



# Health Equity for Queer Folks: How to be the best helper we can be

Holly Hughes LCSW & Liam Chavez

---

# Meet Liam (he/him)



# Meet Holly (she/her)



# Time for a poll!

**1. How much do you think you know/how familiar are you with this topic? Rate yourself!**

**1. Who do you know?**

- Friends
- Family members
- Work colleagues
- Teammates



# The Basics



Lesbian, gay, bisexual, transgender, queer ....

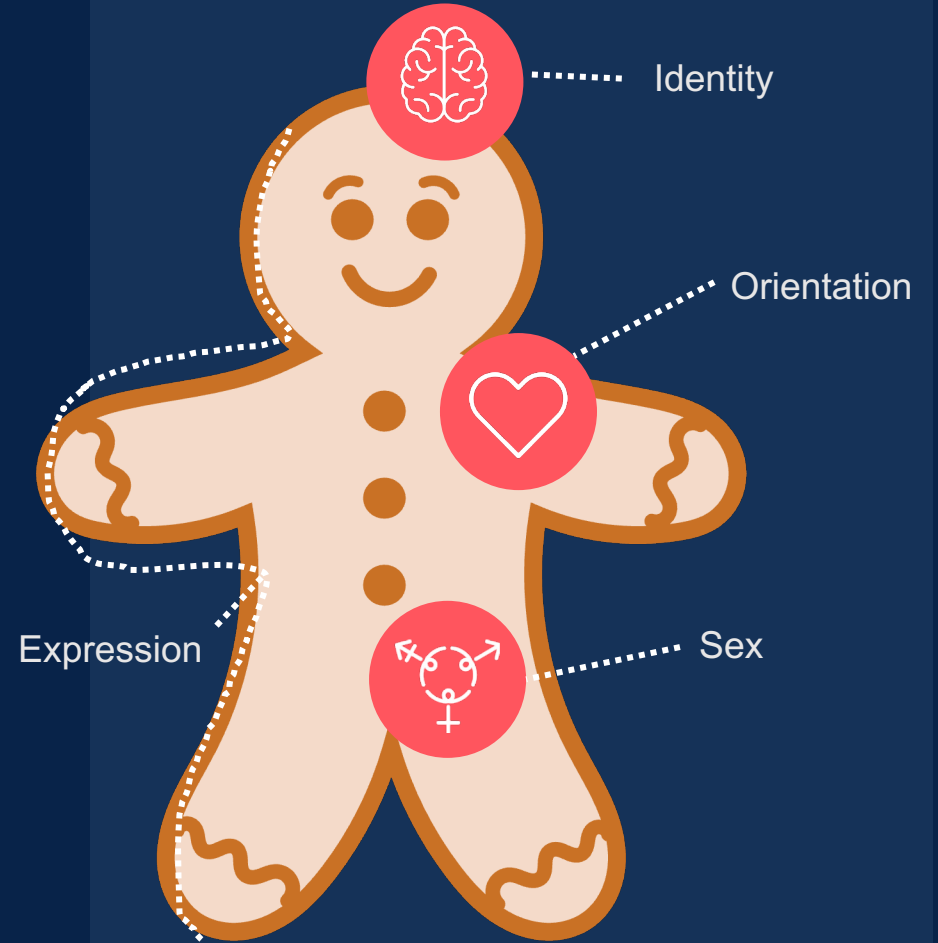


Sexual & gender minorities can include intersex & asexual people



About 7.1% identify as something other than cisgender or heterosexual (*Gallup*)

## THE GENDERBREAD PERSON



[www.itspronouncedmetrosexual.com](http://www.itspronouncedmetrosexual.com)

# Statistics

*LGBs twice as likely to have MH challenges than straight people, trans people 4 times as likely, especially depression & anxiety (NAMI)*

*Comprised majority of crisis text line users of for 2021 (53%) for the first time since 2015 (Crisis Text Line 2021 Annual Report)*



## **Substance use disorders**

(esp. Alcohol, opioids, meth): twice as high in LGB pop, 4 times as high in trans pop (NAMI)

## **Suicide**

higher risk, esp trans people 40% have attempted vs. 5% gen pop (NAMI)

