



# The CARE *Quarterly*

Summer  
2023



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# WELCOME.

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As we celebrate June as PRIDE Month, the CARE TA Center is grateful to be working with county departments and community-based organizations across the state to support development of and access to critical crisis care and behavioral health system coordination for LGBTQIA+ communities. As the parent of a young person in the LGBTQIA+ community who has struggled with mental health issues for most of her life, I am personally grateful for those who work everyday to ensure that there is a safe and welcoming space for my child to receive services and supports.

While this edition of the CARE magazine is focused on the behavioral health landscape for LGBTQIA+ communities, we recognize that there is no single definition for the LGBTQIA+ community and we will use this term to represent the fluid and diverse range of identities, sexualities, and expressions that live along this spectrum.

Often, because of stigma and discrimination, familial and social rejection, and a hostile political environment, people in the LGBTQIA+ community are at risk for higher mental health issues and substance use disorders. However, when seeking treatment and support, many individuals experience barriers in their access to care, including lack of affirming and knowledgeable providers. While treatment and engagement varies along the spectrum of those within the LGBTQIA+ community, there are many resources that exist to support providers, families, and individuals.

In this issue you will find articles written by members of the CARE team, sharing their experience as members of the LGBTQIA+ community and highlighting the need for inclusive, equitable, and effective systems of care that address intersectionality when designing spaces to meet the unique needs of LGBTQIA+ communities, including youth and BIPOC. Articles also highlight strategies and information on cross-cultural supervision and trauma-informed workplace practices, how to make trans and gender diverse staff in your organization feel welcome, key ways to be an ally, as well as identifying resources that will help convey to those in the LGBTQIA+ community a sense of welcome and belonging when seeking services.

Lastly, we encourage you to check out the CARE TA Center Library for LGBTQIA+-focused resources and tools for advancing your care continuum efforts. These resources include products developed by the CARE TA Center, its partner agencies, and other state and national organizations, as well as tools and samples from local and county agencies that may be beneficial in your work.

*With gratitude,*  
**The CARE TA Center**

# We are *Here*: Supporting LGBTQIA+ Workers in Your Organization

from C4 Innovations

Being openly trans in the healthcare field has been one of the greatest blessings of my life. I have worked in prevention, harm reduction, gender-affirming care, patient navigation, and in the training sector while serving and working alongside brilliant people who see me fully. It has not always been simple, from interpersonal client interactions to systems-level interventions, but it has been full of learning.

As of 2021, 7.1% of people living in the U.S. identify as a part of the LGBTQIA+ community.<sup>1</sup> This means more individuals in the workforce are living freely as their true, authentic selves than we have experienced before as a society. Identity disclosure is a complex choice that LGBTQIA+ people make daily in a myriad of situations – a decision which, in the workplace, is often based on factors like safety, access to trusted allies/accomplices, and organizational values. Ensuring that staff at your agency, and future coworkers in your organization, know they are welcome and encouraged to be their whole self in the professional sector truly takes an intersectional and multi-tiered approach.<sup>2</sup>

Providing cultural humility training and technical assistance opportunities for all staff around understanding antiracist principles and how to implement them to provide high-quality care is an excellent place to start. When staff sees professional development as a value – specifically when geared toward BIPOC and LGBTQIA+ liberation and equity – we are more likely to feel welcome at decision-making tables and to show up authentically in our work.

Sometimes the backstage work is just as important as the centerstage production. Check with your HR department and leadership to ensure automated emails and systems will not utilize a name a staff member no

longer uses or deadname your coworkers. Ask your leadership if your company's health insurance covers gender-affirming healthcare and if family planning and fertility services offer inclusive services for all families.

There are small ways to make trans and gender diverse staff in your organization feel welcome. Listing your pronouns in your electronic communication, using gender neutral language to talk about your work, and not assuming your teammate's sexuality and gender are wonderful first steps.

