Substance Use and LGBTQ Students: What We Need to Know

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LaHEC Professional Development Summit Workshop
Lod Cook Conference Center
Baton Rouge, LA
July 24, 2014
Terminology Disclosure
Definitions
Heterosexism

The ideological system that denies, denigrates, and stigmatizes any non-heterosexual form of behavior, identity, relationship or community

Transgender (Trans)

Includes people who do not fit in to societal expectations for sex (male/female) and those who choose to transition their gender identity, gender expression or biological sex so that they are congruent.

• Gender Identity Disorder
• Dysphoria
4 Elements

• Biological Sex
• Sexual Orientation
• Gender Identity
• Gender Expression
The Genderbread Person

by www.ItsPronouncedMetrosexual.com

Identity

Orientation

Expression

Sex

Gender Identity
- Woman
- Genderqueer
- Man

Gender Expression
- Feminine
- Androgynous
- Masculine

Biological Sex
- Female
- Intersex
- Male

Sexual Orientation
- Heterosexual
- Bisexual
- Homosexual

www.itspronouncedmetrosexual.com
Substance Use
Substance Use in Lesbians

• Studies suggest that lesbians are significantly more likely to drink heavily than heterosexual women. ¹

• Lesbian and bisexual women are more likely to binge drink, drink more frequently, experience negative consequences from alcohol use, and seek professional help for alcohol problems. ²³

1. SAMHSA Top Health Issues for LGBT populations
Marijuana, crack cocaine, and alcohol are the most commonly used drugs by transgender people. Others have also found alarming rates of methamphetamine use (4-46%) and injection drug use (2-40%) \(^1\)

\(^1\) SAMHSA Top Health Issues for LGBT populations
Substance Use in Gay Men

• Studies show that gay men use substances, including alcohol and illicit drugs, at a higher rate than the general population.¹

• More likely than heterosexual men to use marijuana and other illicit drugs and are more likely to develop dependence on these drugs ²³

1. SAMHSA Top Health Issues for LGBT populations
Substance Use in Bisexual Men and Women

- Data has shown that bisexual adults exhibit significantly higher rates of binge drinking (22.6%) than their heterosexual counterparts (14.3%).
- Bisexual women report more hazardous drinking than heterosexual or lesbian women.¹
- Rates for bisexual women were as high as 23.7%.

¹ SAMHSA Top Health Issues for LGBT populations
% of adult residential patients having a co-occurring mental disorder

- Any Co-occurring Axis I Disorder: LGTBQ 92* vs. Heterosexual 78
- Depressive Disorder: LGTBQ 70* vs. Heterosexual 50
- Anxiety Disorder: LGTBQ 68* vs. Heterosexual 50

*Denotes a statistically significant difference, p < .01
The rate that LGB individuals search for counseling more than heterosexual counterparts (50% vs. 10% respectively)

A higher percentage of gay or lesbian (35.1%) adults report having consumed 5 or more drinks in one day over the past year than straight adults (26%).

CDC/NCHS, National Health Interview Survey, 2013
Estimated that 20-30% of gay and transgender people abuse substances, compared to 9% of the general population.
WHY?
Drinking Motives

- Enhancement
- Social
- Coping
- Conformity

Risk Factors for LGBT Students

- Minority stress
  - Family
- Lack of cultural competency in the health care system
- Stressors inherent in the LGBT lifestyle
- Socialization and Marketing
Unwelcoming campus environments and the associated consequences (threats, violence) for LGBT students have shown to be a predictive factor for heavy alcohol consumption and negative consequences.  

Barriers to Prevention and Treatment

- Stigma
- Intolerance
- Overt discrimination
- Lack of specific or culturally sensitive screening and assessment instruments

¹ NIH National Institute on alcohol abuse and alcoholism, Module 10g; sexual orientation and alcohol use disorders
Micro-aggressions

• Use of heterosexist or transphobic terminology
• Endorsement of heteronormative culture and behaviors
• Assumption of universal LGBTQ experience
• Discomfort of disapproval of LGBTQ experience
• Assumption of sexual pathology or abnormality
• Denial of bodily privacy
We all make mistakes
Admit it
Learn from it
Apologize
What can WE do?

• Professional training for professionals

• Creation of environments that affirm LGBT staff and clients
  – Schools, programs, activities, need to provide outward indications that they are inclusive of LGBT people and their unique needs
Facilitating programming such as dialogues and speaker panels have been shown to positively influence the attitudes of heterosexual students toward LGBT students.\(^1\)

Clinical Interventions

- Timing

- Feminist theory, Cognitive therapy and Family Systems Focus

- Group Counseling
Agency Interventions

Best Practices Report #4:
Standards for Culturally Responsive Services for Sexual and Gender Variant Clients and Communities:
Substance Abuse Treatment and Prevention Programs in California

Best Practices Report #4:
Standards for Culturally Responsive Services for Sexual and Gender Variant Clients and Communities: Substance Abuse Treatment and Prevention Programs in California www.lgbt-tristar.com
Standard #1: Inclusive Policies

Agency policies and procedures are inclusive of LGBT staff, clients, and communities.

