

June 1-30, 2022

PRIDE MONTH

CELEBRATING LGBTQIA+ PARENTS AND FAMILIES

Planning for Parenthood

The road to parenthood can be stressful. For LGBTQIA+ individuals and families, the journey can be especially long and complicated. Deciding when and how to have a child is a very important conversation to have with yourself, your family, and/or your partner. Selecting the right path for you depends on lots of considerations, including personal preferences, financial resources, life circumstances, and community and family support.



Find Support

It is vital to have a positive support system on the journey to parenthood. Find people who will support your goals, believe in you, and set boundaries with those who don't. Build your support system in the form of family, friends, neighbors, healthcare providers, and others in your community.

Do Your Research

The first step toward parenthood is to do your research. Speak to families that already have been down the road before you and connect with resource groups. With healthy communication, support, and resources, LGBTQIA+ individuals can experience the joys of parenthood.

What options are available to me?

- **Pregnancy:** Traditional pregnancy is possible for many individuals and couples.
- **Surrogacy:** Surrogacy is when a gestational carrier carries a pregnancy for you. This may be the right option if pregnancy is not possible for biological, hormonal, personal or medical reasons.
- **Adoption/Foster:** Within the scope of adoption, there is agency adoption, independent adoption, public agency adoption and international adoption.
- **Donor-Assisted Reproduction:** There are three main methods for artificial insemination: IVF, Intrauterine insemination (IUI), and Intracervical insemination (ICI)

For more information and resources on starting your family, visit <https://www.familyequality.org/family-building/path2parenthood/>

What Are My Resources: Being LGBTQIA+, Pregnant or Parenting, and Struggling with Substance Use

CT PROUD Program

The PROUD program offers support and family-centered treatment to LGBTQIA+ pregnant and parenting individuals of infants or young children, in all stages of substance use recovery.

CT REACH Program

The REACH Family Recovery Navigators provide community outreach and engagement services, case management, recovery coaching and community connections to treatment and recovery support resources to LGBTQIA+ pregnant and parenting individuals as they enter into and sustain recovery from substance use or co-occurring disorders.



Know Your LGBTQ+ Resources

CT has many supportive resources to assist you if you identify as LGBTQIA+ including:

- **Walk With Me**
Located in Wheeler Clinic, go to <https://www.wheelerclinic.org/services/lgbtqia-responsive-services-at-wheeler>
- **New Haven Pride Center**
Located in New Haven, go to <https://www.newhavenpridecenter.org/>
- **Triangle Community Center**
Located in Norwalk, go to <https://ctpridecenter.org/>
- **Queer Unity Empowerment Support Team (QUEST)**
Located in Waterbury, go to <https://questct.com/>
- **A Place to Nourish Your Health**
Located in New Haven, go to <https://apnh.org/>
- **Translifeline**
Virtual crisis line, go to <https://translifeline.org/>
- **Anchor Health**
Located in Hamden and Stamford, go to <https://anchorhealthct.org/>



To learn more about resources in your area visit <https://portal.ct.gov/DMHAS/Programs-and-Services/Finding-Services/LGBT-Services>

Are you struggling to reduce or stop your substance use while pregnant or parenting? You are not alone.

CT DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES

CT 24/7 TREATMENT ACCESS LINE:

CT COMMUNITY FOR ADDICTION RECOVERY

1-800-563-4086

DMHAS ADDICTION SERVICES BED AVAILABILITY

211 CT

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PRIDE MONTH BEING INCLUSIVE IN HEALTHCARE



For individuals who identify as LGBTQIA+, going to a healthcare appointment can be a daunting experience. As a healthcare provider, your role is essential in making patients feel welcome and cared for, regardless of where they are, who they are and how they are. You should be using inclusive language and non-stereotyped communication to make patients feel comfortable!

BE NON-JUDGMENTAL

At clinical practices that do not prioritize inclusive care, LGBTQIA+ patient experiences might be invalidated many times over, by the intake forms, by health history questions and by you or your staff's failure to use gender neutral pronouns. You and your staff should ensure you are creating a non-judgmental, welcoming and inclusive environment for your patients.



Questions to Ask

- Not everyone who identifies as LGBTQIA+ is going to disclose their identity to their healthcare providers. You and your care team can begin patient encounters by asking **three routine questions** of all new patients and noting their preferences in the electronic health record:
 - **What is your gender identity?**
 - **What sex were you assigned at birth?**
 - **What are your pronouns?**
- Making sure that first encounter is safe can be key to fostering continued engagement with the healthcare system and good healthcare outcomes. It's also an opportunity to recommend medical and mental health resources or refer to specialists.
- CT DMHAS can help you find appropriate LGBTQIA+ resources and referrals for your patients. Go to <https://portal.ct.gov/DMHAS/Programs-and-Services/Finding-Services/LGBT-Services>.
- The **National LGBTQIA+ Health Education Center** also offers learning resources on providing competent care for LGBTQ+ individuals.

Inclusive Language

- **Parenthood**
- **Birthing Person, Gestational Parent**
- **Non-Pregnant Person, Support Person**
- **Perinatal**
- **Pregnant People**
- **Postpartum Parent**
- **Siblings**

Exclusive Language

- **Motherhood and Fatherhood**
- **Mother, Mom**
- **Father, Husband, Male Partner**
- **Maternal**
- **Pregnant Women**
- **Postpartum Women**
- **Sister, Brother**

Generally, you should avoid using terms that assume a pregnant person is female and married, or even partnered. Also remember there are many ways that individuals refer to people in their family structures. Asking your patients open questions and not making assumptions is always best. To learn more inclusive terms and definitions go to <https://www.hrc.org/resources/glossary-of-terms>.

Screen for SUD

- LGBTQIA+ individuals are subject to many of the same risks and effects of substance use as non-LGBTQIA+ individuals
- Universal screening should be practiced to ensure quality healthcare for LGBTQIA+ patients
- Provide feedback, clear advice, goal setting, and follow-up

In collaboration with the Connecticut Women's Consortium, DMHAS is excited to offer a FREE virtual conference during PRIDE month entitled, Intersectionality and the Gender Continuum on June 10, 2022 from 9am to 4pm. Participants will receive 6 CEC's. To learn more about this conference or to register:

<https://womensconsortium.configio.com/pd/660?code=Lx2JbjoTH>

Voices from Patients

- "I identify as a non-binary lesbian. Safety in healthcare for me means that my identity will be affirmed, they have cared for people like me before & that they are educated on varying gender identities & do not seem bothered by having to remember my pronouns. I would appreciate it if I didn't have to constantly explain that there is not cisgendered men involved in my life and that whoever I'm speaking to knows what cisgender means. There is a lot to learn from a non LGBTQ+ perspective but just trying instead of disregarding it all goes a long way."
- "I identify as a gay man. Providers should ask questions about LGBTQ+ care with interest and care. If you are unsure, just ask. Do not make assumptions about peoples' pronouns, identity, or sexuality preferences. We should not need to justify our lifestyle or relationships to access medical care. Talking about it as a matter of fact and compassion, rather than opinion and judgement, makes a difference."