If you are in a management role, learn more about cross-cultural supervision and trauma-informed workplace practices.<sup>3</sup>

If you are able, look at who is making decisions in your organization. Are there queer and trans people in positions of power? Do LGBTQIA+, BIPOC staff have opportunities to share their feedback about the work you are doing?

Try affinity groups, solidarity groups, or employee resource groups.<sup>4</sup> A trans or queer-led affinity group can be a great way to ensure staff has a space they feel comfortable in to discuss policy changes, recommend program advancement, and build a community for long-lasting relationships necessary to keep people sustainably connected to the work.

I have experienced a lot of different types of organizations in my professional career. No place is perfect. As human beings brought into a world founded on oppression, none of us are immune to causing harm. May we continue working together to make our world and systems more inclusive, equitable, and effective.

<sup>1</sup> Jones, J. M. LGBT identification in U.S. ticks up to 7.1%. Gallup, <https://news.gallup.com/poll/389792/lgbt-identification-ticks-up.aspx> (17 February 2022).

<sup>2</sup> Holmberg, M.H., Martin, S.G. & Lunn, M.R. Supporting sexual and gender minority health-care workers. *Nat Rev Nephrol* 18, 339–340 (2022). <https://doi.org/10.1038/s41581-022-00573-0>

<sup>3</sup> <https://think3.libsyn.com/ken-kraybill-1>

<sup>4</sup> Byrd, M.Y. (2022). Employee Resource Groups: Enabling Developmental Relationships to Support Socially just and Morally Inclusive Organizations. In: Ghosh, R., Hutchins, H.M. (eds) *HRD Perspectives on Developmental Relationships*. Palgrave Macmillan, Cham. [https://doi.org/10.1007/978-3-030-85033-3\\_10](https://doi.org/10.1007/978-3-030-85033-3_10)





# LGBTQIA+ Crisis Care

from NAMI CA

In recent years, there has been growing recognition of the unique challenges faced by individuals in the LGBTQIA+ community, particularly when it comes to accessing healthcare and social services. LGBTQIA+ crisis care is a response to these challenges, providing specialized support and services to LGBTQIA+ individuals during times of crisis. It's PRIDE Month, a time to celebrate and amplify the voices of the LGBTQIA+ community. We will explore the current state of LGBTQIA+ crisis care, the challenges, and the gaps in services throughout this article.



## What is LGBTQIA+ Crisis Care?

LGBTQIA+ crisis care refers to services and support specifically designed to assist individuals within the LGBTQIA+ community who are experiencing a crisis or emergency. This may include mental health support, suicide prevention, housing assistance, and legal advocacy. These services aim to address the unique challenges and needs that LGBTQIA+ individuals may face during a crisis.

For many of us, navigating the healthcare system can be a daunting experience, and this is especially true for those who belong to marginalized communities. From encountering discriminatory attitudes to facing a lack of understanding of unique needs, the obstacles can be overwhelming. However, learning about the experiences and stories of LGBTQIA+ individuals and their families is critically important to helping inform and improve the accessibility and quality of crisis care for them.

The Chief Operating Officer (COO) of NAMI CA, Steven Kite, shared insights on LGBTQIA+ crisis care, drawing from his own personal experiences. In his discussion, Kite incorporated first-person narratives to emphasize the intersectional experiences faced by the community.

“The LGBTQIA+ community continues our fight for recognition and equity in a world that has not always felt we were worthy of that recognition. LGBTQIA+ families have existed, of course, since the beginning of time, but in our modern understanding of what our community means in the context of the world, we have seen great triumphs and horrific tragedies. I want to put this in some context for what it means to be someone in this fight, as well as someone fighting to help individuals living with mental illness and their families.

I use fight with good reason. It's important to remember that Pride began as a riot.