Action Steps:
1. Review all policies and statements in your agency for inclusive language

2. Recommendations about language for forms:
   • Nondiscrimination and client rights policies: include “sexual orientation and gender identity” along with other protected classes.
   • Mission statements: commitment to diversity, social justice, inclusivity.
   • Confidentiality: include in the agency procedures manual a statement that staff members honor the confidentiality of LGBT clients and ask their permission to record information about sexuality and gender on official agency records.
   • Sexual harassment: make sure that the policy includes same-sex harassment.
Standard #2: Training, Supervision and Accountability

Staff members at substance abuse treatment or prevention agencies receive LGBT basic training as part of their larger diversity training experiences, and receive appropriate supervision to provide inclusive services. Staff members who provide poor quality care are appropriately sanctioned.

Action Steps:
1. When the agency schedules staff training for the year, ensure that at least one program includes LGBT issues. If possible, ensure that all staff members providing direct services to clients receive basic training in LGBT issues, and that some staff members, at minimum clinical supervisors, receive more advanced training.

2. Agency policies about staff conduct should include language about the sanctions for violating the respect and dignity of clients or staff members.
Standard #3: Inclusive Forms

Written forms and documents, and oral language used in assessment and interventions are inclusive and respectful of LGBT people.

Action Steps:

1. Examine all written documents for inclusion of LGBT people and communities. Add inclusive language if it is not there.

2. Conduct peer observations of client history-taking sessions and group therapy or support to identify areas where these situations can be made more inclusive of LGBT people or communities, and discuss these issues in staff meetings, retreats, and clinical supervision sessions.

3. Confront staff members and clients who make anti-LGBT comments - these comments are unacceptable in a professional work environment.
Standard #4: Welcoming Climate

The climate of the substance abuse treatment and prevention agencies is welcoming and inclusive of all clients.

Action Steps:

1. Ask LGBT people from the local community to assist your agency to conduct a ‘walkthrough’ of the agency to help you identify places where the environment can be more welcoming;
2. Download client education pamphlets for your reception or waiting areas. Have a hand-out listing local LGBT community resources, such as LGBT AA/NA meetings or LGBT community centers.
3. Post a client rights statement that includes sexual orientation and gender identity in a prominent area.
4. Subscribe to local LGBT newsletters or newspapers for the waiting area.
5. In client orientations to group treatment, or in new client information packets, state that derogatory language and discriminating behaviors that are disrespectful of any group of people will not be tolerated.
Standard #5: LGBT Community Linkage

Substance abuse treatment and prevention agencies shall create linkages with local LGBT communities and use appropriate referral sources and resources for their LGBT clients.

Action Steps:

1. Find out about your local LGBT community by asking questions such as: Are there gay bars in your city? How many? Where? Are there LGBT community organizations or social service agencies? LGBT AA or NA groups? Does your agency have a reputation in the LGBT community?

2. Ask LGBT people in recovery to serve on the board of directors, be mentors/sponsors, serve on committees and task forces, help you do an LGBT community needs assessment, and generally serve as advisors and resources for your agency.

3. Advertise job openings in the LGBT local community. CLAS Standard #2 requires that “recruitment, retention, and promotion {efforts}…represent the demographic characteristics of the service area.”
• 102 acts of violence against transgender people

• 10 % of the 102 acts were suffered by transgender youth
Transgender Violence Tracking Portal

- An 8-year-old boy was beaten to death by his father
- A 14-year-old was strangled to death and stuffed under a bed
- Two 16-year-olds were shot to death
- Three 18-year-olds were stabbed to death, dismembered or shot
- Two 18-year-olds were murdered with no details being reported
- An 18-year-old suffered two violent attacks by a mob and survived

For more information on the Transgender Violence Tracking Portal, or to get involved in the initiative, please visit transviolencetracker.org.
Review

• Terminology and context for working with LGBT students
• What the stats say
• Risk factors
• Barriers to prevention and treatment
• How we address barriers clinically
• How we can assist our agencies and schools in addressing barrier
• Grave consequences
Tomorrow...

• Go back to your agencies and do one thing different
• Keep talking
• Ask Questions – ever inquisitive
• Stay a student of your profession
• The most important of all clinical interventions when working with LGBT students is unconditional positive regard – THAT is the curative factor
Resources

• It Gets Better Project:  www.itgetsbetter.org
• Association for Lesbian, Gay, Bisexual & Transgender Issues in Counseling:  www.algbtic.org
• Healthy LGBT Students project:  www.apa.org/lgbt/programs/hlgbsp/index.aspx
• www.cdc.gov/lgbthealth/
• LGBT Tristar:  www.lgbt-tristar.com
• Association of Lesbian, Gay, Bisexual, and Transgender Addiction Professionals and Their Allies (NALGAP)  www.nalgap.org
Thank You

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www.TherapyIsGood.net