGBTQ youth have experienced verbal harassment based on their sexual orientation, followed closely by gender expression and gender. 20% have experienced physical harassment based on their sexual orientation

Many regional school surveys have reported that students who identify as LGBTQ+ are more likely to report depression, anxiety, substance use, low self-esteem, & hopelessness compared to non-LGBTQ+ students

Trevor Project National Survey, 2021

National School Climate Survey - CT Snapshot, 2019

Various Regional School Surveys

COMMUNITY CHALLENGES 7





The Need for Safety:
homophobia,
transphobia,
microaggressions,
bullying/harrassment,
violence



Disrespect/no recognition in validation, names, pronouns
Lack of representation
Expected or perceived rejection
Internalized homophobia, transphobia...shame

Concealed Identity
"in the closet"

&

The Continuum of Coming Out
"outing"

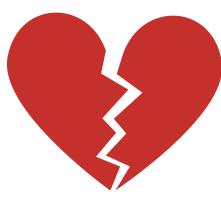


Disapproving family, friends, community
Difficulties finding or maintaining a
support system
Trauma (interpersonal, treatment, history, etc.), MH, SUD





Homelessness, job loss, discrimination
Laws & policies, inequity, incarceration



Inadequeate behavioral health care & distrust in care professionals/providers

Lack of representation

PROTECTIVE FACTORS





SCHOOL ENGAGEMENT

RESPECTING NAMES & PRONOUNS

SUPPORTIVE FAMILY, CHOSEN FAMILY, SOCIAL CIRCLE

REPRESENTATION



SUPPORTIVE AND INCLUSIVE SCHOOLS, COMMUNITY CENTERS, SPACES, WORK PLACES

HEALTHY SENSE OF SELF WORTH & SELF APPRECIATION

LGBTQIA+ AFFIRMING SERVICES

CULTURALLY COMPTENT SERVICES AND RESOURCES



ALLYSHIP

ALLY:

AN INDIVIDUAL WHO WORKS TO END OPPRESSION PERSONALLY & PROFESSIONALLY THROUGH SUPPORT, ADVOCACY, AND INCLUSION OF AN OPPRESSED POPULATION

Commits to the lifelong process of self-reflection and continuing education

Recognizes the power of the voices of the LGBTQIA+ community that should be amplified and uplifted

Commits to supporting the LGBTQIA+ community, personally & professionally

Advocates for LGBTQIA+ rights and recognition

CHARACTERISTICS OF AN ALLY

- Non-judgemental and affirming
- Keeps confidentiality
- Challenges derogatory remarks or binary thinking
- Maintains clear and ethical boundaries
- Refers indiviuals to appropriate help/support
- Use inclusive & affirming language and respect pronouns
- Not asking questions based in curiousity
- No assumptions on one's sexual orientation or gender identity
- Explore ways to include LGBTQIA+ issues, education or celebrations into your work



INCLUSITIVITY IN OUR SPACES

FOR ALL - OUR COMMUNITIES

- Have a team of Allies to create Brave spaces
- Translate affirming & inclusive languages into documents/notes when possible (gender markers)
- Avoid sharing someone"s deadname, previous pronoun
- Be mindful in who may hear when discussing sensitive information
- Identify & address barriers
- Ask for pronouns regardless!
- Create opportunities for feedback
- Learn your queer history



- Use or create opportunities for trainings or education
- Gender neutral restrooms & locker rooms
- Recognize systemic oppression & power dynamics
- Decor be visible

INCLUSITIVITY IN OUR SPACES

SCHOOLS

- Student-centered support
- GSA's, clubs, initiatives in schools
- Inclusive curriculum
- Staff development & trainings



TREATMENT SETTINGS

- Understand current medical disparities, interventions
- Client-centered care
- Avoid sharing someone's prior name/pronouns in medical history (unless clinically relevant)
- No assumptions! (not in medical history, sexual orientation, relationship, patient in the wrong place)
- Utilize supervision and continuing education
- Read your client's info/chart before meeting with them





CHANGE IN LANGUAGE

- Instead of "Identifies as..." Use "Is a...."
- Instead of "Preferred Name" Use "Name, Pronouns"
- Instead of "Homosexual" Use "Gay, Lesbian, etc."
- Instead of "Transexual" Use "Transgender"
- Person first. Instead of "Transgenders" Use "Individuals who are transgender..."
- Instead of "lifestyle" Use "lives, identities, community etc."
- Instead of "Chooses/Choices" Use "Coming out, accessing medical care"
- Instead of "Fully Transition" Use "Has had/Has not had gender affirming surgery/hormones"
- Instead of "Sex Change" Use "Gender affirming surgery"
- Instead of "Biological Male/Female" Use "AFAB, AMAB"

*Note: Language changes constantly

*Note: It's okay to make mistakes. Hold yourself accountable, learn and keep trying

*Note: A person within a community can identify however they want - it is their power

RESOURCES









Introducing Queer Space



Our innovative LGBTQIA+ intensive outpatient program is designed to treat anxiety and depression in the context of unique intersecting identities. Patients will be entering a space that values cultural humility and mutual respect, with a therapeutic approach utilizing Cognitive Behavioral Therapy (CBT), Dialectical Behavioral Therapy (DBT), Narrative Therapy, Expressive Therapy, and Person-Centered Process Groups.

Topics that will be explored include:

- Coping with anxiety and depression
- Identity Development
- Queer Visibility

- Substance use
- Supportive relationships and community

Monday, Tuesday, Thursday from 2pm-5:20pm

<u>IN-PERSON</u> @ The Martin Center Silver Hill Hospital East Campus 208 Valley Road New Canaan, CT 06840

For enrollment, call Outpatient Admissions at 203-801-2217 HOSPITAL







VISIT
THEHUBCT.ORG/LGBTQIA-RESOURCES
WESTPORTPRIDE.COM