The recognition of Pride, and the rights of this community, started in the Stonewall uprising in the late 1960s, when heroes like Marsha P. Johnson, Sylvia Rivera, and Miss Major stood up with many other brave folks to say the laws of this country would not define the rights that we have, nor would we be defined by the broader culture and society. We would define our own lives, our own families, and our own path to equity. They were brave enough to say that they would not be criminalized for being who they were.



This fight is similar, in many ways, to the struggle for acceptance and dignity for individuals living with mental illness and their families. When laws didn't understand the challenges and treatment didn't work, we, at NAMI, fought for a better world. We fought for families to live lives of dignity and respect, free from discrimination. We have found together that struggle would be messy, beautiful, and emblematic of the best parts of ourselves and the world.

LGBTQIA+ people have also had struggles with the medical profession, specifically psychiatry. Members of this community were labeled as having a mental illness and were sometimes hospitalized; the official diagnosis didn't leave the Diagnostic and Statistical Manual of Mental Disorders (DSM) until as recently as 1987. In fact, there are many nations in the world, including our own, that create laws that discriminate actively against LGBTQIA+ people. For these reasons, amongst many others, our community has had a very complicated relationship with the mental health field.

It's often said that LGBTQIA+ people can be born into an "enemy camp," meaning we may be isolated even within our own families. This can make it even harder to address the fullness of our identities. It can begin with youth feeling like they are not good enough or worthy of getting the help they need.

For me, this meant that I began my journey in mental illness as an early consumer of psychiatric services. My struggle with anxiety began when I was a child. From an early age, I strove to prove myself and achieve.

I remember always finding the kids who were left out in elementary school and trying to make them feel included. As I look back, I realize that I saw clearly how our society doesn't always take care of everyone, and how it's up to each of us to do what we can to build the world we want. I also see that in those smaller acts of kindness there was probably an element for me of feeling different and wanting that same kindness shown to me.

Throughout my life, my coping mechanism has always been humor. It has been the way that I've survived many personal challenges, as well as how I've seen so many of my community heroes overcome theirs. Humor is a hallmark of NAMI that helps us make it through our journey and recharge our batteries in the face of unimaginable odds. In our support groups, "we embrace humor as healthy" is one of our principles of support.

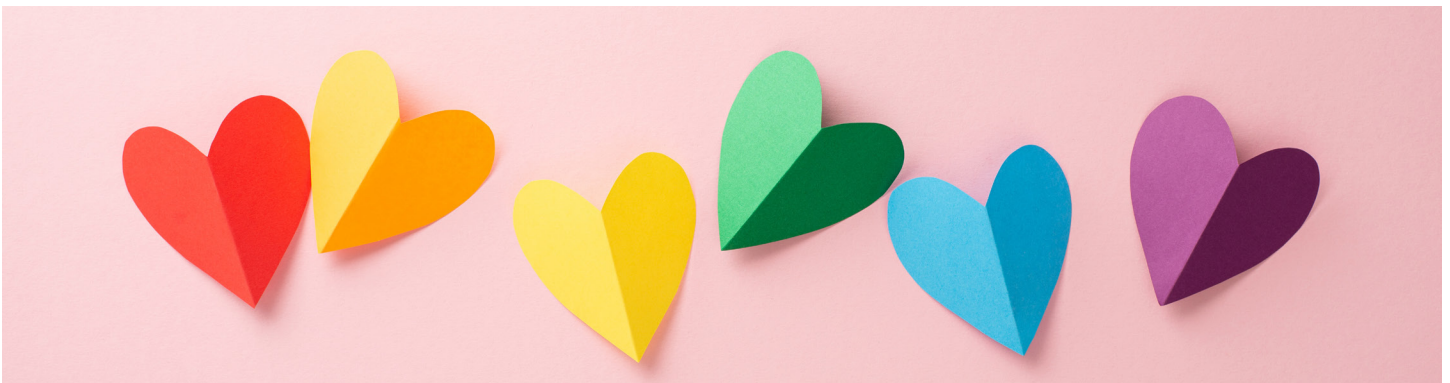
Before I came to NAMI, I worked in the private sector and always felt like something was missing. Although I was building businesses to be more successful, it seemed empty to me, in many ways. I wasn't working toward something that spoke to my values as a person and I realized that I wanted my hard work to pay off — not for myself, but for the world.

