

SIGN OF THE TIMES: PART II

LGBT Mental Health

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Stigma. This one word underlies much of the increased mental and physical health needs that the LGBT community faces. Stigma has profound effects on the psyche of those in the LGBT community, whether this is an internalized shame of being different or an externalized negative reaction to the hetero-normative world. The good news? This stigma has decreased over the past two decades. The bad news? There is still much room for improvement.

Here are some facts: LGBT individuals as a group have less access to medical care, even with the passage of the Affordable Care Act. They are less likely to have health insurance, seek medical care, report having good health, and receive preventive medical care.

The roots of mental health issues can begin early in life for LGBT patients. LGBT youth are more likely to be hurt in physical fights, experience psychological distress, need medication for emotional health issues, and complete suicide. These issues continue into adulthood. Compared to heterosexuals, there are higher rates of recurrent major depression, generalized anxiety disorder, and substance use among gay men and lesbians. Transgender adults are five times more likely to be a victim of violence compared to non-transgender adults, and 41% have reported attempting suicide. LGBT adults are more likely to smoke and to use and abuse drugs and alcohol, all of which have synergistic effects on exposure to HIV and other sexually transmitted diseases.

So how do you address all this in a 15- or 20-minute office visit? Like any good clinician who practices true biopsychosocial cultural competency,

the first thing most physicians will need to do is acknowledge that LGBT patients have multi-faceted and complex mental and physical health needs. The fact that they have sought care means they have already overcome many barriers to discussing their health. By taking an open, non-judgmental stance, one can quickly identify many issues important to an LGBT patient. Here are some unique issues to keep in mind.

The degree of "outness." An authentic self-identity is an important part of development, and hiding a secret from co-workers, family members, friends, or others can contribute to compartmentalized feelings and a false self. Patients who are struggling with "coming out" may rely on illicit substances and secretive, high-risk sex practices as a means of coping. By learning to what degree the patient is out, the clinician can gain insights about the level of social support the patient has.

Sexual health. Rather than making assumptions about sexual orientation or gender identity based on appearance or sexual behavior, clinicians should ask open-ended questions, mirroring the terms and pronouns patients use to describe themselves. Skillful and deliberate sexual histories cannot be underrated! Non-judgmental questions regarding intimate partner violence are important in the medical history as rates of intimate partner violence are higher among some groups, especially if transactional sex or sex work is involved.

Substance abuse. It is important to screen for substance abuse with LGBT patients, as it can also be connected to high-risk sexual behavior. Methamphetamine, in particular, is a common drug used among

some men who have sex with men and is connected to increased risk of HIV transmission through sexual activity. Screening for alcohol and other drugs is also important. Motivational interviewing can be an important strategy to help these patients become more aware of the harmful effects of substance abuse on their lives.

LGBT physical and mental health needs are often first identified in a primary care setting. Humility and open mindedness on the part of the clinician are vital to establishing trust and a healthy therapeutic relationship, which is the first step to evaluating, diagnosing, and treating any LGBT physical and mental health need. If and when in doubt, like anything else in medicine, ask for help. Colleagues, friends, and the SGIM LGBT Health Interest Group members can be tremendous sources of expertise.

References

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