Advancing Awareness in LGBTQ Care, Part IV: Shaping Affirming Responses for Historically “Invisibilized” LGBTQIA+ Populations

Presented by Raven E. Freeborn, LCSW, CNP

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and Facilitated by Malcolm Horn, PhD,
LCSW, MAC, SAP
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Learning Objectives

- Differentiate
- Modify
- Demonstrate
- Reckon With

Raven Freeborn LCSW, CNP

THEY / THEMME
Legacy Healing & Therapy Services

NAADAC
Shaping Affirming Responses for Historically Invisibilized LGBTQIA+ Populations
September 17, 2021
Poll Question

How much time in a day do you think about your sexuality?
- None
- 5 - 10 hours
- 10 - 15 hours
- All day

Poll Question

How much time in a day do you think about your gender?
- None
- 5 - 10 hours
- 10 - 15 hours
- All day

Poll Question

How much time in a day do you think about your gender expression?
- None
- 5 - 10 hours
- 10 - 15 hours
- All day
## Spectrum of Realities

<table>
<thead>
<tr>
<th>Gender Identity</th>
<th>Sex Assigned at Birth</th>
<th>Sexual Orientation</th>
<th>Social Gender</th>
</tr>
</thead>
<tbody>
<tr>
<td>A system in which gender is constructed into two strict categories of male or female. Gender identity is expected to align with the sex assigned at birth and gender expressions and roles fit traditional expectations.</td>
<td></td>
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<tr>
<td>“The sex, male, female or intersex, that a doctor or midwife uses to describe a child at birth based on their external anatomy. [AFAB and AMAB]”</td>
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<tr>
<td>“Interpersonal (who we are physically, emotionally and/or romantically attracted to)”</td>
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<tr>
<td>“gender expression, which is the way we communicate our gender to others through such things as clothing, hairstyles, and mannerisms.”</td>
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</tbody>
</table>

### Gender Congruence

- experiencing comfort in our body as it relates to our gender
- naming of our gender that adequately corresponds with our internal sense of who we are
- expressing ourselves through clothing, mannerisms, interests and activities
- being seen consistently by others as we see ourselves
Social Justice Orientation

Social Justice

“Social workers pursue social change, particularly with and on behalf of vulnerable and oppressed individuals and groups of people. Social workers’ social change efforts are focused primarily on issues of poverty, unemployment, discrimination, and other forms of social injustice. These activities seek to promote sensitivity to and knowledge about oppression and cultural and ethnic diversity. Social workers strive to ensure access to needed information, services, and resources; equality of opportunity; and meaningful participation in decision making for all people.” - NASW Code of Ethics

Gender Justice

Gender Justice as a movement to end patriarchy, transphobia, and homophobia and to create a world free from misogyny.
As a provider what **risk** are you most often assessing for?

### Co-Occurrence

- **Among LGBTQ adults with a substance use disorder:**
  - 18.7% (2.6 million) have a mental, psychological or developmental disorder
  - 16% (2.4 million) have a substance use disorder & mental disorder

- **Among LGBTQ adults with a mental disorder:**
  - 43.4% (6.2 million) have a substance use disorder

### Historically Invisibilized Populations

**HEALTH**

“**28%** of the LGBTQ population lives in a state with an HIV **criminalization** law”
Historically Invisibilized Populations

**INDIGENOUS PEOPLE**

"**lowest** full time employment rate at
**37 percent**"

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Historically Invisibilized Populations

**YOUTH**

feelings of rejection leads to "**6 times** more likely to report higher levels of depression and
**3 times** more likely to use illegal drugs" compared to their peers

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Historically Invisibilized Populations

**GENDER FLUIDITY**

- minimal accessibility of treatment of options for individuals who are gender fluid

**THE PLUS**

- communities of people are not recognized by mainstream or alternative social norms.

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Public Health Disparities

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Public Health Disparities

- Systemic Oppression
- Structural Oppression
- Patriarchal Violence
- Medical Racism

Historically Invisibilized Populations

**HEALTH**

- Transgender individuals are less likely to have insurance than other individuals in comparative population
- LGB adults are more likely to delay not seeking medical care
- LGB adults are more likely to receive health care service in emergency rooms
- LGB adults are more likely to experience psychological distress
- Transgender adults are 50% more likely to have suicidal ideation

**INTIMATE PARTNER VIOLENCE**

- Transgender victims are more likely to experience intimate partner violence in public, compared to those who do not identify as transgender.
- LGBTQ Black/African American victims are more likely to experience physical intimate partner violence, compared to those who do not identify as Black/African American
- In a study of male same sex relationships, only 26% of men called the police for assistance after experiencing near-lethal violence.
- 43.8% of lesbian women and 61.1% of bisexual women have experienced rape, physical violence, and/or stalking by an intimate partner at some point in their lifetime, as opposed to 35% of heterosexual women.
Historically Invisible Populations

**HOUSING**

- Experiences within social services
  - Discrimination
  - Harassment
  - Violence
  - Sex-segregation

- Studies find that between 20% and 45% of homeless youth identify as LGBTQ, at least 2 to 4 times more than the estimated percentage of all youth who identify as LGBTQ (e.g., Baams et al., 2019; Choi et al., 2015).

- Among young adults aged 18-25, LGBT people have a 2.2 times greater risk of homelessness than non-LGBT people (Morton, Samuels, et al., 2018).

Practice Considerations

Legal Considerations

- Consent Process
- Confidentiality
- Criminalization
- Employment
- Marriage
- Parental
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Clinical Approach

Affirming vs. Responsive

Affirming Care
unbalanced power exchange based on the practitioners competency and relative understanding of the social issue

Responsive Care
evolving of professional dynamics that support the lived experiences of individuals as it is uniquely expressed, related, and understood.

Affirming Care
• Recognizes presence in life experiences
• Acknowledges history of stigma and discrimination
• Offers respectful engagement based on global perspective of the population
• Evaluates risk taking within the context of "normativity"
Responsive Care

- Prepares interventions and engagement based on dynamics of relationship to communities of the lived experience
- Disrupts internalization of oppression and injustice within practice structure and individual therapeutic relationship
- Advances understanding of justice and equity in broader community
- Promotes protective factors to minimize prevalence of social and personal risks.

Affirming Care

- Recognizes presence in life experiences
- Acknowledges history of stigma and discrimination
- Offers respectful engagement based on global perspective of the population
- Evaluates risk taking within the context of “normativity”
- Intake paperwork
- Documentation style
- Availability of treatment and services
- Marketing
- Staffing
- Community Partnerships
- Depth of service opportunities
- Ethics of interpersonal relationships
- Evaluation of treatment outcomes
- Ethics of interpersonal relationships
- Evaluation of treatment outcomes

Responsive Care

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Thank You

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