These ideas combined into the job I have working to advocate for individuals, families and communities who may also feel left out. I want to find ways to bring them in. It is true that we are stronger together. This is true in our families, this is true in our communities, this is true in our world. Starting out, I worked with young people who were in residential care facilities. From there, I moved on to a local organization in Sacramento that worked to directly serve individuals living with mental illness, breast cancer, and HIV/AIDS; we also held a youth group for LGBTQIA+ people thinking about their identities and deciding about their futures."



As we see through Steven's story, navigating through services and trying to find care designed for your specific needs can be challenging. To assist in finding support, the term LGBTQIA+ is widely used because it is inclusive of the different parts of the diverse spectrum of gender and sexual identities. Providing resources that reflect the needs of those we serve, including resources that are specific to the language, culture, gender identity and expression will help convey to those in the LGBTQIA+ community a sense of welcome and belonging when seeking services.

You may find you need to make multiple calls to find a mental health caregiver who is available to see you. Many people encounter waiting lists when they call a caregiver. If you are given the opportunity to go on a waiting list for a provider, go ahead and do it! Sometimes appointments become available faster than you might expect, and you can always cancel an appointment if you find another option sooner. However, if you are experiencing a mental health crisis and cannot wait for an appointment, seek help using the Emergency Numbers listed below or seek support from a local NAMI support group. [Find your local NAMI California affiliate here. https://namica.org/find-your-local-nami/](https://namica.org/find-your-local-nami/)



When faced with challenges, it can be overwhelming to determine the best course of action. However, it is important to remember that there is rarely a one-size-fits-all solution. With careful consideration of the available options, and an understanding of your individual circumstances and priorities, you can make an informed decision that addresses the challenges you may face.

Below are some hotlines that could be found useful:

### **Suicide & Crisis Lifeline**

- Number: 988
- Description: Trained responders are available to provide free, confidential emotional support.

### **Trevor Project Suicide Hotline**

- 1 (866) 488-7386
- Description: Connect to a counselor who is understanding of LGBTQIA+ issues by phone, online, or text START to 678-678 <https://www.thetrevorproject.org/>

### **Trans Lifeline**

- (877) 565-8860
- Description: Run by and for transgender people, the lifeline provides trans peer support, connection, and resources: <https://translifeline.org/>



### **The Network LA Red**

- (617) 742-4911
- Toll-Free: (800) 832-1901
- TTY: (617) 227-4911
- Description: A survivor-led organization that works to end partner abuse in LGBTQIA+ communities: English – <http://www.tnlr.org/en/>; and Spanish – <http://www.tnlr.org/es/>

### **Center for Hope and Healing**

- (800) 542-5212
- Description: For survivors of sexual assault of all gender identities and sexual orientations. Online chat is also available: <https://chhinc.org/>

### **National Deaf Hotline**

- Video Phone: (855) 812-1001
- Description: Safe, confidential crisis intervention for deaf survivors of domestic and sexual violence. Chat and email are also available: <https://thedeafhotline.org/>

### *Resources:*

Namica.org Reflections on Pride Month and Fighting For a Better World

<https://namica.org/blog/reflections-on-pride-month-and-fighting-for-a-better-world/>

Mental Health and Gender-Affirming Care Resource Guide

<https://www.mass.gov/files/documents/2023/01/04/MAAG>

[LGBTQ2IA%2BMentalHealthGenderAffirmingCare\\_web%20%281%29.pdf](https://www.mass.gov/files/documents/2023/01/04/MAAG-LGBTQ2IA%2BMentalHealthGenderAffirmingCare_web%20%281%29.pdf)







