

Welcome

Central East PTTC Webinar

Providing Culturally Appropriate Healthcare for LGBTQ Persons of Color

The Central East PTTC is housed at the Danya Institute in Silver Spring, MD

Renata Henry
Executive Director

Deborah Nixon Hughes
Project Director



Each TTC Network includes 13 centers.*



Network Coordinating Office

National American Indian and Alaska Native Center

National Hispanic and Latino Center

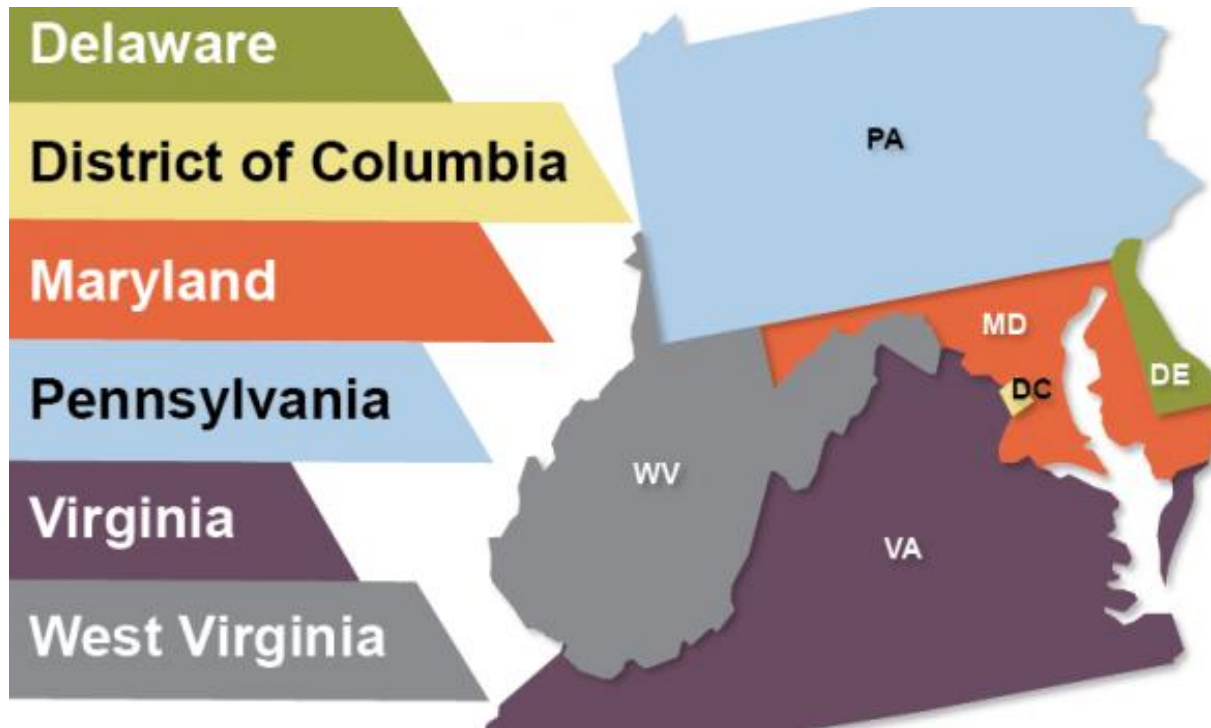
10 Regional Centers (aligned with HHS regions)

**The ATTC Network also includes 4 international HIV centers funded by the President's Emergency Plan for AIDS Relief.*



Central East Region

HHS REGION 3



What We Do

- **Accelerate** the adoption and implementation of evidence-based and promising treatment and recovery-oriented practices and services
- **Strengthen** the behavioral health awareness, knowledge, and skills of the health care and prevention workforce that address the needs of people with behavioral health disorders
- **Foster regional** and national alliances among culturally diverse practitioners, researchers, policy makers, funders, and the recovery community
- **Ensure** the availability and delivery of publicly available, free of charge, behavioral health training and technical assistance to health care and prevention professionals



PTTC Mission



To Strengthen **the Capacity of the Workforce to Deliver Evidence-Based Prevention Strategies and Facilitate Opportunities for Preventionists to Pursue New Collaboration Opportunities, which include Developing Prevention Partnerships and Alliances**



Central East (HHS Region 3)

PTTC



Central East PTTC Specialty Area

Engaging and Collaborating with Primary Care Providers for Substance Use Prevention



Central East (HHS Region 3)

PTTC



Eligibility

Behavioral health and health care providers, consumers, families, state and local public health systems and other stakeholders

Consistent with
Regional, State
and Local
Needs

No cost

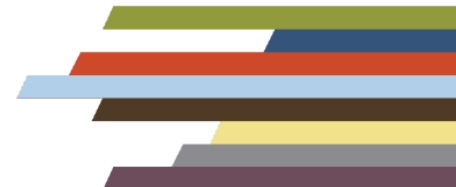
Data Driven

EBPs provided
by Subject
Matter Experts



PTTC Focus Areas

- Opioid/harm reduction strategies
- Suicide prevention and substance use overdoses
- Youth vaping/tobacco
- Youth alcohol and suicide
- Health equity and the elimination of disparities
- Trauma
- Workforce leadership development series-
strategic planning/SPF; data-informed decision-
making; environmental strategies



Other Resources in Region 3



Central East (HHS Region 3)

ATTC

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



Central East (HHS Region 3)

MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



Central East (HHS Region 3)

PTTC



The use of affirming language inspires hope.

LANGUAGE MATTERS.

Words have power.

PEOPLE FIRST.

The PTTC Network uses affirming language to promote the application of evidence-based and culturally informed practices.

Providing Culturally Appropriate Care for LGBTQ Persons of Color



The LGBT Health
Resource Center
of Chase Brexton Health Care

Be proud. Be healthy.

Presenter: Randall S. Leonard, LCSW-C
Chase Brexton Health Care
Baltimore, MD



Chase Brexton Health Care

Because everyone's health matters.

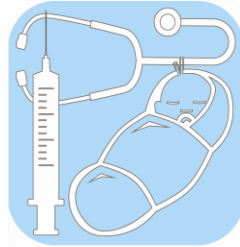
The LGBT Health
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Brexton Health Care



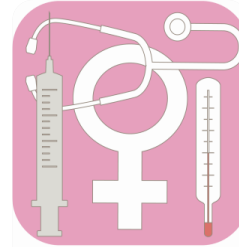
**Adult
Medical Care**



**HIV
Medical Care**



Pediatrics



Ob/Gyn



**The LGBT Health
Resource Center**
of Chase Brexton Health Care
Be proud. Be healthy.



**Behavioral
Health**



Dentistry



Pharmacy



**Case
Management**

CORE INITIATIVES

- ElderPride
- Gender JOY (Journeys of Youth)
- Health Equity Training Team
- LGBTQ+ focused Behavioral Health



Learning Objectives

- a. Describe the strengths, challenges and needs of LGBTQ people of color in Washington DC and DMV region
- b. Explain how to engage and support queer and gender diverse ethnic minority community members “where they are”
- c. Identify three specific tactics to create a welcoming and affirming environment for LGBTQ clients of color



Remember...



I don't have all
the answers



Topics are
extremely
complex



Use of real-life
scenarios



Potential for
trauma
reactions and
negative
responses



LGBTQ People of Color in Washington D.C.

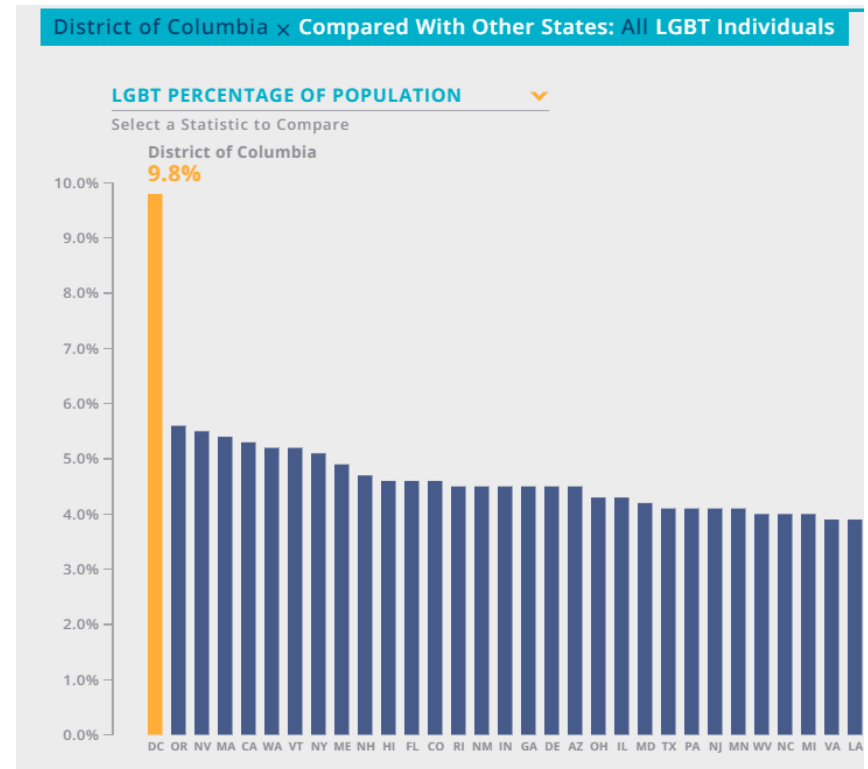


Image: Swerv Magazine, June 2020

Washington D.C. - LGBTQ Residents

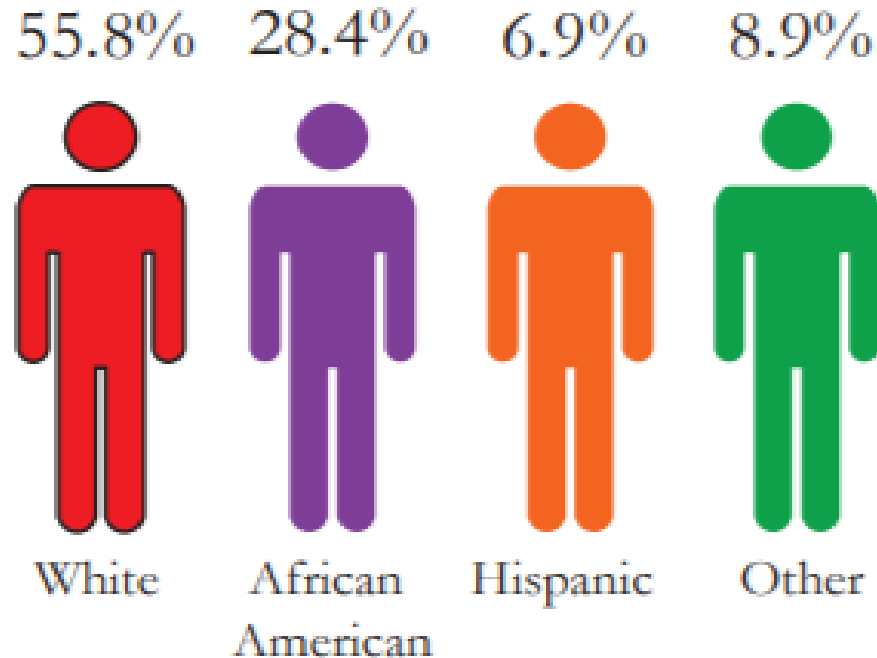
- *At 9.8% DC has the highest population percentage of LGBTQ individuals in the country.*

