

Exclusion to Inclusion of Sexual and Gender Minorities in Behavioral Health Services

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Missing in the Background:

Historically, people from sexual and gender minority communities have been excluded in the research, planning, policies, procedures and provision of culturally competent services. Examples include:

Mental Health: A Report of the Surgeon General in 1999 mentioned sexual minorities in the 487-page report a total of five (5) times in footnotes and parenthesis.

Healthy People 2010 released in 2000 were sparsely mentioned health disparities of people from sexual and gender minority communities.

Report to Congress on the Prevention and Treatment of Co-Occurring Substance Abuse Disorders and Mental Disorders released in 2002 did not ever mention sexual and gender minorities in the 149-page report.

Achieving the Promise: Transforming Mental Health Care in America, the final report of The President's New Freedom Commission on Mental Health in 2003, did not ever mention sexual and gender minorities in the 98-page report.

Lesbian, Gay, Bisexual & Transgender People Receiving Services in the Public Mental Health System is a monograph funded and commissioned by the Center for Mental Health Services (CMHS), Substance Abuse and Mental Health Services (SAMHSA), U.S. Department of Health and Human Services, yet rejected for publication of the 127-page report.

National Strategy for Suicide Prevention: A Collaborative Effort of SAMHSA, CDC, NIH, HRSA. The title explains itself, yet sexual and gender minorities are only listed in the Appendix related to Youth Suicide Prevention. Otherwise, totally excluded from a plan to end suicide in sexual and gender minority communities.

Community Support Program's (CSP) Indicators Rating Scale implemented by the Office of Mental Health & Substance Abuse Services (OMHSAS), Department of Public Welfare (DPW), Commonwealth of Pennsylvania eliminated mention of sexual and gender minorities. The indicators are designed to find evidence of the implementation, delivery, monitoring and evaluation of county service supports. Thus, best practices are not guaranteed to be considered for sexual and gender minorities.

The Philly Primer: Housing Resources for People with Disabilities, funded by the City of Philadelphia's Office of Housing and Community Development, mentioned sexual orientation once in this 122-page housing resource guide in the non-discrimination policy of the Philadelphia Commission on Human Relations.

Included in the Backdrop:

Limited resources are available to assess and address the needs of people from sexual and gender minority communities. Examples include:

Suicide Prevention Now: Linking Research to Practice. A full chapter is devoted to sexual, but not gender minorities titled "The Relationship Between Sexual Orientation and Risk for Suicide: Research Findings and Future Directions for Research and Prevention" by J. Stephen McDaniel, MD, David Purcell, JD, PhD and Anthony R. D'Augelli, PhD.

Healthy People 2010 Companion Document for Lesbian, Gay, Bisexual, and Transgender (LGBT) Health was coordinated and co-written by the Gay and Lesbian Medical Association (GLMA) and is a product of a national collaborative effort that involved nearly 200 individuals, organizations and agencies.

Meeting the Mental Health Needs of Gay, Lesbian, Bisexual and Transgender Persons was published by the National Technical Assistance Center for State Mental Health Planning (NTAC) and the National Association of State Mental Health Planning Directors (NASMHPD). This report is a call to provide appropriate and accessible mental health services for people from sexual and gender minority communities.

Youth in the Margins: A Report on the Unmet Needs of Lesbian, Gay, Bisexual, and Transgender Adolescents, published in 2001 by Lambda Legal Defense and Education Fund, reports the unaddressed problems facing LGBT Youth and the basic reforms needed to address these unmet needs.

A Provider's Introduction to Substance Abuse Treatment for Lesbian, Gay, Bisexual, and Transgender Individuals was published in 2001 by the Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA). The program administrators guide addresses policies and procedures, training and education, quality improvement, alliances and networks and recommendations.

Consumer Partnership Platform for Change: Recommendations from a Consumer Forum represent concerns and definitive action steps to improve behavioral health systems as a consumer response to the President's New Freedom Commission final report. This historic forum of diverse national mental health consumer leaders includes consideration of people from sexual and gender minority communities as a priority.

The Pages Are Barely There...

Little to no information is available regarding resources important for a person's continuum of care regarding consumer need, satisfaction or gaps in service. This underscores the importance to support the continuous growth of learning and awareness among Philadelphia's social and health service provider community of the needs, concerns and gifts that exist within the sexual and gender minority communities.

The Statistics Speak...

- Among respondents to the 2001-02 University of Pennsylvania Office of Health Education survey, LGBTQ respondents were twice as likely to choose mental health as their top personal health issues compared with heterosexual respondents.
- Both men and women who report same-sex partners are twice as likely to have contemplated suicide in their lifetime than their heterosexual peers.
- Women reporting same-sex partners are more than three times more likely to suffer from generalized anxiety disorder in their lifetime than heterosexual women.
- Women reporting same-sex partners are more than four times more likely to experience drug abuse in their lifetime than heterosexual women.
- Men reporting same-sex partners are close to three times more likely to experience drug abuse in their lifetime than heterosexual men.

(American Journal of Public Health, 2001)

The Survey Says...

The following are documents that will help shape an effective survey and questions for focus groups to gain input on consumer needs and expectations.