# BIPOC LGBTQIA+ Experiences, Mental Health, and Safe Spaces

## PRIDE Observance and LGBTQIA+ Behavioral Healthcare Supports

Samantha Tiscareño, MPP, Research Analyst 2, Impact Justice

Forty-two percent of people who identify as LGBTQIA+ in the United States also identify as Black, Indigenous, and people of color (BIPOC).<sup>1</sup> Despite the fact that the experiences of BIPOC LGBTQIA+ adults and youth contrast from their white peers, white adults and youth continue to dominate the conversation.<sup>2</sup> A survey conducted by The Center for American Progress uncovered LGBTQIA+ adults of color were more likely than white LGBTQIA+ adults to face discrimination in areas such as health care, education, and housing.<sup>3</sup> Further, the survey found that LGBTQIA+ adults were more likely than non-LGBTQIA+ people of color to have poor mental health outcomes that impacted their daily lives.<sup>4</sup>

As evidenced by research, an intersectional<sup>5</sup> lens is vital when examining the experiences of BIPOC LGBTQIA+ communities. Being at the intersection of two or more identities that often experience discrimination, bias, and prejudice can

negatively impact one's well-being and mental health. Providing adequate mental health support requires understanding how various factors impact individuals with diverse identities. To understand the experiences of BIPOC LGBTQIA+ adults and youth, we must recognize how ideology, practices, and social constructs like culture, race, gender, sexual orientation, religion, white supremacy, and colonialism shape those experiences. A study by Edith Cowan University's Kurungkurl Katitjin, Centre for Indigenous Australian Education and Research reported that participants "experienced a constant negotiation of identities, surveying risks, or hiding parts of one's self—all of which felt (understandably) exhausting."<sup>6</sup> Additionally, the study highlighted that participants felt there was a lack of safe spaces for the LGBTQIA+ community.<sup>7</sup> As we work to provide safe spaces and understand the factors that impact the well-being and mental health of BIPOC LGBTQIA+ folks, we must remember the problem is the systems of oppression that marginalize communities, not their identities.<sup>8</sup>

<sup>1</sup> The Williams Institute, UCLA School of Law. (2019). *LGBT Demographic Data Interactive*. <https://williamsinstitute.law.ucla.edu/visualization/lgbt-stats/?topic=LGBT#density>

<sup>2</sup> Human Rights Campaign Foundation. (2021). *The state of mental health in LGBTQ communities of color*. <https://hrc-prod-requests.s3-us-west-2.amazonaws.com/assets/BIPOC-Mental-Health-LGBTQ-2021.pdf>

<sup>3</sup> Medina, C., & Mahowald, L. (2022). *Discrimination and barriers to well-being: The state of the LGBTQI+ community in 2022*. The Center for American Progress. <https://www.americanprogress.org/article/discrimination-and-barriers-to-well-being-the-state-of-the-lgbtqi-community-in-2022/>

<sup>4</sup> Ibid.

<sup>5</sup> Term coined by Kimberlé Williams Crenshaw, a pioneering scholar, civil rights activist, and law professor.

<sup>6</sup> Hill, B., Uink, B., Dodd, J., Bonson, D., Eades, A. & Bennett, S. (2021). *Breaking the silence: Insights into the lived experiences of WA aboriginal/LGBTIQ+ people, Community summary report 2021*. Kurungkurl Katitjin, Edith Cowan University. Perth. WA. <https://www.supportiv.com/identity/lgbtqi-alienation-within-indigenous-communities>

<sup>7</sup> Ibid.