*LGBT Demographic Data Interactive. (January 2019).
Los Angeles, CA: The Williams Institute, UCLA School of Law.*



Washington D.C. - LGBTQ Populations by Race

LGBT by Race/Ethnicity



DC General Population:
43.6% 49.0% 7.4% 10.4%

Statistically significant - p-value .003

Source: DC Behavioral Risk Factor Surveillance System survey, 2011-2013

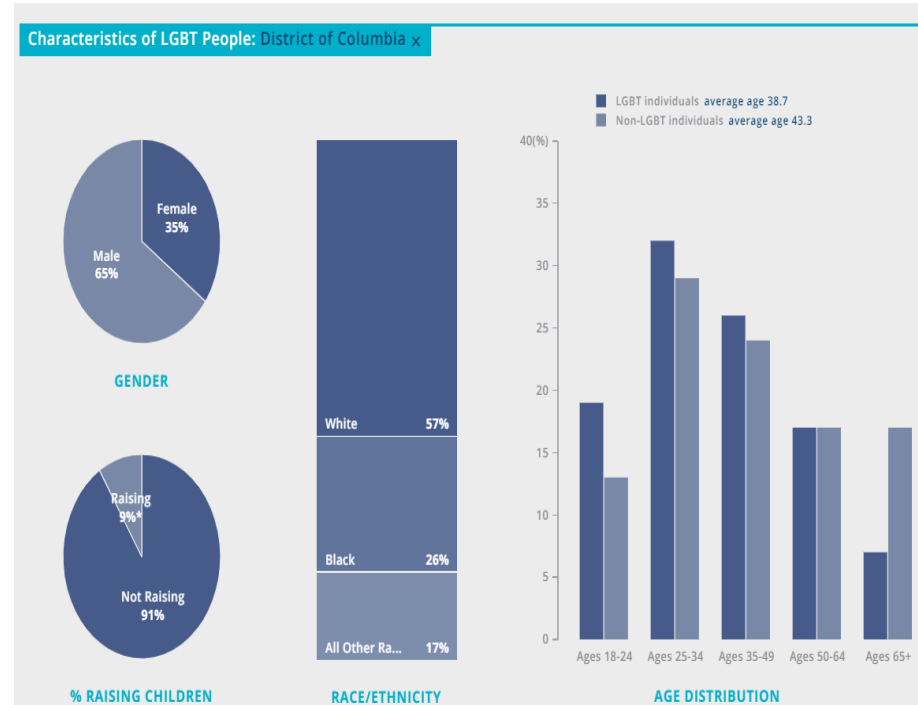


Washington D.C. - LGBTQ Characteristics

- *Gender stats show 65% male and 35% female, but does not show non-binary individuals*
- *Median average age is 38.7 compared to 43.4 for non-LGBTQ identified individuals*

*LGBT Demographic Data Interactive.
(January 2019).*

*Los Angeles, CA: The Williams Institute,
UCLA School of Law.*



Gender Diversity & Sexual Orientation

Sexual Orientation (n = 136)	n (%)
Straight/Heterosexual	39 (27.9)
Queer	24 (17.7)
Gay	17 (12.5)
Another	33 (24.3)
Bisexual	18 (13.2)
Lesbian	6 (4.4)

- Don't assume – not all Transgender individuals are “gay”
- Gender Identity and Sexual Orientation are *two separate categories*

Source: From *Be the Conversation: Baltimore/DC transgender needs assessment study (2016)*



Discrimination Compromises Health

- LGBTQ respondents in states without protective policies:
 - Five times more likely to have two or more mental health disorders than those in other states
- LGBTQ people who experienced “prejudice-related major life events”:
 - Three times more likely to experience serious physical health problem over the following year
- LGBTQ people living in communities with high levels of anti-gay prejudice, *whether personally targeted or not*.
 - Die twelve years earlier than their peers in other communities

Slide credit: National LGBT Cancer Network



Mental Health Disparities

Reported health as fair or poor



Not statistically significant - p-value >.114

Source: DC Behavioral Risk Factor Surveillance System survey, 2011-2013

Reported 15-30 days of physical health not being good which includes physical illness and injury



Not statistically significant - p-value >.218

Source: DC Behavioral Risk Factor Surveillance System survey, 2011-2013

Reported 15-30 days of poor physical and mental health, that prevented usual activities such as self-care, work or recreation



Not statistically significant - p-value =.305

Source: DC Behavioral Risk Factor Surveillance System survey, 2011-2013

Reported 15-30 days of mental health not good, which includes stress, depression and problems with emotion



Statistically significant - p-value<.001

Source: DC Behavioral Risk Factor Surveillance System survey, 2011-2013



2016 U.S. Transgender Survey: Health Care

Respondents faced serious barriers to accessing health care, including:

- **Refusal of care:** 19% reported being refused care due to their gender. Numbers among people of color are higher.
- **Harassment and violence in medical settings:**
 - 28% of respondents were subjected to harassment
 - 2% were victims of violence in their doctor's office
- **Lack of provider knowledge:** 50% of the sample reported having to teach their medical providers about transgender care.

Source: National Center for Transgender Equality



STROBE and Be the Conversation studies: Maryland/D.C. Transgender Needs Assessment (2016)



Trans Discrimination in Maryland (n=132)

- **Workplace Discrimination**
 - 71% harassed on the job
 - 42% fired, not hired, or denied a promotion
- **Discrimination at school**
 - 81% harassed, 38% assaulted, 16% sexual violence
- **Mistreatment in public spaces**
 - 54% were verbally harassed or disrespected in a place of public accommodation or service, including hotels, restaurants, buses, airports and government agencies.
- **Suicidality**
 - 43% reported attempting suicide at some point in their life
 - More than 26 times the rate of the general population of 1.6%



Quiz

1) What is the name of the Black transgender activist born in 1975 who was key in the Stonewall protest?

- A) Ida B. Wells
- B) Harriet Washington
- C) Marsha "Pay it no mind" Johnson
- D) Akwaeke Emezi

2) What describes an individual's patterns of sexual, romantic, and/or emotional attractions, and the sense of identity based on these attractions?

- A) Assigned Sex at Birth
- B) Cisgender
- C) Transmasculine
- D) Sexual Orientation

3) What is a sexual orientation that describes attractions to all gender identities, or all people regardless of their gender identity?

- A) Heterosexual
- B) Pansexual
- C) Gay
- D) Asexual

4) What is the 1990 documentary film that chronicles ball culture and competitions in New York City?

- A) Paris is Burning
- B) Pose
- C) Disclosure
- D) Madonna's 1990 music video, "Vogue"

5) What is a term that best describes "a combination of chromosomes, gonads, hormones, internal sex organs, and genitals that differs from the two binary patterns of male or female"

- A) Intersex
- B) Dysphoria
- C) Transsexual
- D) Skoliosexual

6) A transgender woman attracted to cisgender men may indicate her sexual orientation as:

- A) Homosexual
- B) Heterosexual
- C) Pansexual
- D) Any of the above, or even something else



Quiz ANSWER KEY

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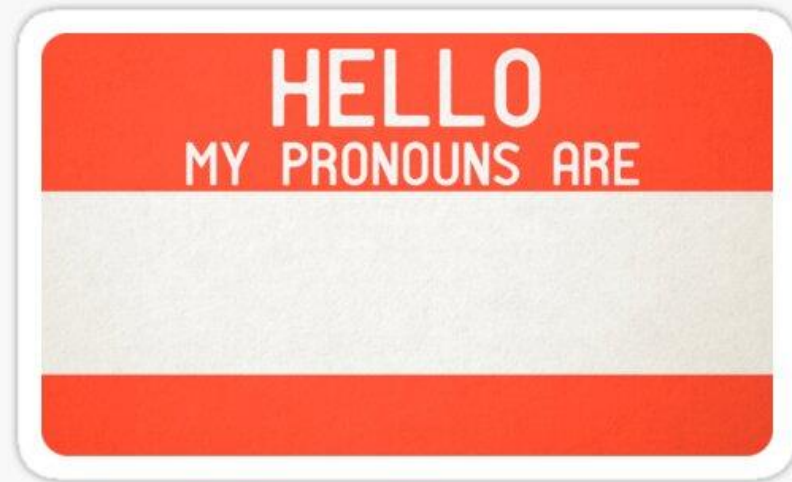
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Labels and Terms



The Unlearning Section:

Why so many letters in LGBTQIA+ ?