## **Trauma**

greater risk of PTSD, one of highest targeted groups for hate crimes (NAMI)



# Stress factors

- ✓ Minority stress, history of discrimination & violence e.g. *anti-trans bills across USA, highest ever in 2021 (Human rights campaign)*
- ✓ Lack of family support/familial rejection - experienced by 40% of pop, only 37% of queer youth say their home is affirming (*NAMI*)
- ✓ Black & Latinx people disproportionately affected (*UCB*)





# Protective factors



Community of chosen family  
[\(quick video Paris is Burning\)](#)



Internet makes finding info & help much easier  
(*HRC internet*), though it can have downsides too



Resilient, independent, creative, vibrant,  
and more!



# Let's Discuss



Any ideas why these disparities might exist?



If you are comfortable, share a time that you or someone close to you experienced discrimination: **what was your reaction?**



# Helpers & LGBTQ+ patients

- ✓ What has worked well in your experience? What hasn't?
- ✓ For those of us who are heterosexual and/or cisgender, how have you (or would you) approached working with a queer client?
- ✓ We may or may not have similar lived experience as our clients:
  - What are some benefits and challenges of sharing an identity or experience?
  - Alternatively, what are benefits and challenges of self-disclosing our orientation/gender identity?



# Empathy Skills 101

# Empathic Communication



Empathic Reflection



Affirming Strengths



# Reflective Listening:



- ✓ Use some exact wording
- ✓ Summarize what we hear and ask, "Did I get that right?"
- ✓ Stems: "It sounds like..." or "What I'm hearing you say is..."

Look & Listen  
for strengths





# Affirming Strengths:

01

"I can hear how much  
you care about  
your health..."

02

"You are  
so insightful..."

03

"Your commitment to  
your own healing  
is incredible..."

---



Reflect  
on process

---

Practice time!

# How to support LGBTQ+ patients

- ✓ Treating their identity/sexuality as normal (APA)
- ✓ Wear or display queer affirming symbols, buttons
- ✓ Use chosen name & pronouns (*make notes in medical chart if not legally changed*)
- ✓ Provide affirmative support, validate any institutional & social challenges they may face (APA)



*ask me  
about my  
pronouns*

# How to support LGBTQ+ patients

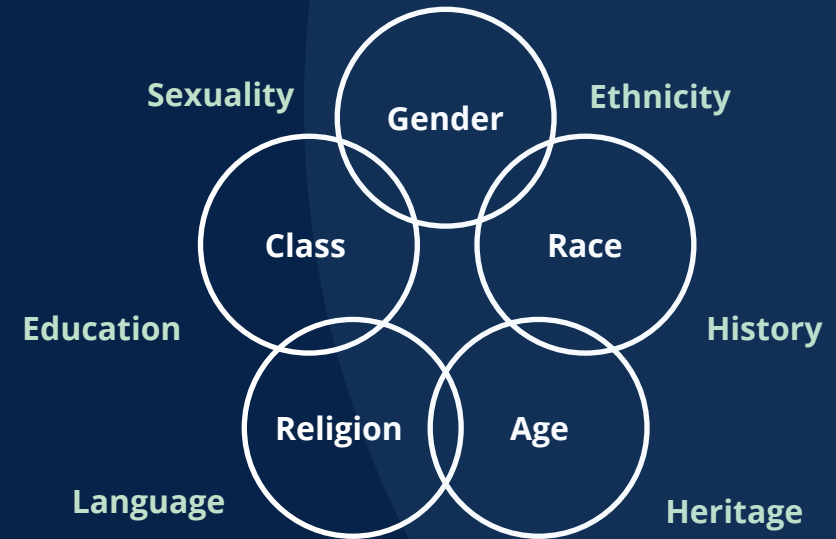


Recognize interplay of multiple identities a client has (*APA*)



Connect clients with support groups, such as Trans Lifeline, Trevor project, and local community resources

## INTERSECTIONALITY



"overlapping or intersecting social identities and related systems of oppression, domination, or discrimination."

our potential is  
endless...





[www.emorrisonconsulting.com](http://www.emorrisonconsulting.com)