<sup>8</sup> The Mind Clan. Understanding 'intersectionality' in mental health. <https://themindclan.com/blog/what-does-intersectionality-mean-mental-health/>



Now more than ever, it is essential to support organizations, individuals, and movements working to cultivate safe spaces for BIPOC LGBTQIA+ communities. It is vital to consider intersectionality when supporting and designing spaces for BIPOC LGBTQIA+ communities. A study conducted by Polaris described how BIPOC LGBTQIA+ participants did not feel there was a space for them because of their race.<sup>9</sup> In the study, one participant shared that they only felt safe walking into a space when they saw someone who looked like them, a trans Latina.<sup>10</sup> Spaces where individuals feel safe to show up as their whole selves and not hide or compromise one or more of their identities are safe spaces. Safe spaces allow individuals to discuss shared experiences, feel physically and mentally protected, empower one another, and be in community. Whether formal or informal, these safe spaces support positive mental health and well-being outcomes for BIPOC LGBTQIA+ adults and youth.<sup>11</sup>

The following organizations, programs, and resources support BIPOC LGBTQIA+ communities. We encourage connecting and supporting these and similar resources in your local community in order to best serve LGBTQIA+ folks.

- [Bay Area American Indian Two-Spirits \(BAAITS\)](#) offers a monthly virtual space, titled Two Spirit Talking Circle for the Indigenous Two Spirit community.
- [Santa Clara County Behavioral Health Services](#) has a peer-run program, The Q Corner. In partnership with other organizations, the program hosts support groups in English and Spanish. The support groups offered are Trans/Non-binary/Gender non-conforming Peer Support Group in English and Spanish, and LatinX Diversa Group in Spanish.
- [Bienestar](#) hosts several support groups in Spanish and English in the San Fernando Valley, Los Angeles, Long Beach, and Pomona. Some of the support groups offered are for gay and bisexual men, transgender women, LGBTQIA+ youth, and Spanish-speaking LGBTQIA+ people.
- [The Trans Wellness Center](#) in Los Angeles provides individual counseling sessions on Wednesdays and Thursdays.
- [The San Diego LGBT Community Center](#) offers virtual and in-person support groups for people who identify as Black and Latinx.
- The [National Queer and Trans Therapists of Color Network](#) is a healing justice organization providing practitioner development, healing justice resources, technical assistance for social justice organizations, and field building. Healing justice resources include a practitioner directory and financial assistance for psychotherapy to queer and trans people of color who cannot afford to pay.
- [The Trevor Project](#)'s mission is to end suicide among lesbian, gay, bisexual, transgender, queer, and questioning young people. The Trevor Project centers the mental health and well-being of young people through crisis services, peer support, research, public education, and advocacy. Some of their resources include [Black & LGBTQ: Approaching Intersectional Conversations Guide](#), [Supporting Black LGBTQ Youth Mental Health Guide](#), and [Multiracial LGBTQ Youth Face Heightened Suicide Risk Report](#).
- [Desi Rainbow Parents & Allies](#), for those of South Asian origin and roots, hosts a monthly LGBTQIA+ Support Group to share and discuss family acceptance.
- [Fireweed Collective Groups](#) offers a virtual QTBIPOC Support Space. The group focuses on connection through shared life experiences and mutual aid.
- [Familia: Trans Queer Liberation Movement](#) established the Healing & Liberation Program. The program is for trans and queer individuals who have gone through incarceration, detention, and forced migration. The focus is on connection with oneself and others and disconnecting from the violence endured.

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<sup>9</sup> Polaris. (2022). LGBTQIA+ and a safer space need. <https://polarisproject.org/wp-content/uploads/2022/09/San-Diego-LGBTQ-Safer-Spaces-Report-by-Polaris.pdf>

<sup>10</sup> Ibid.

<sup>11</sup> Ibid.



# LGBTQIA+ Youth and Mental Health Awareness

Pride Month is a worldwide celebration that honors LGBTQIA+ culture, rights, and identity, and acknowledges the struggles and achievements of the past, while working toward a more equitable and inclusive future. While there is much to celebrate, unfortunately, LGBTQIA+ individuals still face stigma and discrimination based on their sexual orientation, gender identity, and/or gender expression. Pride Month is an opportunity to bring awareness to the impacts of stigma on the mental health of individuals in the LGBTQIA+ community.