- Labels are the foundation of cognition (we cannot think without labels)
- Resonance with labels occur on an individual level
- Individual and cultural differences lead to numerous labels, many may appear as synonymous
- “Label fatigue”: Our brains prefer automatic associations conserve energy
- Amygdala (security guard) tries to protect our core world view, utilizes emotions to push against new information
- Empathy is useful; understanding importance of terms to people



Important BIPOC Terms

** DO NOT ASSUME THESE TERMS, some may carry derogatory meanings or may change over time. It's important to know their meanings, and let your clients define themselves

- Asexual: experiencing little to no sexual attraction to others and/or a lack of sexual interest. AKA "Ace"
- BIPOC – "Black and Indigenous People of Color"
- Butch – a person who identifies themselves as masculine, originally used as a derogatory term towards lesbians (reclaimed)
- Demisexual: little or no capacity to experience sexual attraction until a strong romantic connection is established. AKA "Demi"
- "Down Low": individuals who identify as heterosexual but who secretly have sex with other people of the same gender. Originated in communities of color.
- Femme: Someone who identifies as feminine physically, mentally, or emotionally
- Fluidity: describes an identity that may change or shift between or within the mix of options available
- Pansexual: experiences sexual, romantic, physical, and/or spiritual attraction for members of all gender identities and expressions

<https://www.itspronouncedmetrosexual.com/2013/01/a-comprehensive-list-of-lgbtq-term-definitions/>



Important BIPOC Terms (cont.)

- Polyamorous (Poly) : desire and practice for having ethical, honest, and consensual non-monogamous relationships
- QPOC – “Queer People of Color”
- Queer – Umbrella term for non-heterosexual and/or gender diverse individuals. May not be embraced by all LGBTQ people depending on historical context
- Same Gender Loving (SGL): often utilized in African American and Black community to describe non-heterosexual orientations without utilizing terms of European descent
- Stealth: a trans person who is not “out” as trans and is perceived by others as cisgender
- Stud: most commonly used to indicate a Black/African-American and/or Latina masculine-presenting lesbian or queer woman
- Two-Spirit: umbrella term traditionally utilized within Native American communities to recognize individuals who possess qualities or fulfill roles of both feminine and masculine genders

<https://www.itspronouncedmetrosexual.com/2013/01/a-comprehensive-list-of-lgbtq-term-definitions/>



Colonization and Gender



Effects of Colonization

The cognitive needs of capitalism include *“measurement, quantification, externalization (or objectification)... so as to control the relations among people and nature... in particular the property in means of production”*.

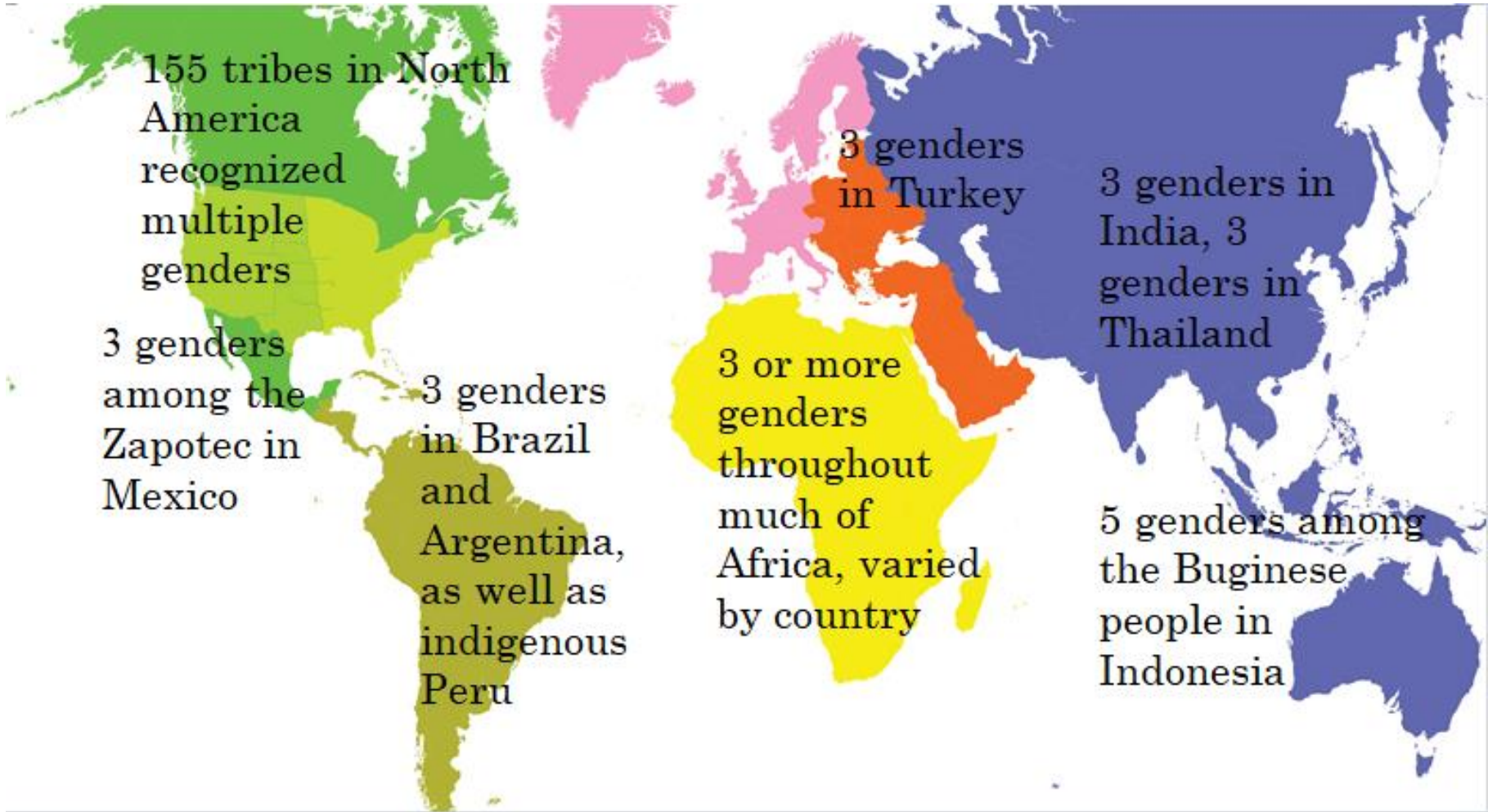
- Colonizing transformed Indigenous people, Indigenous cultural practices, and Indigenous land into “property”
- World population was differentiated into two groups: superior and inferior
- Colonizing brought “Euro-centered” ideals to cultures
 - Result has been the erasure of many cultural gender identities

Dr. Maria Lugones, The Coloniality of Gender



Multiple Genders – Globally Recognized

https://www.pbs.org/independentlens/content/two-spirits_map-html/





People whose **gender identity** remains the same as their **sex assigned at birth** are **cisgender**.

("CIS" = "on the same side")



People whose **gender identity** differs from their **sex assigned at birth** are **transgender**.

("TRANS" = "across or beyond")



Gender Diversity Categories

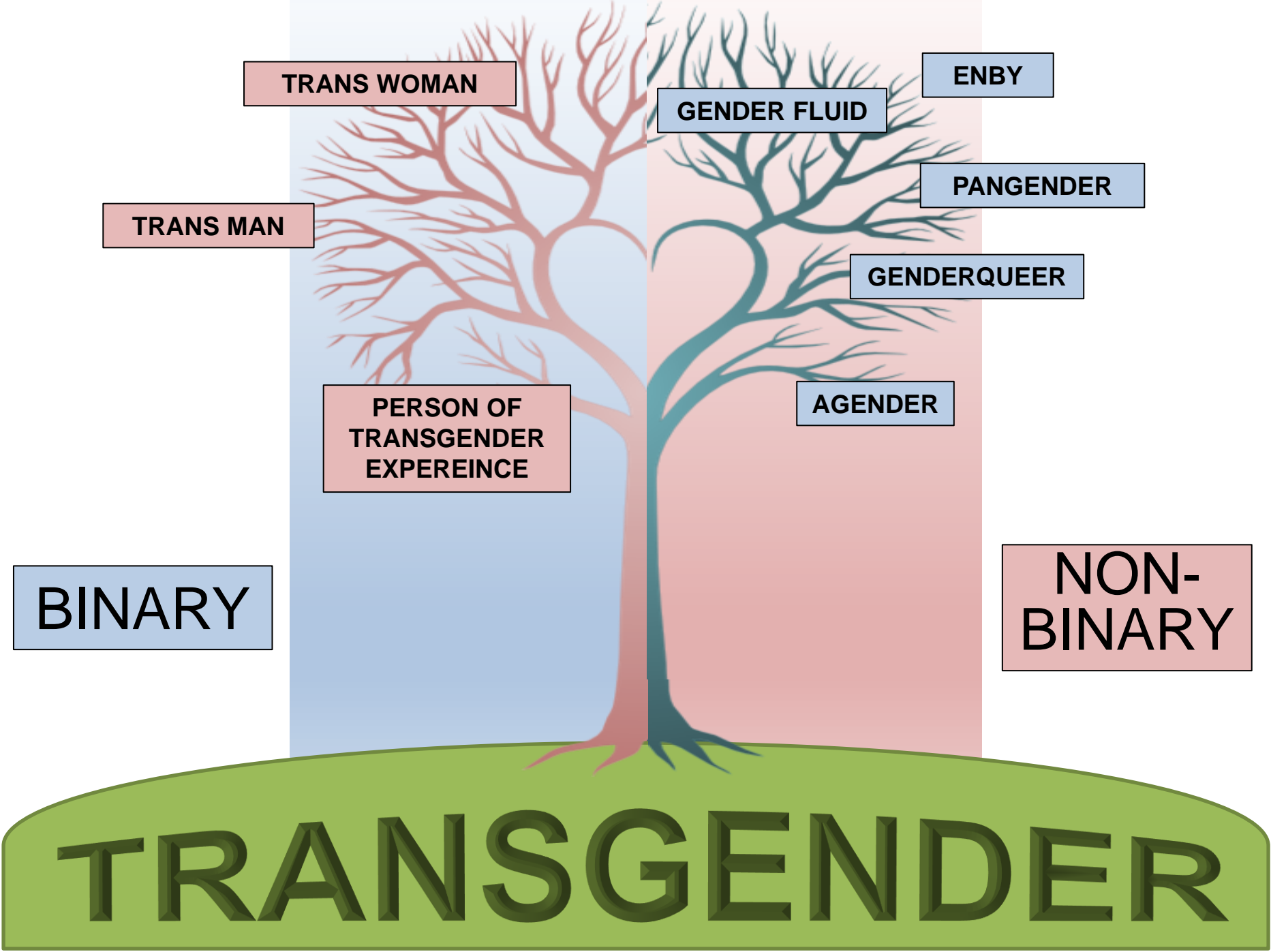
- Genotype: genetic composition
- Phenotype: physical traits
- Hormones: chemical messengers
- Self Attestation
- Assigned at Birth



What It's Like To Be Intersex

<https://youtu.be/cAUDKEI4QKI>





Non-Binary Identities

- Generational culture shift away from fixed identity labels toward embracing ambiguity and fluidity
- With sophisticated language evolution, individuals are better able to describe their lived experiences

Emerging Terms:

- Gender Fluid
- Non-Binary (ENBY)
- Genderqueer
- Agender
- Pansexual (Sexual Orientation)



Photo: Alok Vaid Menon



Gender Euphoria



Photo: Charlie Kilborn

“I wasn't ‘born in the wrong body.’ If anything, I was born with a testosterone deficiency that my primary care physician was happy to prescribe me something for lol.

