

CareCertify LLC

Behavioral Health Series

BHS-026

Behavioral Health in LGBTQ+ Communities

Participant Guide

Group: Group 5: Specialty Topics | Credit Hours: 1.0

For Home Health Aides, CNAs, PCAs, DSPs & Direct Care Staff

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Learning Objectives

Upon completing this course, you will be able to:

- Understand the elevated behavioral health risks and disparities facing LGBTQ+ individuals
- Define minority stress and explain how it affects mental health
- Apply affirming, respectful communication with LGBTQ+ clients
- Recognize and avoid microaggressions and heteronormative assumptions
- Support LGBTQ+ clients through non-judgmental, person-centered behavioral health care

Section 1: LGBTQ+ Individuals and Behavioral Health

LGBTQ+ individuals experience significantly higher rates of depression, anxiety, substance use, and suicidality than the general population — not because of their identity, but because of the discrimination, stigma, family rejection, and social marginalization they face.

Behavioral Health Disparities in LGBTQ+ Communities

Depression: 2-3x more likely than non-LGBTQ+ peers

Anxiety: significantly elevated, especially in transgender individuals

Substance Use: higher rates, often as self-medication for stigma and stress

Suicide: LGB youth are 4x more likely to attempt suicide; transgender individuals face even higher risk

Homeless Youth: approximately 40% of homeless youth identify as LGBTQ+

Affirming care is not optional — it is clinically necessary.

Section 2: Minority Stress Theory

Minority stress theory explains why LGBTQ+ individuals have higher rates of mental health conditions. The chronic stress of navigating a world that is often hostile — including discrimination, internalized stigma, and the need to conceal identity — takes a measurable toll on mental health.

- Distal stressors: discrimination, violence, rejection from family or faith community
- Proximal stressors: internalized stigma, concealment of identity, hypervigilance
- Cumulative effect: chronic minority stress depletes psychological and physiological resources
- Protective factors: community connection, family acceptance, and affirming care providers
- Affirmation works: even a single accepting adult significantly reduces LGBTQ+ youth suicide risk

Section 3: Affirming Communication

Affirming communication means actively respecting a client's identity, using their correct name and pronouns, and avoiding heteronormative assumptions. It is not complicated — it is about respect.

✓ DO	✗ DON'T
Use the client's stated name and pronouns	Assume heterosexual or cisgender identity
Ask respectfully if you are unsure: "What pronouns do you prefer?"	Use outdated or offensive terminology
Treat relationships, partners, and families as you would any client's	Disclose the client's identity without consent
Maintain confidentiality about the client's identity	Express religious or personal objections to the client's identity
Follow the client's lead about their identity and what they want to share	Ask invasive questions about the client's body or medical history

Section 4: Microaggressions and Heteronormative Assumptions

Microaggressions are brief, subtle communications that convey negative or demeaning messages — often without the speaker realizing it. Heteronormativity is the assumption that everyone is heterosexual and cisgender unless stated otherwise.

Examples of Microaggressions to Avoid

- Saying "that's so brave" when someone shares their identity
- Asking "which one is the real mom?"
- Referring to a same-sex partner as a "friend"
- Assuming the client has a spouse of the opposite sex
- Saying "you don't look gay/trans"
- Asking unnecessary medical questions about transition

Even well-intentioned comments can cause harm. When in doubt, follow the client's lead.

Section 5: Providing Affirming Behavioral Health Care

Affirming care is not about knowing everything about LGBTQ+ identities — it is about approaching every client with humility, respect, and a genuine commitment to providing non-judgmental care.

- Your personal beliefs do not override your professional obligations to care for all clients with dignity
- Ask open-ended questions that do not assume gender or sexual orientation
- Create safety: clients who feel judged will not disclose behavioral health needs
- If you make a mistake (wrong pronoun, etc.), correct it briefly and move on — do not over-apologize
- Connect clients to LGBTQ+-affirming community resources when appropriate
- Report any witnessed discrimination against LGBTQ+ clients immediately

Quick Reference Summary

Minority Stress	Chronic stress from discrimination and stigma that depletes mental health resources
Affirming Care Basics	Correct name/pronouns, no assumptions, confidentiality, follow client's lead
Suicide Risk	LGBTQ+ youth are 4x more likely to attempt suicide — take statements seriously
One Affirming Adult	A single accepting adult can significantly reduce LGBTQ+ youth suicide risk
Microaggression Rule	When in doubt, follow the client's lead and avoid unsolicited assumptions