Within our mental health care system, LGBTQIA+ youth represent a wide spectrum of gender identities, sexual orientations, and gender expressions. Additionally, each young person brings the unique experiences of their intersecting identities - race, ethnicity, religion, upbringing, socioeconomic status, etc. It is important to note being LGBTQIA+ doesn't cause mental health problems, nor is it caused by mental health problems. Rather, LGBTQIA+ youth are at an increased risk of developing mental health concerns stemming from exposure to circumstances like rejection, bullying, discrimination, and violence. Often, navigating the journey of adolescence is accompanied by nuances of self-discovery, growth, and development. These pivotal years can be significantly more challenging for LGBTQIA+ teens who must also grapple with fears of peer and family acceptance, stigmas, and rejection.

Recent studies highlighted by [The Trevor Project](#), a leading national organization providing crisis intervention and suicide prevention services to LGBTQIA+ people under the age of 25, conducted a national survey on LGBTQIA+ youth mental health. Below are a few key findings from the study:

- 45% of LGBTQIA+ youth seriously considered attempting suicide in the past year.
- LGBTQIA+ youth who felt high social support from their family reported attempting suicide at less than half the rate of those who felt low or moderate social support.
- Fewer than 1 in 3 transgender and non-binary youth found their home to be gender-affirming.
- 60% of LGBTQIA+ youth who wanted mental health care in the past year were not able to get it.
- 75% of youth have been discriminated against based on their sexual orientation or gender identity at least once in their lifetime.

These alarmingly high mental health and suicide rates among LGBTQIA+ youth urge us to confront the reality that more needs to be done to increase accessibility and cultural responsiveness in our mental healthcare system, especially when considering the needs of our LGBTQIA+ youth.

“In a survey of the LGBTQIA+ community, more than half of all respondents reported that they have faced cases of providers denying care, using harsh language, or blaming the patient's sexual orientation or gender identity as the cause for an illness. Fear of discrimination may lead some people to conceal their sexual





orientation or gender identity from providers or avoid seeking care altogether.”<sup>1</sup>

We must work to break down barriers to treatment by ensuring that mental health providers are properly trained and equipped to effectively treat LGBTQIA+ youth and address the unique needs and challenges they face. It's essential that we create a space for youth to be paired with the right mental health professional who can create an affirming, safe space for them to talk about their mental health needs. We must also realize that finding the appropriate health professional is about much more than a diagnosis. Establishing rapport and trust between the practitioner and the individual receiving services is key to successful mental health care. Individuals in the LGBTQIA+ community are unlikely to fully reveal the seriousness or degree of their mental health challenges to doctors, therapists, and other mental health professionals who they do not feel are accepting of their identities. The possibility of being judged, misunderstood, and/or discriminated against are amongst the main barriers to accessing treatment for LGBTQIA+ youth.



It is the responsibility of the mental health providers to educate themselves about culturally responsive practices to better serve the LGBTQIA+ community. **Creating inclusive LGBTQIA+ supportive training programs** that are culturally responsive is key to empowering our mental health care providers so that our youth can feel comfortable seeking out the help they need and deserve.

How can you help change mental health outcomes? Be an ally to the LGBTQIA+ community on their journey of self-discovery and acceptance. Being an ally can be simple:

- Ask about the individual's preferred pronouns and use those pronouns in writing, when speaking or referring to the individual.
- Provide an affirming, safe space for individuals to talk about their hopes, dreams and fears.
- Get involved when you see someone being bullied or discriminated against.
- Stand against legislation that impedes on their rights.
- Normalize conversations about how a lack of societal acceptance and lack of affirming spaces affects LGBTQIA+ mental health.





- Share mental health resources and encourage them to seek professional help when necessary.
- Educate yourself on the struggles the LGBTQIA+ community faces and how you can help make a difference.
- Use your position/power to create career and professional advancement opportunities in the mental health field.
- And above all, just be kind to others.