Death to the ‘born in the wrong body’ narrative. My body is not wrong. How could it be? I mean, it does exactly what bodies are supposed to do... A shell shielding a pretty amazing soul... What could possibly be wrong about that?”



Transition: The process of changing external gender presentation to align with one's internal sense of authentic self

- Transition can be social, legal, medical (HRT) and/or surgical
- Clinician's role is to eliminate dysphoria, following the patient's lead about their needs
- Non-binary individuals may seek some physical changes but avoid others
- May be a goal that is achieved and complete, or a lifelong process of living authentically day to day

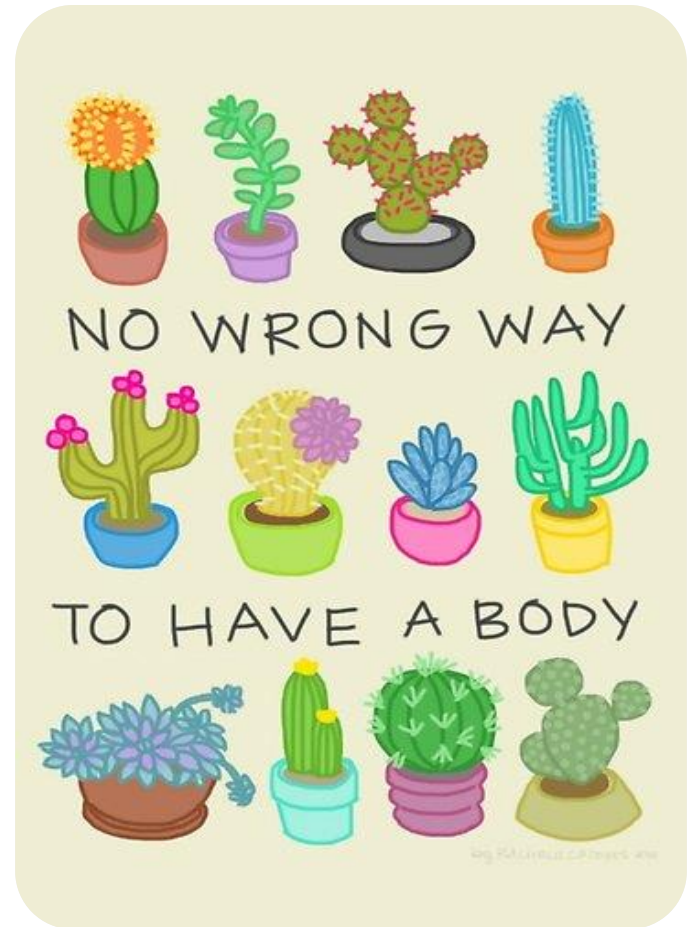


Image: Rachele Cateyes



At Chase Brexton We Affirm

Your Gender is

VALID

Your Transition is

HONORABLE



Take a 10 Minute Break

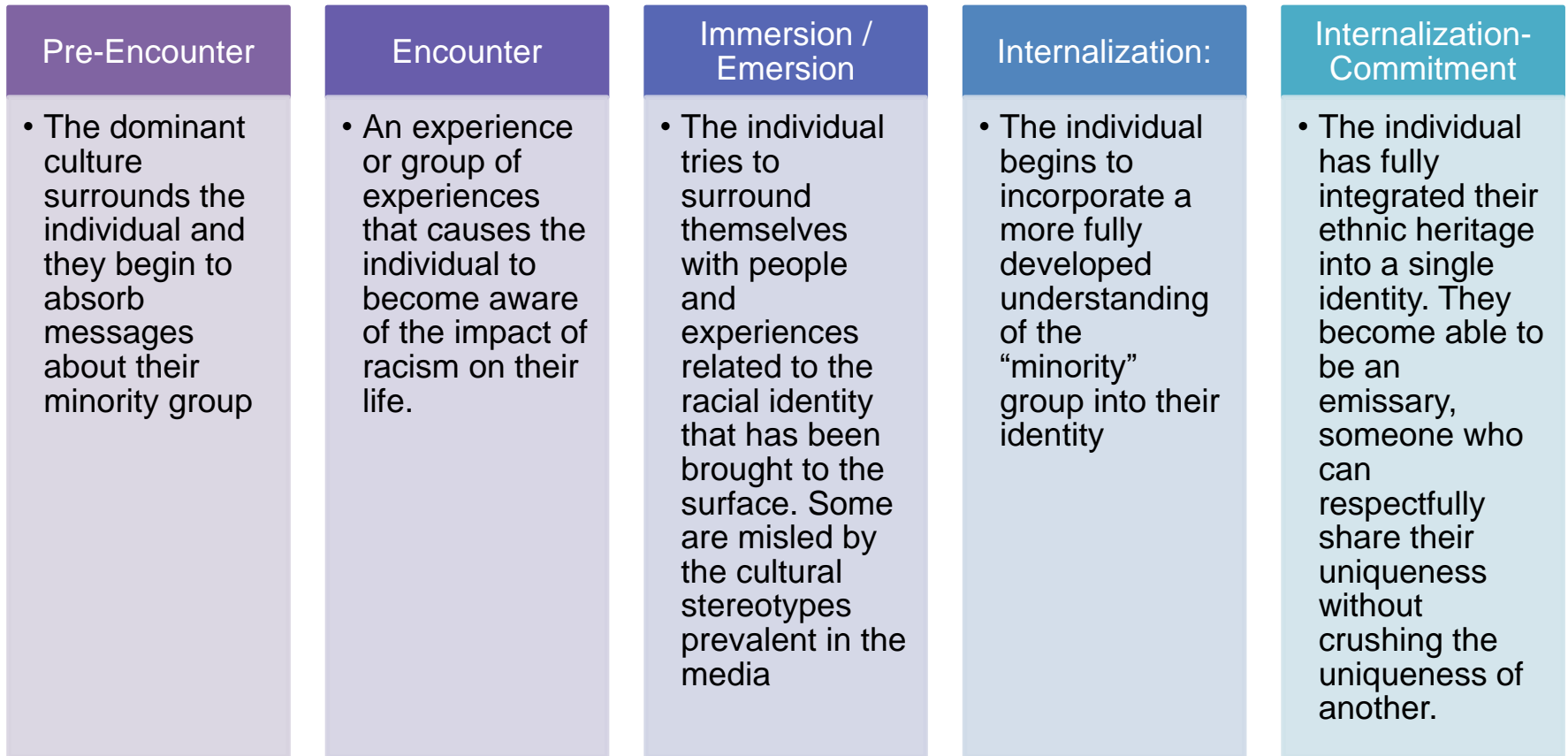




Conceptual Framework



Five Stages of Racial Identity Development



Based on the *Psychology of Nigrescence* by William Cross



African American Psychology

AFRICAN AMERICAN PSYCHOLOGY. Table 1. European American-centered vs. African-centered ideals

European American-Centered Ideals	African-Centered Ideals
<p><i>Individualism:</i> The focus is on the individual—her or his interpretation of events and reaction to changing situations. The individual is the unit of analysis in research</p>	<p><i>Collectivism:</i> The focus is on the collective or the “tribe.” One cannot understand an individual’s functioning in a way that is divorced from the group. The unit of analysis in research is the group</p>
<p><i>Materialism:</i> An emphasis is placed on material reality, and the acquisition of material goods. Material reality is that which is observed, manipulated, and quantified</p>	<p><i>Spiritualism:</i> An emphasis is placed on spiritual reality, and the development of spiritual congruence with the Creator. The most important aspects of human existence are unseen, unobservable, and nonquantifiable</p>
<p><i>Control of nature:</i> An emphasis is placed on controlling nature—through science and development</p>	<p><i>Harmony with nature:</i> An emphasis is placed on harmonizing with nature, through a spiritual connection with the things of the world</p>
<p><i>Objective:</i> An emphasis is placed on purporting to be “value free” and “unbiased” in fact finding</p>	<p><i>Subjective:</i> An emphasis is placed on acknowledging values and biases and using these to bring about the liberation of African people</p>

Fairchild, Halford. (2000). African American Psychology.

