How to Get Help

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

If you are LGBTQQQIAP+ 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.
♦ Learn about your loved one’s illness.

SUPPORT-Family and Peer Support groups

Visit our website for more information on our no-cost programs, services, and support groups namisa.org

LGBTQIA (Lesbian, Gay, Bisexual, Transgender, Queer and or Questioning, Intersex, and Asexual)

Southern Arizona Aids Foundation (SAAF)
520-628-7223
sAAF.org/hiv-prevention-and-testing/tlc4/

Anti-violence Project Support Line
1-800-553-9387 520-547-6190

Parents, Families and Friends of Lesbians and Gays (PFlag) pflagphoenix.org

LGBTQ+ Youth Resources:

LGBT National Youth Hotline: Serves callers up to the age of 25 offering information, support, and local resources.
1-888-246-7743 https://www.glbhotline.org/youth-talkline.html


One N Ten: Has virtual support groups, peer support and skill building to LGBTQ+ Youth www.oneten.org

The National Runaway Safeline: Provides advice and assistance to runaways 1-800-786-2929 www.1800runaway.org

ChangeAZ

Has specialized groups for LGBT+ Community changeaz.org/lgbtqia/

TrevorSpace is an affirming international community for LGBTQ young people ages 13-24. Associated with the Trevor Project. trevorspace.org/

Depression Bipolar Support Alliance (DBSA)

A variety of online support groups for teens and youth struggling with depression or bipolar disorder. Specialized groups for LGBT community.
supportgroupscentral.com/groups

Thornhill-Lopez Center On 4th

♦ Safe, drop-in services
♦ Homeless youth support
♦ Food, clothing, and housing-referral assistance
♦ Suicide prevention programming,
♦ Sexual-violence prevention programming,
♦ HIV testing and counseling, Substance abuse prevention, Sex-positive education, Life skills, Culturally competent care, Computer lab, Art expression, Peer socialization. A place to be themselves.

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

Educational information and local support provided by:

Revised July 2021
Mental Health Issues among Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex, Asexual, and Pansexual (LGBTQIA+) People

According to the National Institute on Mental Health, an estimated 20% of adults 18 and older, or 1 in 5 Americans, experience a mental illness in a given year. LGBTQIA+ people also experience mental illnesses, just at a higher rate.

First and foremost, however, we must remember that being lesbian, gay, bisexual, transgender, queer, questioning, intersex, asexual, or pansexual is not a mental illness in and of itself. Just because someone is LGBTQIA+ 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, LGBTQIA+ people may face unique risks to their mental health and well-being, which mental health providers should be aware of.

Most research suggests that LGBTQIA+ people are likely to be at higher risk for depression, anxiety, and substance use disorders. One study found that LGBTQIA+ 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 LGBTQIA+ 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 LGBTQIA+ 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 lesbian, gay, bisexual, or transgender.

In one of the few studies of serious or major mental illness among LGBTQIA+ people, researchers found that GB men were less likely to report psychotic disorders, such as schizophrenia, but more likely to report mood disorders, such as depression and bi-polar disorders. They found no differences between LGBTQIA+ 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 LGBTQIA+ person with mental illness may be in the unfortunate position, then, of having to contend with both stigmas. It is often the case that LGBTQIA+ people experience a mental health care system that is not comfortable with or sensitive to issues related to sexual orientation, while the LGBTQIA+ 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 LGBTQIA+ people, families are not accepting of their sexual orientation or gender identity. In extreme cases, LGBTQIA+ 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 LGBTQIA+ people to have access to affirming, supportive, and culturally appropriate mental health services.

Violence

The societal stigma and prejudice against LGBTQIA+ 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, LGBTQIA+ 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 LGBTQIA+ clients and patients.

In sum, LGBTQIA+ 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 healthy 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! You are NOT alone!