For more online resources on LGBTQIA+ mental health, check out the list of resources shared by [The Youth Collaboratory](#) below:

## Resources

[Creating Safer Spaces: A Toolkit for Education, Healthcare, and Community-based Organizations](#): This toolkit from [Advocates for Youth](#) is extended to LGBTQIA+ youth-serving professionals in education, healthcare, and nonprofit organizations. It is everyone's role to understand how racism, sexism, transphobia, and homophobia negatively affect young people. The goal of this toolkit is to create a safer and more welcoming environment for LGBTQIA+ youth by directly addressing homophobia and transphobia among staff and young people

[Transgender Youth Employment Toolkit](#): This toolkit from the [Los Angeles LGBT Center](#) offers transgender-specific tips, activities, and resources for case managers to integrate into the work they already do with every young person. Above all, this toolkit will provide case managers with language, tools, and insights into these young people that will help to better serve them.

[National Queer and Trans Therapists of Color Network](#): A healing justice organization committed to transforming mental health for queer & trans people of color (QTPOC).

## Training Resources

[BEAM \(Black Emotional and Mental Health\)](#): Founded by Yolo Akili Robinson, BEAM focuses on healing justice and offers toolkits, resources and training on emotionally intelligent leadership and social justice.

[Brown Boi Project](#): Created and run by Queer BIPOC and allies, Brown Boi Project provides training on racial and gender justice, healthy masculinity, and supporting LGBTQIA+ young people of color.

## Podcasts & Videos

[AfroQueer](#): A podcast about queer Africans living, loving, surviving, and thriving on the African continent and in the diaspora.

[Janelle Monáe on Growing Up Queer and Black](#): Listen to Janelle Monáe share her experience as a young, queer, black woman and her commitment to represent marginalized people through her platform.

[Herstory](#): Laverne Cox tells the story of Marsha P. Johnson, a fierce advocate for transgender rights and key activist during the Stonewall riots.

[Why Some Black LGBTQIA+ Folks Are Done 'Coming Out'](#): David Johns, Executive Director of the National Black Justice Coalition, explains why 'inviting in' is a more meaningful alternative to 'coming out'.



## Other Queer Resources

- For Teens: [The Trevor Project](#), [GLSEN \(Gay, Lesbian & Straight Education Network\)](#)
- For Queer General: [Q Card Project](#), [National LGBTQ Task Force](#)
- For Trans General: [National Center for Transgender Equality](#), [Transgender Law Center](#)
- For BIOPIC: [National Queer and Trans Therapists of Color Network](#), [Center for Black Equity](#)

## References:

<sup>1</sup>Kates, J., Ranji, U., Beamesderfer, A., Salganicoff, A., & Dawson, L. (2016). Health and access to care and coverage for lesbian, gay, bisexual, and transgender individuals in the U.S. Retrieved from <http://kff.org/report-section/health-and-access-to-care-and-coverage-for-lesbian-gay-bisexual-and-transgender-health-challenges/>





# ABOUT US.

The Crisis and Recovery Enhancement (CARE) Technical Assistance (TA) Center is a cross-agency team from the fields of mental health; training and technical assistance; crisis response and recovery; criminal justice diversion; and wraparound supports for youth and adults at greater risk of mental health crisis, including people experiencing homelessness.

The CARE TA Center is led by the Center for Applied Research Solutions (CARS) in partnership with RI International, NAMI California, C4 Innovations, Impact Justice, and Stanford Sierra Youth & Families. This project is funded by Proposition 63, the Mental Health Services Act (MHSA), and administered by the Department of Health Care Services (DHCS), Community Services Division.



## CARE TA Center Contact Information

(888) 550-6155

[CAREMHSAinfo@cars-rp.org](mailto:CAREMHSAinfo@cars-rp.org)

[care-mhsa.org](http://care-mhsa.org)

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**National Crisis Line**  
1-800-273-8255