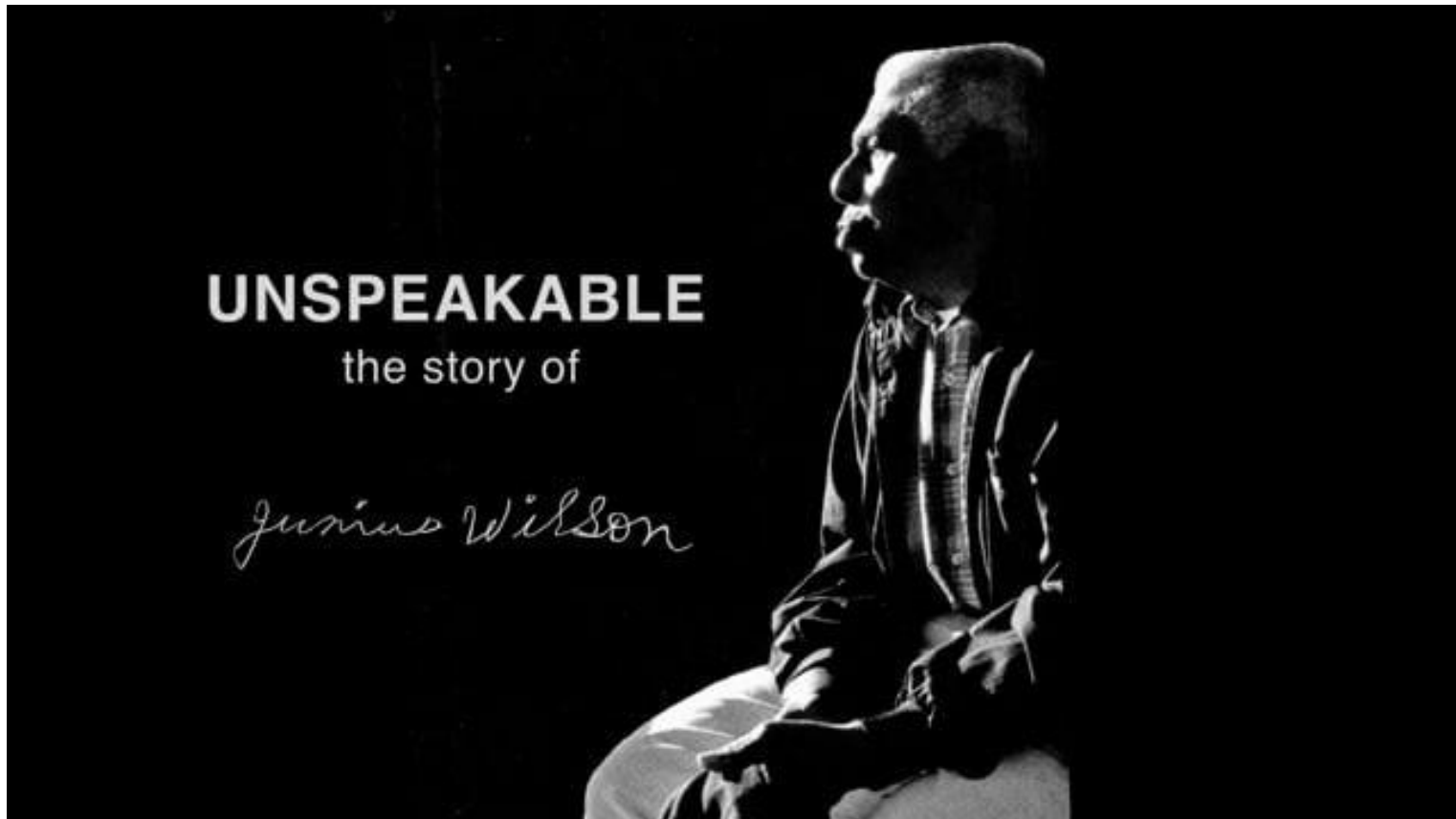


What is Cultural Humility?

- Other-centered interpersonal approach
- Ethical orientation of service delivery
- A commitment to understanding power dynamics
- Requires us to take responsibility for our interactions
- Acknowledges the limitations of our own cultural perspective
- “Borrow the client’s glasses”



Pathologizing Without Cultural Humility



Junius Wilson - <https://vimeo.com/224136865>

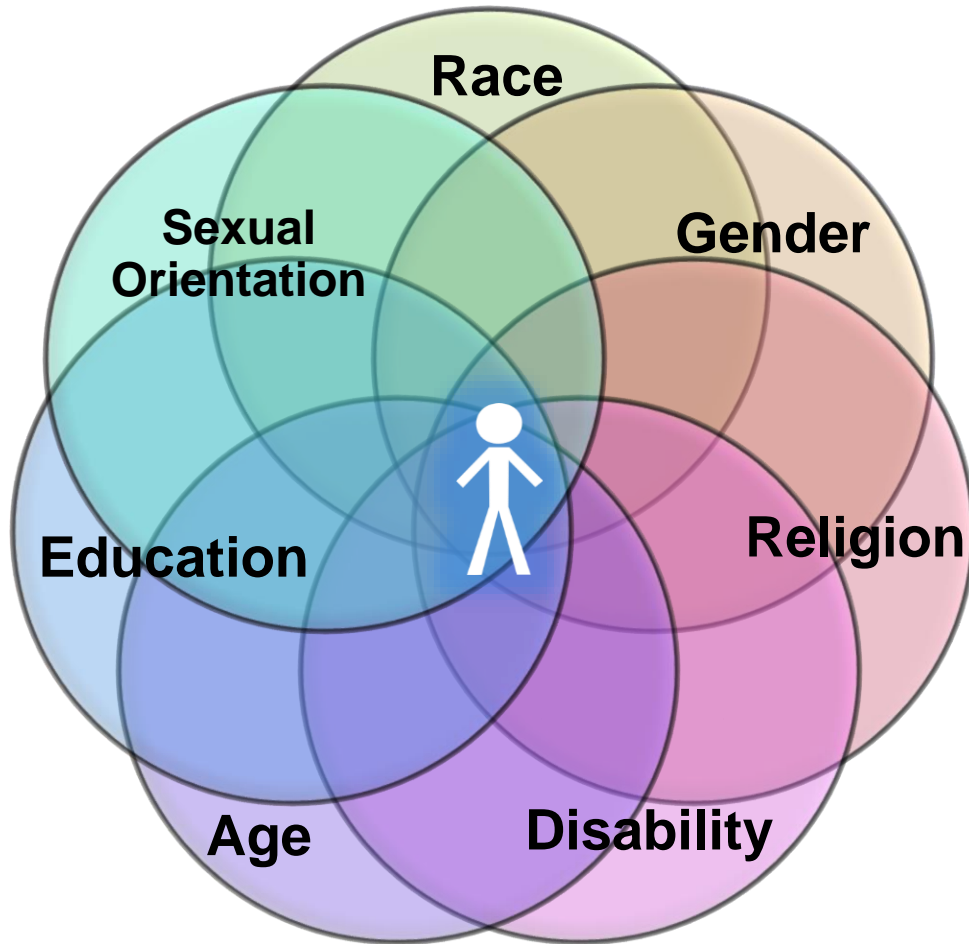


Intersectional Lives, Intersectional Needs

“Intersectionality”



Dr. Kimberle Crenshaw, 1989

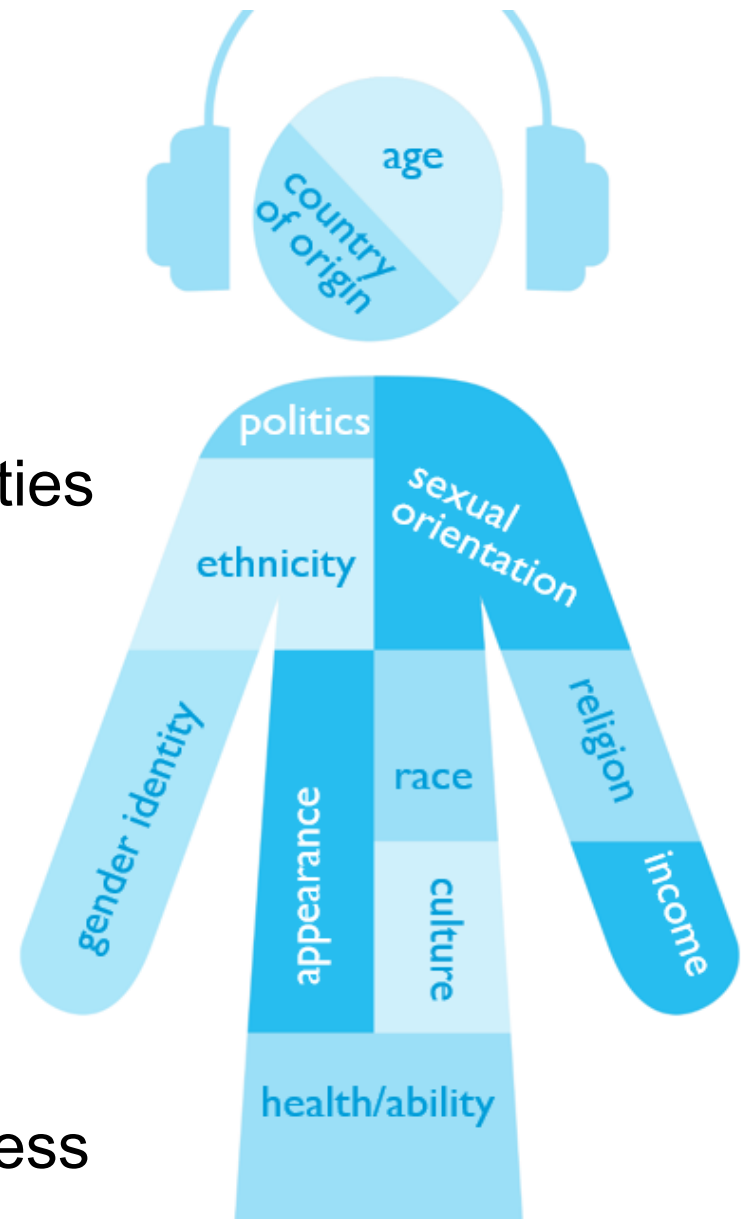


- Helps us describe relative personal and structural power
- “We live at the crossroads of our identities.”
- Multiple marginalization = compound discrimination
- Cultural Humility approach can help bridge rapport across power dynamics



Multiple Facets: One Identity

- People possess multiple, layered and compound elements of self
- How an individual's multiple identities interact and intersect affects their experiences and shapes their perspectives
- “Intersectionality” helps clarify the ways in which a person can simultaneously experience privilege and oppression.
- “Privilege” = More Power and Access



Slide credit: National LGBT Cancer Network

Sources: Crenshaw, Kimberle, 1989; Intergroup Resources, 2012



Intersectionality & “Coping”

- QPOC Code Switching: changing speech patterns, mannerisms, body language, or even information provided to fit the dominant cultural expectation
- How does privilege set the cultural expectation in support settings on appropriate communication?



Intersectionality & “Coping”

- “John Henryism” : reacting to prolonged social discrimination with higher work efforts, which then compromises health outcomes.
- Superwoman Schema: Feeling obligation to present an image of strength, suppress emotions, resistance to being vulnerable, drive to succeed despite limited resources, expectation of “helping or leading others” (Allen et. Al, 2019)



What defines “Support”?