[Inside-OUT: A Report on the Experiences of Lesbians, Gays and Bisexuals in America and the Public's Views on Issues and Policies Related to Sexual Orientation](#) conducted in 2000 by the Kaiser Family Foundation.

[Community Needs Assessment Survey](#), a project of Persad Center, Inc., the Gay and Lesbian Community Center and the Seven Project, Inc. in Allegheny County, Pennsylvania conducted in 2002 and released in 2003. Conclusions will be forthcoming. The comprehensive survey covers issues related to general health, physical health, mental health, sexual orientation and gender identity, spirituality and religion, social and political concerns, knowledge of service providers and demographics. The Persad Center is a health center for LGBT communities in the Pittsburgh area.

[People in Poverty: Lesbians and Gay Men](#) is a fact sheet of the report by Glasgow Women's Library and supplemented by a study commission in Ireland by the Combat Poverty Agency, Dublin, Ireland. The survey summary covers education and training,

employment and unemployment, income, housing and homelessness, health, harassment and services.

2 Minute Opinion Survey Results 2002 conducted by the Seattle Office for Civil Rights and Seattle Commission for Sexual Minorities. In addition to demographics, questions cover public schools, discrimination (including housing), domestic violence, LGBTQ priorities, LGBTQ community services, volunteerism and access to complete survey in a variety of locations and formats.

2002 University of North Texas Gay, Lesbian, Bisexual, Transgender and Queer Survey conducted by the Gay and Lesbian Association of Denton (GLAD) covers issues related to community living, involvement and safety in a higher education environment.

1996 Campus Climate Survey on Lesbian, Gay, Bisexual and Transgender Concerns conducted by the Oregon Survey Research Laboratory at the University of Oregon in Eugene. Topics cover demographic characteristics, general campus climate, personal safety, pressure to conceal sexual orientation, satisfaction with GLBT offerings at UO, classroom environment, experiences with UO services and workplace environment.

Gay and Lesbian Association of Retiring Persons (GLARP) Survey covers questions related to housing preferences, residential services and planning retirement for LGBT seniors.

Anti-Gay/Lesbian Discrimination in New York State Analysis of a Statewide Survey Conducted by the Empire State Pride Agenda in 2001. Issues covered include employment, public accommodation, and housing discrimination and concealment to avoid harassment.

Commonwealth of Pennsylvania Year 2000 Survey, a project of the Philadelphia Lesbian and Gay Task Force. The survey covers discrimination issues related to coming out in family, employment and neighborhood settings in addition to job, housing or public accommodation discrimination.

Conclusion for Inclusion:

Supporting the Needs of Sexual and Gender Minority Communities Lesbian – Gay – Bisexual – Transgender/Intersex – Questioning

The health disparities of sexual and gender minorities (LGBTQ) are known to be huge, but little research and data documents what we hear anecdotally. Thus, funding for culturally competent safe services are not available for the specialized needs of people from LGBTQ communities.

The following are essential and expressed service needs:

- Specialized outpatient psychosocial day program & individual therapy,
- LGBTQ Peer Support Services including drop-in center and peer support groups,
- In-patient co-occurring recovery program and safe points of entry,
- Sex education of all behavioral health system stakeholders to include diversity of sexual and gender minorities and the risks of STD/HIV/AIDS contraction,
- Safe housing and competitive employment opportunities.

Ideally, a partnership of professional and peer support services can create an environment of supportive and challenging opportunities for recovery of Philadelphia's marginalized LGBTQ citizens living in poverty and oppression.

Compiled from needs expressed by LGBTQ people living with a mental illness in focus groups and others as members of the Pink & Blues mutual peer-run support group that meets weekly in Philadelphia.

Language for Section VII: Cultural Competence Update

Convene Pink Ribbon Commission, Fall 2006: Representation from DBH, behavioral health-friendly LGBTQ agencies, city agencies, LGBTQ consumers, LGBTQ-friendly providers, LGBTQ families, academia and allies. The purpose will be to:

- Review policy, practices and research of current knowledge and service gaps, standards of care and evidence based national practices.
- Research citywide data on sexual orientation and gender identity and develop a plan to collect data currently not recorded.
- Conduct focus groups to access needs of youth, adult and older adult consumers.

- Develop a plan to eliminate health care disparities and provide culturally competent recovery oriented services for LGBTQ communities.
- Write an LGBTQ training curriculum for all stakeholders regarding sex education, sexual orientation and gender identity and expression.
- Invest in service needs with RFP's for providers to train, provide services and evaluate outcomes for new residential, co-occurring, outpatient, day programming, employment and peer support specialist for a recovery and community integrated array of services.
- Monitor implementation and integration of the service design and practice to assure the elimination of health care disparities that provide culturally competent recovery oriented services for LGBTQ communities.

Section VII: Paragraph One

Add language to assure services and/or access to public accommodations are not denied based on: Race, Color, Religion, Sex, Disability, National Origin, Ancestry, Sexual Orientation, Gender Identity, or Marital Status.

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Pink & Blues 3rd Anniversary - Founded January 15, 2003

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