



DEPARTMENT OF HEALTH AND HUMAN SERVICES, SUBSTANCE ABUSE AND MENTAL HEALTH SERVICE ADMINISTRATION (SAMSHA)

ISSUE: DATA COLLECTION

POLICY DESCRIPTION: SAMHSA programs provide critically needed services to many of our nation's most vulnerable citizens. SAMHSA's programs and funding opportunities largely omit the substance abuse and mental health challenges confronting lesbian, gay, bisexual and transgender (LGBT) communities across the country. LGBT people experience higher rates of mental health and substance abuse problems due to social stressors including stigma, discrimination, and anti-gay violence. Many of the highlighted at-risk populations, such as youth and elders, are likely to be doubly affected if they are LGBT. For example, LGBT youth are almost 5 times more likely than their heterosexual counterparts to have attempted suicide. Further, populations within two of the groups of focus, people living with HIV/AIDS and those who use drugs, are more likely to be LGBT. It has been well documented that LGBT people face disparities in access to culturally competent and relevant mental health and substance abuse prevention and treatment services. Therefore, inclusion of the needs and concerns of the LGBT population within the initiatives, programs, and services provided by SAMHSA are critically important to health promotion, risk reduction, and disease prevention for the LGBT community.

SAMHSA defines sexual orientation and gender identity as a "core aspect of identity." Not surprisingly, culturally competent programming is necessary to address mental illness and substance abuse in the LGBT community. According to the *Minority Health and Health Disparities Research and Education Act of 2000*, a population is considered to be a health disparity population if "there is a significant disparity in the overall rate of disease incidence, prevalence, morbidity, mortality, or survival rates in the population as compared to the health status of the general population." Being LGBT substantially impacts whether or not a person receives care and, when they do receive care, whether that care effectively speaks to all aspects of their lives.

RECOMMENDATIONS FOR CHANGE: In Title 42 of the Public Health and Welfare Act, Chapter 6A, Public Health Service, Subchapter IIIA, Substance Abuse and Mental Health Service Administration, *National Coalition for LGBT Health* www.lgbthealth.net *Mautner Project* www.mautnerproject.org



A new beginning: Policy recommendations to improve the lives of LGBT people and eliminate discrimination from federal policies

Part A--Organization and General Authorities, Sec. 290aa-4. Data collection, the language currently states:

- 1) Requisite areas of data collection on mental health with respect to the activities of the Administrator under subsection
- 2) of this section relating to mental health, the Administrator shall ensure that such activities include, at a minimum, the collection of data on
 - a) the number and variety of public and nonprofit private treatment programs;
 - b) the number and demographic characteristics of individuals receiving treatment through such programs;
- 3) the type of care received by such individuals; and
- 4) such other data as may be appropriate.

We recommend that the language be changed to:

- 1) Requisite areas of data collection on mental health with respect to the activities of the Administrator under subsection
- 2) of this section relating to mental health, the Administrator shall ensure that such activities include, at a minimum, the collection of data on—
 - a) the number and variety of public and nonprofit private treatment programs;
 - b) the number and demographic characteristics of individuals receiving treatment through such programs, **including whether the individuals identify as a member of a sexual or gender minority;**
- 3) the type of care received by such individuals; and
- 4) such other data as may be appropriate.

DESCRIBE THE PROCESS BY WHICH YOUR RECOMMENDATION CAN BE IMPLEMENTED: The Substance Abuse and Mental Health Services Administration of the US Department of Health and Human Services is responsible for this policy.