- Two studies on LGBTQ+ social support networks found that participants defined support as:
 - socializing
 - having access to LGBTQ+-related information, including comprehensive sexual health education
 - being introduced into the community by others

(Nesmith, Burton, & Cosgrove, 1999) and (D’Augelli et al., 2005; Elizur & Ziv, 2001).



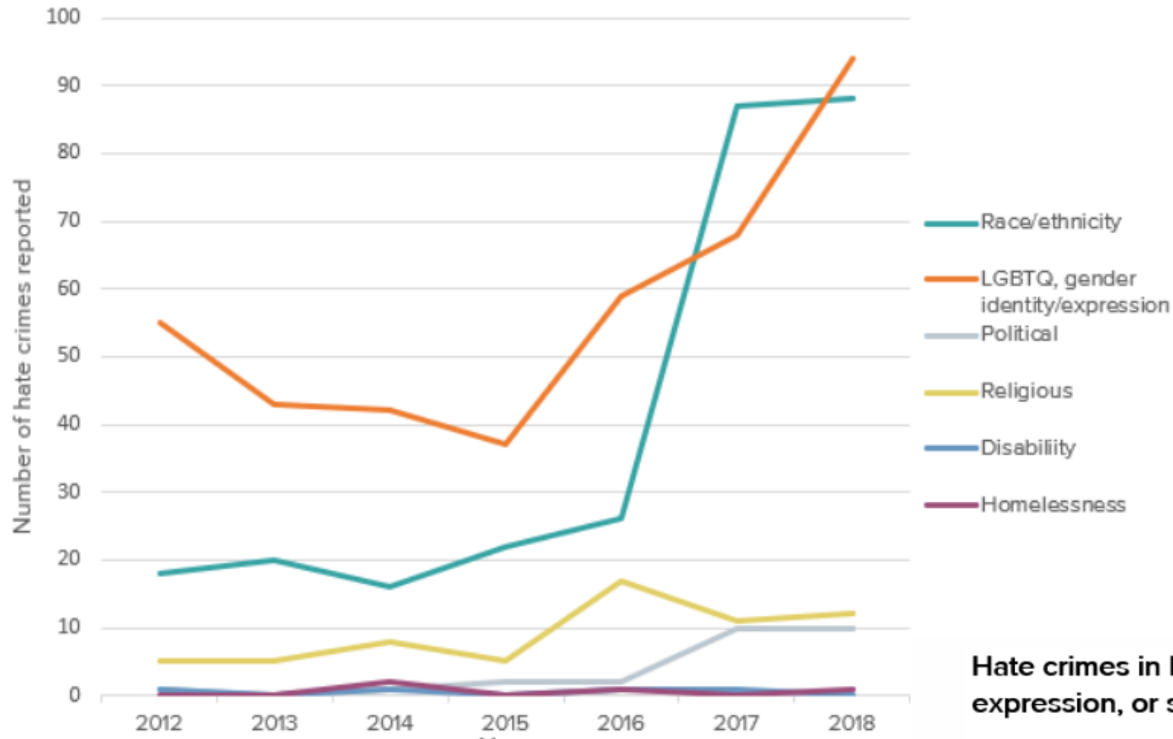
Barriers to Receiving “Support”

- Being “Out” is not always possible for many, many reasons
- Geographic location can limit access
- Online support can be an entryway for those who aren’t “out” or for people with specific cultural identities.

How could you help a client navigate access to online support?

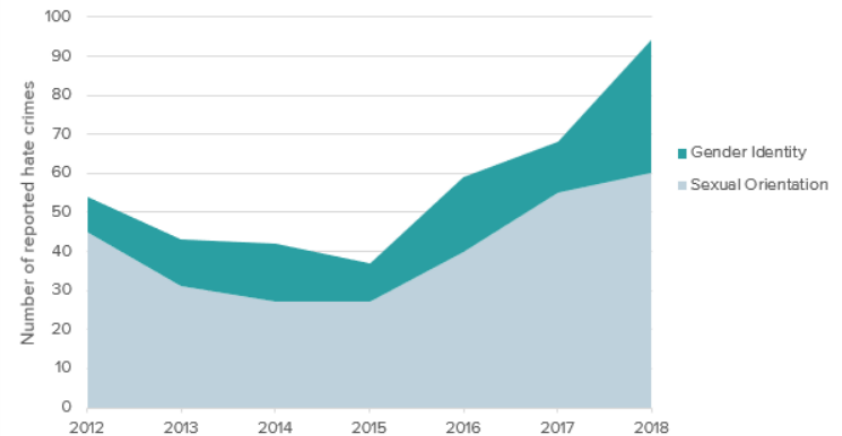


Reported hate crimes in D.C. (2012-2018) by type of hate bias



D.C. Hate Crimes

Hate crimes in D.C.: Bias against sex, gender identity or expression, or sexual orientation (2012-2018)



Source: Hate Crimes Open Data File, MPD.

D.C. Policy Center | dcpolicycenter.org



Community Concept: Seeking Help

- » People from a **dominant** (heterosexual, cisgender) culture tend to assume that if they were a victim, they would have an automatic right to help
- » If you are a person from a **subdominant** (LGBTQ) culture, you may not have experienced agencies as helpful in the past, so you may not believe that help is available to you and you may not seek out help

Adapted from the YWCA of Greater Cincinnati/Northern Kentucky



Community Concept: Safety

- For LGBTQ victims, “safety” is more than protective orders or safety plans
- Focus groups suggest that those “safety” measures rate lower than **the ability to feel safe to be oneself**
 - To feel believed
 - To be authentic
 - To feel unafraid of homophobic, heterosexist responses and attitudes of service providers

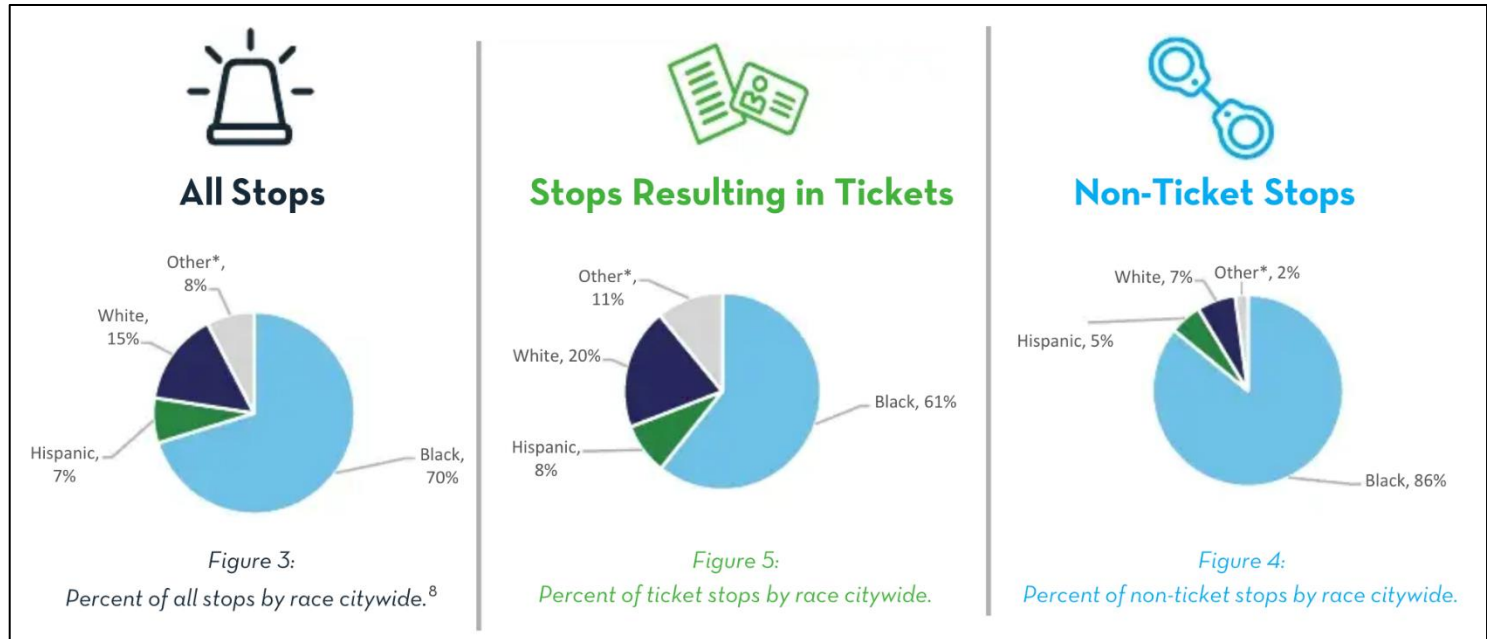
Adapted from the YWCA of Greater Cincinnati/Northern Kentucky



DC Police search and frisk black people 6 times more often during stops, data shows

MPD's most recent police stop data indicates little has changed with the racial imbalance of stop and frisk in the District.

D.C. Police: Unequal Protection



- D.C. is only 47% African American, but Black people make up 70% of all police stops.
- Between 2013-2019, 16 Black people were killed by DC police.
- Police homicide rate is 11.1 times higher for Black than for white residents

Source: Metropolitan Police Department



Community Concept: Police

LGBTQ victims of violence may be extremely reluctant to involve police, due to:

- Deep-rooted belief that police are typically homo/bi/transphobic
- Fear of police misjudging primary aggressor, or minimizing intimate partner violence to problems between “two friends” or “roommates”
- Fear of not being believed that their danger is real
- Uncertainty that LGBTQ intimate partner violence qualifies under legal definition of “domestic violence”
- Awareness of the over-incarceration of LGB and (especially) T folks, heightened for Black and Latinx people
- Concerns about police brutality, particularly when one or both partners are people of color

Adapted from the YWCA of Greater Cincinnati/Northern Kentucky



Community Concept: Service Providers

Agency assurances that services are for everyone may not mean much to a LGBTQ person.

