

How to Get Help

No insurance? Call the NAMI Southern Arizona office to help guide you to access mental health services.

If you are Gay, Lesbian, Bisexual, or Transgender and have mental illness:

- ◆ Seek medical care through a psychiatrist and/or your primary care physician.
- ◆ Find the right combination of treatment that works for you which may include medication, therapy, support groups, etc. **Sometimes people must try several different treatments or combinations of treatment before they find the one that works for them.*
- ◆ Take NAMI's Peer-to-Peer course and/or join the NAMI Connection support group.
- ◆ LEARN about your illness. The more you know, the more you are able to help yourself. Start with NAMI today!

If you are a family member with a loved one who has mental illness:

- ◆ Take care of yourself.
- ◆ Take NAMI's Family-to-Family course, join a Family & Friends Support Group and/or take NAMI Basics if you have a loved one who is a child or adolescent.
- ◆ Family, friends and partners of military service members and veterans can take NAMI's Homefront course.
- ◆ Learn about your loved one's illness.

ADVOCACY*

We offer advocacy for individuals with mental illness as well as for family members. You or your loved one may ask us about patient rights, how to obtain quality mental health services, and more.

EDUCATION

Family to Family*: A 12-class course for family and friends of adults with mental illness.

Homefront: A 6-class course for family, friends and partners of military service members and veterans .

NAMI Basics: A 6-class course for parents and caregivers of children or adolescents with a mental illness.

Peer to Peer*: A 10-class course for people with mental illness focusing on recovery.

In Our Own Voice*: A presentation given by individuals with mental illness providing their testimonies.

Ending the Silence: An early intervention program that engages students in mental health education and discussion.

Parents and Teachers as Allies: An in-service education program for school professionals, parents, and agencies working with children and adolescents.

SUPPORT

Family and Friends Support groups*

**Program or Service Available in Spanish*

GLBT National Hotline

1-888-THE-GLNH (843-4564)

Parents, Families and Friends of Lesbians and Gays

PFlag Tucson (520) 360-3795

www.pflagtucson.org

**SHOW YOU CARE.
WEAR A SILVER RIBBON.**



- Help break down the barriers to treatment and support.
- Help reduce stigma —talk about it!



**FIND HELP.
FIND HOPE.**

Mental illness affects 1 in 5 people. We provide resources and support to all those affected by mental illness.

**NAMI SOUTHERN ARIZONA DEPENDS ON YOU.
THERE ARE MANY WAYS TO HELP.
BECOME A MEMBER, VOLUNTEER OR DONATE.**

NAMI Southern Arizona
6122 E. 22nd St.
Tucson, AZ 85711
520-622-5582
NAMIsa@NAMIsa.org

COMMUNITY-WIDE CRISIS LINE:
520-622-6000 or 1-866-495-6735

NAMIsa.org



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**LESBIAN, GAY,
BISEXUAL,
TRANSGENDER &
MENTAL HEALTH**

Educational information and local support provided by:



Mental Health Issues among Gay, Lesbian, Bisexual, and Transgender (GLBT) People

According to the National Institute on Mental Health, an estimated 26% of adults 18 and older, or 1 in 4 Americans, experience a mental illness in a given year. Just like everyone else, gay, lesbian, bisexual, and transgender (GLBT) people also experience mental illnesses.

First and foremost, however, we must remember that being gay, lesbian, bisexual, or transgender is not a mental illness in and of itself. Just because someone is GLBT doesn't automatically mean that they will experience a mental illness. According to the American Psychological Association:

“Homosexuality per se implies no impairment in judgment, stability, reliability, or general social and vocational capabilities. Further, the American Psychological Association urges all mental health professionals to take the lead in removing the stigma of mental illness that has long been associated with homosexual orientations...”

However, GLBT people may face unique risks to their mental health and well-being, which mental health providers should be aware of.

Most research suggests that GLBT people are likely to be at higher risk for depression, anxiety, and substance use disorders. One study found that GLB groups are about two-and-one-half times more likely than heterosexual men and women to have had a mental health disorder, such as those

related to mood, anxiety, or substance use, in their lifetime.

In a national study comparing GLB and heterosexual groups, researchers found that gay and bisexual men were more likely to report major depression and panic disorder in the previous twelve month period. Lesbian and bisexual women were more than three times as likely to have experienced generalized anxiety disorder.

The reason for these disparities is most likely related to the societal stigma and resulting prejudice and discrimination that GLBT people face on a regular basis, from society at large, but also from family members, peers, co-workers and classmates. In terms of more serious mental illnesses, such as those that are long-term and require hospitalization or in-patient care, unfortunately we don't know very much. However, of the approximately 18 million people with serious mental illness, a reasonable estimate suggests that about 720,000 are gay, lesbian, bisexual, or transgender.

In one of the few studies of serious or major mental illness among GLBT people, researchers found that LGB men were less likely to report psychotic disorders, such as schizophrenia, but more likely to report mood disorders, such as depression and bipolar disorders. They found no differences between GLBT and heterosexual women.

Special Considerations

Dual or Double Stigma

Mental illness is regrettably still stigmatized in our society. So, too, is being lesbian, gay,

bisexual or transgendered. A GLBT person with mental illness may be in the unfortunate position, then, of having to contend with both stigmas. It is often the case that GLBT people experience a mental health care system that is not comfortable with or sensitive to issues related to sexual orientation, while the GLBT community is not sensitive to or educated about serious mental health issues. This societal stigma can contribute to and exacerbate existing mental health problems.

Family Support

People with mental illness often rely on family for support. However, for some GLBT people, families are not accepting of their sexual orientation or gender identity. In extreme cases, GLBT people are disowned or kicked out of their homes, which leaves them without an important source of support. Such situations may contribute to more vulnerability among this population, and they suggest just how important it is for GLBT people to have access to affirming, supportive, and culturally appropriate mental health services.

Violence

The societal stigma and prejudice against GLBT people take many forms. Too often, they can take the form of verbal or physical violence. Experiences of violence can have significant and enduring consequences for mental health. A recent study found that 25% of GB men and 20% of LB women had experienced victimization as an adult based on their sexual orientation. In turn, these groups also reported more symptoms of depression, anxiety, and post-traumatic

stress. Mental health providers need to be aware of this issue and the potential negative effects it can have on GLBT peoples' mental health.

Internalized Homophobia

Homophobia refers to irrational fear or hatred of gay people. Sometimes, GLBT people turn society's negative view about them inward, or internalize it. This can affect psychological well-being and can have consequences for healthy development, particularly among youth. Again, mental health providers need to be aware of this issue and how it may affect mental health and well-being among their GLBT clients and patients.

In sum, GLBT people do not by definition have a mental illness, but they have to contend with societal stigma and negative experiences that likely contribute to an increased vulnerability to mental illness. It is important to note, however, that despite this, most GLBT people ultimately live happy and health lives!

Recovery

Recovery does not mean that the illness has gone into complete remission. Over time, and after what for many can be a long and difficult process, individuals can come to terms with their illness by first learning to accept it and then moving beyond it.

This includes learning coping mechanisms, believing in themselves as individuals by learning their strengths as well as their limitations, and coming to realize that they do have the capacity to find purpose and enjoyment in their lives in spite of their illness. **RECOVERY IS POSSIBLE!**