

Enhancing Trauma-Informed Care through LGBTQ-Affirmative Practice

LGBTQ youth are disproportionately impacted by childhood trauma

LGBTQ identities are largely excluded from trauma-informed discourse

Cultural competence is a vital element of trauma-informed care

LGBTQ individuals face significant disparities in health and mental health

RISK FACTORS

LGBTQ youth face rejection, discrimination, marginalization, violence, and higher rates of PTSD, maltreatment, abuse, and homelessness. LGBTQ youth also face significant disparities in health and mental health.

(McCormick et al, 2018 and Solomon et al, 2017)

RESILIENCE FACTORS

Social support including: belonging to a community, identity acceptance and affirmation from friends and family, and a positive school environment and involvement in LGBTQ-affirmative programs and services.

(Solomon et al, 2017)

LGBTQ individuals are more likely to terminate mental health services early & less likely to be satisfied with services

(Rossi et al, 2017)



Promoting LGBTQ-Affirmative Practice

How do I know if I am working with someone who identifies as LGBTQ?

The fact is, you may not know your client's sexual orientation or gender identity. The best practice is not to speculate, rather to ask direct questions to gather this information, as appropriate. It is important to acknowledge, however, that LGBTQ individuals face significant stigma, prejudice, and discrimination in daily life as well as in the healthcare system. Thus, individuals may be reluctant to disclose their identity.

Additionally, identity can fluctuate over time.

This means that it is important to provide LGBTQ-inclusive and affirmative spaces and service for all clients at all times.

Quick Tips for Inclusive Language

- avoid terms like "sexual preference" or "preferred pronouns" or referring to LGBTQ identities as a "lifestyle"
- opt for gender-neutral language by using "they" as a singular pronoun when appropriate and/or when pronouns and gender identity are unknown
- this language suggest that sexual orientation and gender identity is a choice and devalues individual identities (Rossi et al, 2017)
- when asking about sexual orientation avoid questions such as "do you have a boyfriend?" and instead ask "are you dating anyone?" or asking "what type of person are you attracted to?"

Including Sexual Orientation and Gender Identity on Intake Paperwork

This is an evidence-based practice researched by The Fenway Institute which has shown to

- be feasible and acceptable to both patients and providers
- allow for accurate identification and representation of LGBT patients' identities
- be recognized as important and supported by the majority of patients of any identity

What can I do to promote LGBTQ-affirmative practice?

- include sexual orientation and gender identity on intake paperwork (Cahill, 2004)
- support and facilitate coming out when clients are ready and it is safe to do so and when working with you, considering family rejection as a risk and developing a safety plan as appropriate (McCormick et al, 2018)
- Create an inclusive environment through display of inclusive media (signs, books, website graphics) , use of inclusive language, and publication and display of a non-discrimination policy (McCormick, 2018, Rossi, 2017, & Solomon, 2017)
- Encourage self-identification, mirror client's use of language to describe their own identity, and treat the client as the expert of their own identity and experience (Rossi et al, 2017 & Solomon et al 2017)
- Independently increase personal knowledge of appropriate language and terms (Rossi et al, 2017) and relevant community resources (Solomon et al, 2017)
- Be open to discussing and addressing sexual practices (Solomon et al, 2017)
- Be aware of and examine your own biases and assumptions of heterosexuality and cisgender identity and actively work to eliminate them (Solomon et al, 2017)
- do not question an individual's identity or consider it a "phase" - this is a form of rejection (McCormick et al, 2018)



RESOURCES

PRIDE STL

NCTSN

GLSEN

Family Acceptance Project

The Trevor Project

Trevor Project Support Center

Trevor Project: The Spectrum

Trevor Project Lifeline

1-866-488-7386

The Fenway Institute

The Fenway Institute: LGBT Health Education

The Fenway Institute: SOGI Collection Videos

References:

Cahill et. al., 2014. Do ask, do tell: high levels of acceptability by patients of routine collection of sexual orientation and gender identity data in four diverse American community health centers.

Solomon, et al., 2017. Conducting culturally competent intake interviews with LGBTQ youth.

Rossi et. al., 2017. Contextualizing competence: language and LGBT-based competency in health care.

McCormick et. al., 2018. Trauma-informed care and LGBTQ youth: considerations for advancing practice with youth with trauma experiences.