- LGBTQ people tend to assume service providers will be unwelcoming or hostile until proven otherwise
- LGBTQ people often believe services do not include their concerns unless explicitly targeted toward them
- LGBTQ people historically have been offered “help” to become “normal”, may automatically be suspicious of help from any institutional representative

Adapted from the YWCA of Greater Cincinnati/Northern Kentucky



SPOTLIGHT: Intimate Partner Violence & Manipulation of Power



Sexual assault and intimate partner violence
Racism, sexism, and homo/bi/transphobia



LGBTQ IPV Survivors: The Struggle Is Shared

- Survivors of oppression are treated brutally in multiple contexts; brutality is normalized and expected
- Aggressors and victims are both struggling to survive amid institutions that violently dehumanize them
- Gaslighting is a shared experience as daily humiliations and microaggressions are denied by people outside the community
- Violence, trauma, and grief are embedded in living as an individual with marginalized identities; these burdens are compounded for those who are multi-marginalized



Effective Interventions



**“They are too young
to know their gender!”**



Image credit: original art by Sophie Labelle



Let's Talk About Pronouns!

Gender-binary pronouns:

- **She, Her, Hers**
 - (Alex ate **her** food because **she** was hungry.)
- **He, Him, His**
 - (Alex ate **his** food because **he** was hungry.)



Gender-neutral pronouns:

- **They, Them, Theirs**
 - (Alex ate **their** food because **they** were hungry.)
- **Ze, Hir**
 - (Alex ate **hir** food because **ze** was hungry.)
- **Just use my name!**
 - (Alex ate **Alex's** food because **Alex** was hungry.)

Image credit: Original Art by Alice Che



Misgendering and “Deadnaming”

- Can “out” someone and make them emotionally or physically unsafe
- Feels humiliating and disrespectful
- Cumulative impact of daily misgendering increases depression and anxiety, degrades well-being
- Damages your rapport, makes the person wonder if you are clueless or cruel
- These mistakes can contribute to someone being so uncomfortable they do not get the care they need



Image: Original art by Sam Moss



How to react when you misgender a trans person



Don't make
the person
you hurt have
to comfort
YOU about
your mistake.

Image credit: original art by Sophie Labelle



Mistakes Will Happen...

- Apologize if you misgender someone and support staff in correcting each other. If you make a mistake, briefly correct yourself and then move on.
- If someone else makes a mistake, correct them. It is polite to provide a correction, whether or not the person whose pronoun was misused is present.
 - This means saying something like "Alex uses the pronoun she," and then keep it moving.



Shame vs Guilt

- Brené Brown defines “shame” as “the intensely painful feeling or experience that we are flawed and therefore undeserving of love or belonging
- Guilt can be defined as “the recognition that our behaviors do not align with our personal values”



Source: Brené Brown



“Minority Stress” Treatment Principles

- Normalize adverse impact of targeted population (“minority”) stress
- Facilitate emotional awareness, regulation, and acceptance
- Empower assertive communication
- Restructure minority stress cognitions
- Validate unique strengths of LGBTQ people
- Foster supportive relationships and community
- Affirm healthy, rewarding expressions of sexuality and gender.

Alex Keuroghlian, 2018 *Suicide Risk and Prevention for LGBTQ People*, Webinar for The Fenway Institute



Socially-Engineered Trauma

- Traumatic events rooted in social forces of oppression and inequality
- Examples include cisgender-heteropatriarchy, or legal, economic, and social power held by heterosexual cisgender males
- Therapy with gender diverse individuals can focus on actual oppression rather than just suffering caused by it

(Shaia et. al 2019)



Socioeducation Interventions

- Socioeducation – process of “demystifying” socially engineered trauma through raising awareness of oppressive macro systems (Shaia et. al 2019)
- Examples
 - Connecting clients with grassroots social justice movements
 - Providing education on economies or political movements
 - Referring to area advocacy groups



SHARP Framework

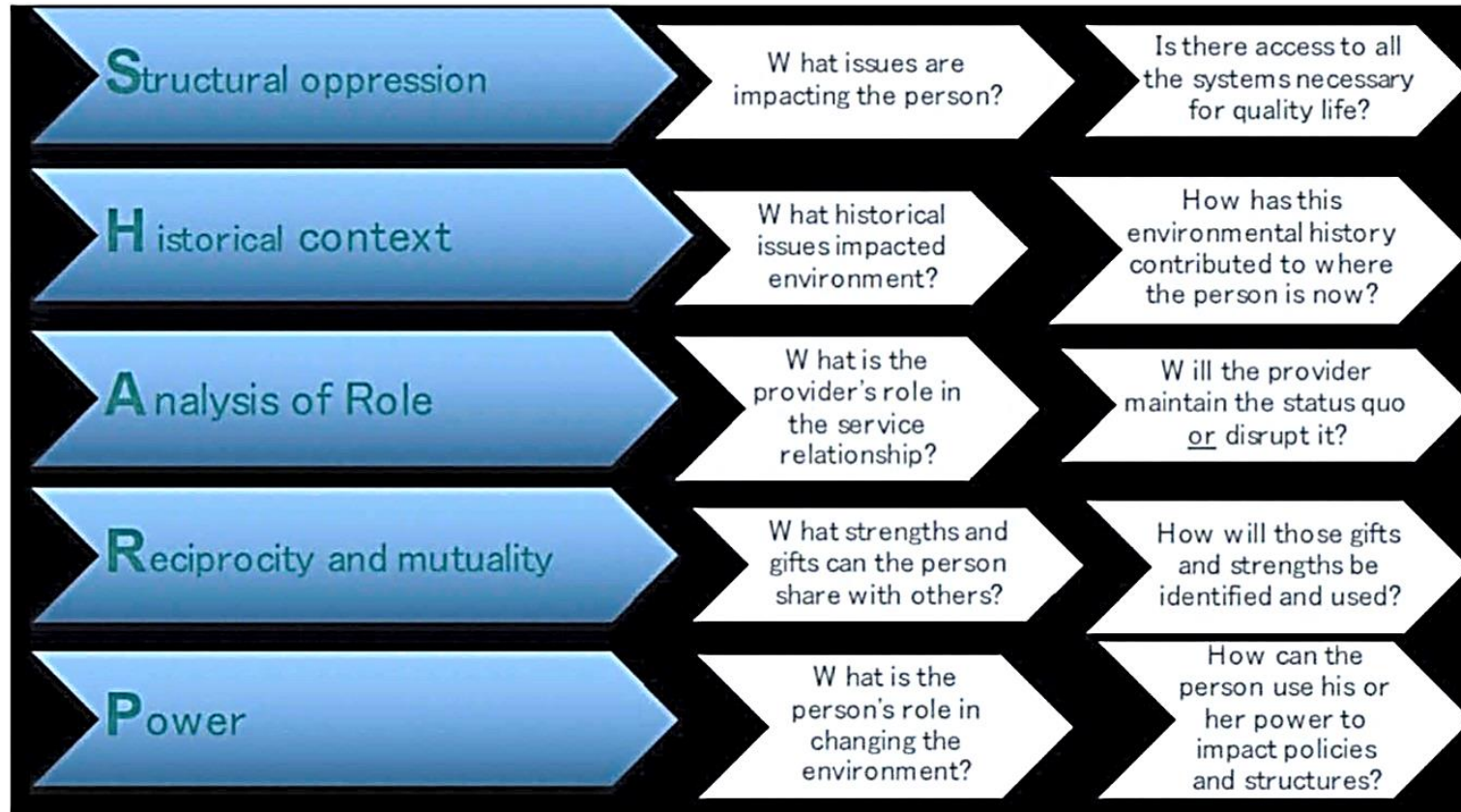


Figure 1. The SHARP framework (Shaia, 2019).



What is Harm Reduction?

- Practical strategies intended to save lives
- Avoids abstinence-only approaches to managing risky behaviors
- Non-judgmental, non-coercive services
- Resources for people who do not abstain from risk

Examples

- Seat Belts
- Contraceptives
- Nicotine patches
- Syringe exchange programs
- Methadone and buprenorphine
- PrEP (Pre-Exposure Prophylaxis)



Why It Works

- Abstinence-based approach can be incompatible with LGBTQ counterculture-culture
- Mitigates LGBTQ community value of medical/service provider mistrust
- Acknowledges the cultural centrality of drug use in LGBTQ populations
- Allows client to set pace, extent, and routes of behavior change
- Empowers the client as the expert about their own experiences and needs



DC Harm Reduction Example: HIPS



- “Helping Individual Prostitutes Survive”
- Harm Reduction project providing non-judgemental and self-determined services to sex work and drug use communities
- Offers syringe exchange, health services, condom distribution, and direct outreach during the day and night
- Directly engages sex workers and drug users with intent of challenging structural barriers to care and safety

TELEPHONE NUMBER

ADDRESS

Office: [202-232-8150](tel:202-232-8150)

906 H Street NE

Hotline: [1 \(800\) 676-4477](tel:18006764477)

Washington D.C. 20002



Image HIPS, 2020



Emotionally Focused Therapy (EFT)

- Originally designed for short-term treatment in relationship therapy
- Focuses on underlying thoughts, feelings, and unmet attachment needs within relationship bonding in the present moment
- EFT allows LGBT individuals to process internal shame, as well as providing psychoeducation on uses of emotions.
- “Pride is Anger aligned with Joy”



Acceptance and Commitment Therapy (ACT)

- Encourages individuals to “accept” thoughts, feelings, and predicaments outside of their control, rather than feeling shamed
- Encourages individuals to “commit” themselves to their personal values or aspirations to provide motivation for approaching problems the client can control
- Combines with mindfulness activities to calm central nervous system and increase cognitive flexibility



Validate Disenfranchised Grief

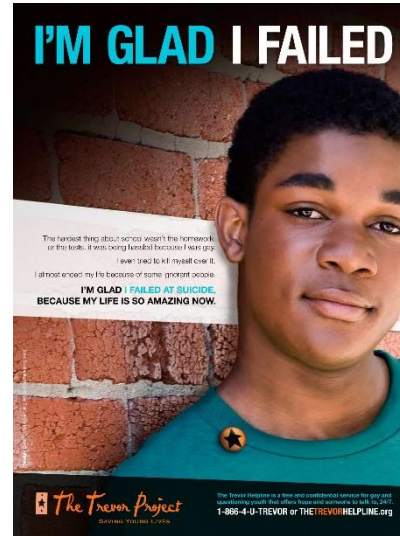
- LGBTQ people who have lost a partner/spouse or other loved one often do not have the same types of support as non-LGBTQ people
- LGBTQ people may feel they cannot openly acknowledge or publicly mourn a partner, or may find that others minimize their loss—a problem often referred to as disenfranchised grief
- Such disenfranchised grief is common among those who survived the HIV/AIDS crisis but lost so many of their peers
- Losing a loved one from suicide further disenfranchises grief because of the stigma associated with mental illness and suicide
- In addition, disenfranchised grief itself may be a risk factor for suicide

Alex Keuroghlian, 2018 Suicide Risk and Prevention for LGBTQ People, Webinar for The Fenway Institute



The Trevor Project

- Suicide prevention for LGBTQ people <25 yo
- Founded in 1988
- Crisis intervention via phone, text, IM, virtual hang outs
- Research, education and training, media prevention campaigns



Crisis Intervention & Suicide Prevention Services



TREVOR LIFELINE
24/7/365 | 866.488.7386



TREVOR CHAT
Everyday | 12pm-7pm PT
3pm-10pm ET



TREVOR TEXT
M-F 12-7pm PT, 3-10pm ET
text "Trevor" to
1.202.304.1200

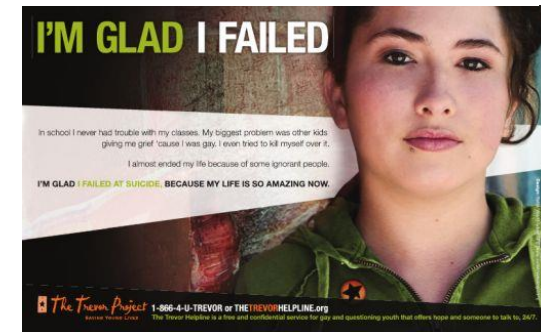


TREVORSPACE
24/7/365 | trevorproject.org
a social networking site for
LGBTQ youth & allies.



**THE TREVOR
RESOURCE CENTER**
thetrevorproject.org/resources
General info & FAQ.

www.thetrevorproject.org



Shawna Murray-Browne, LCSW-C

- Decolonizing Black Thought in Therapy
- Provides “liberation focused” counseling and classes steeped in cultural awareness
- “Kindred Wellness” located in Baltimore, MD





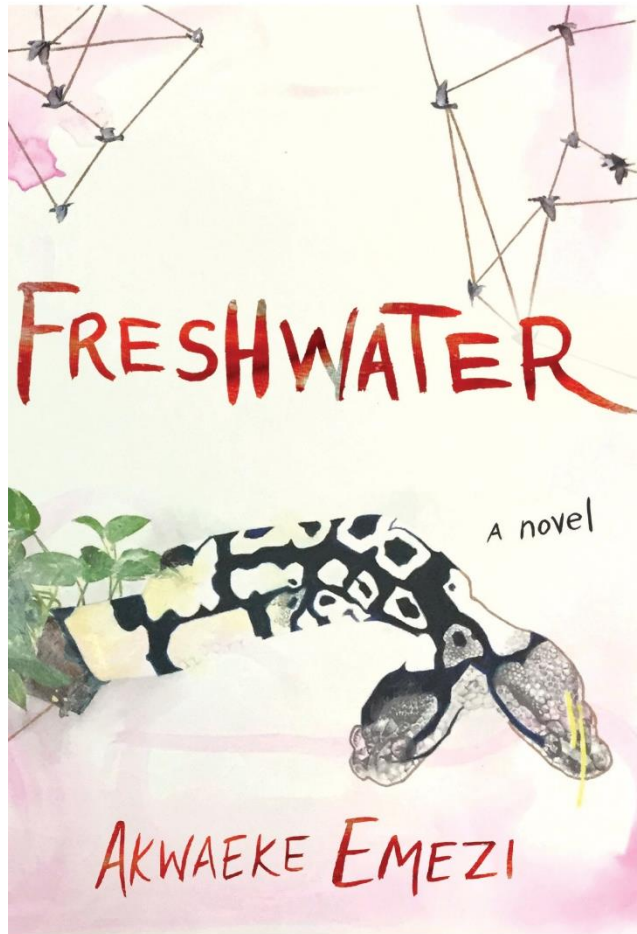
DR. MARÍA LUGONES
PROF. OF COMP. LITERATURE ~ SUNY BINGHAMTON

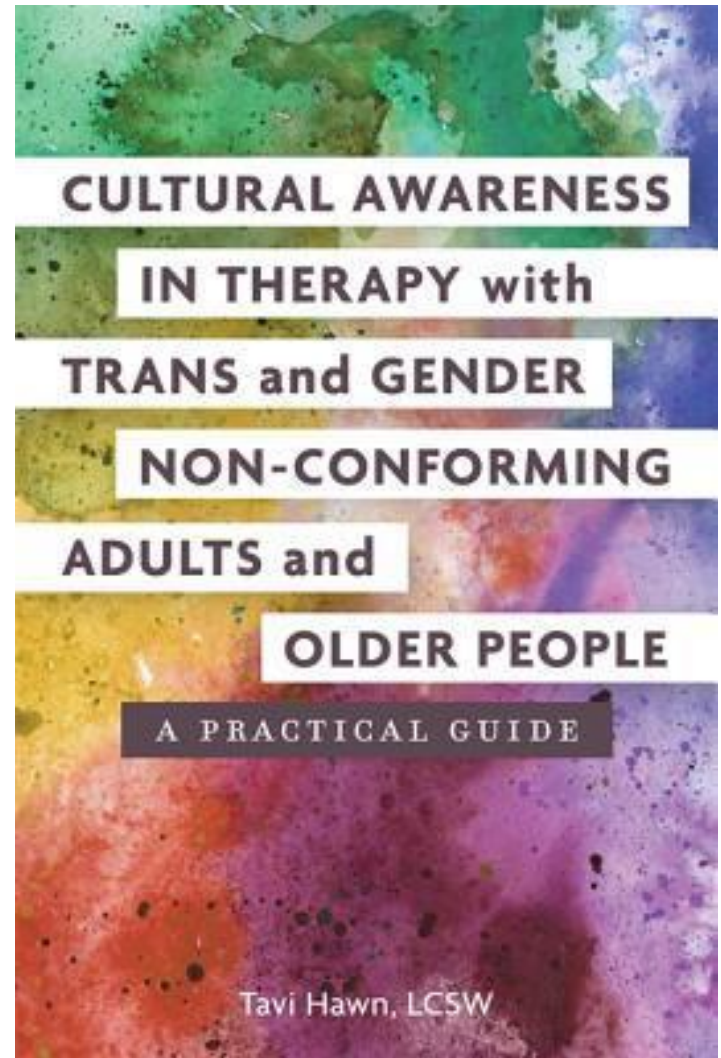
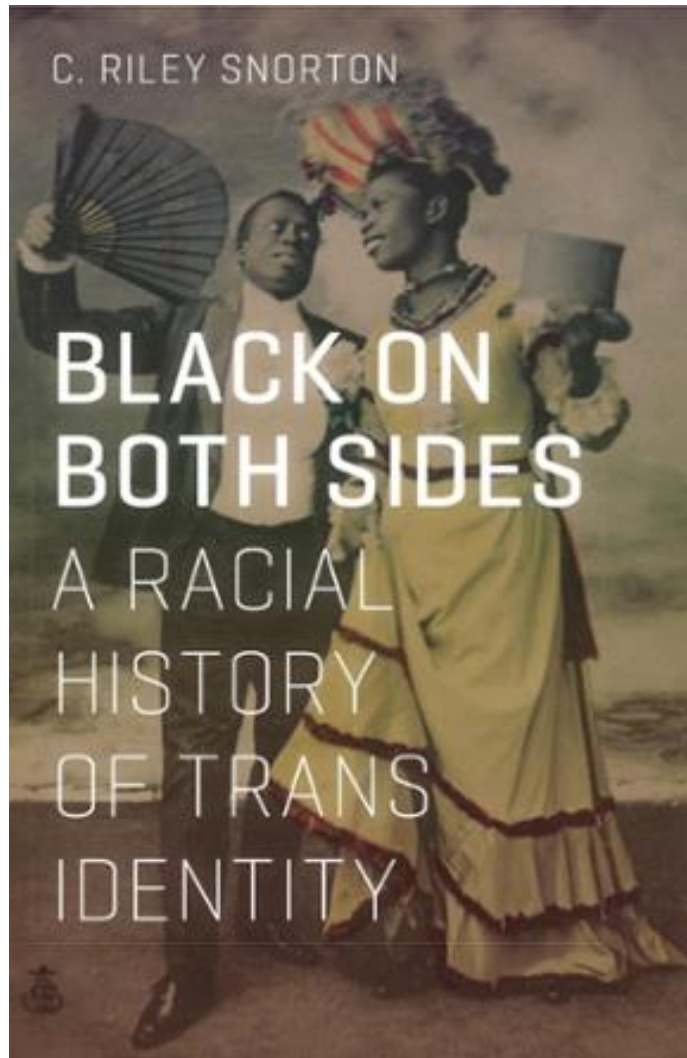
The Coloniality of Gender

- https://globalstudies.trinity.duke.edu/sites/globalstudies.trinity.duke.edu/files/file-attachments/v2d2_Lugones.pdf



Important Books





Socially-Engineered Trauma and a New Social Work Pedagogy: Socioeducation as a Critical Foundation of Social Work Practice

Shaia, Wendy & Avruch, David & Green, Katherine & Godsey, Geneen. (2019). Socially-Engineered Trauma and a New Social Work Pedagogy: Socioeducation as a Critical Foundation of Social Work Practice. Smith College Studies in Social Work. 1-26. 10.1080/00377317.2019.1704146.



Chosen Name Use & Mental Health



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Adolescent health brief

Chosen Name Use Is Linked to Reduced Depressive Symptoms, Suicidal Ideation, and Suicidal Behavior Among Transgender Youth



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Thank You!



The LGBT Health
Resource Center
of Chase Brexton Health Care

Be proud. Be healthy.

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