



SCHOOLS



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IDEAS



CONSULTING

# Increasing Your Effectiveness in Working with LGBTQ+ Populations



SPEAKER



DIRECTORIES



HORIZON



SYSTEMS



TARGETS



DEMOGRAPHICS



GOALS

# Presentation Link





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# Speaker Background

## Personal

- Life Long North Dakotan
- Part of the LGBTQ+ community
- Suicide Survivor

## Professional

- LGBTQ+ Care Coordinator, Canopy Medical
- Program Manager, Harbor Health Initiative
- BRFSS - YRBS State Data Expert
- Decade of Professional Development Training
- Award Winning Activist





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# Learning Objectives

- **Identify the barriers LGBTQ+ Patients encounter when accessing health care services**
- **Increase understanding of LGBTQ+ populations and cultural history especially as it relates to substance use**
- **Cite existing tools and process improvement strategies related to providing services for LGBTQ+ patients**



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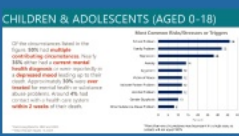
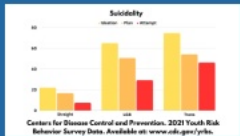
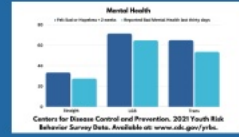
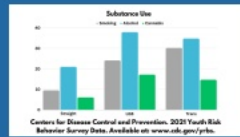
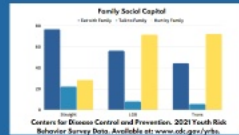
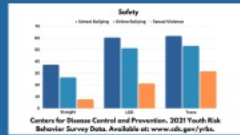
DEMOGRAPHICS



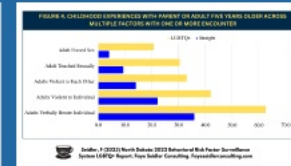
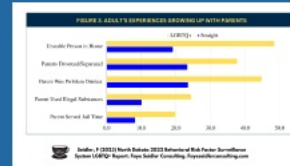
GOALS

# LGBTQ+ OUTCOME DATA

## Youth



## Adult

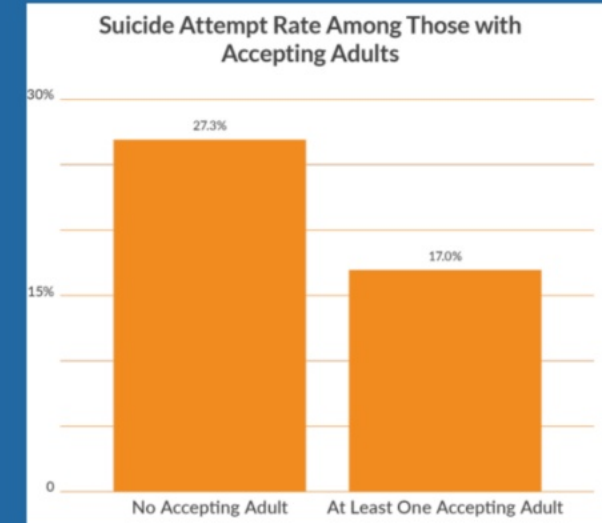


**Table 5. Mental Health Outcomes**

Questions	LGBTQ+	Straight
Told Has Depressive Disorder	51.2%	19.6%
Has Difficulty Concentrating	30.9%	9.6%
Bad Mental Health - More Than 1 Day in Month	72.6%	37.1%
Unable to Enjoy Activities - More Than 1 Day in Month	70.6%	39.8%
Intentionally Harmed by Another	9.0%	1.9%
Been to Dentist Within 12 Months	56.8%	68.0%
Sleep More Than 7+ Hours	51.0%	65.6%

Seidler, F (2023) North Dakota 2022 Behavioral Risk Factor Surveillance System (BRFSS) Report. Faye Seidler Consulting, Foyeseidlerconsulting.com

## Impact

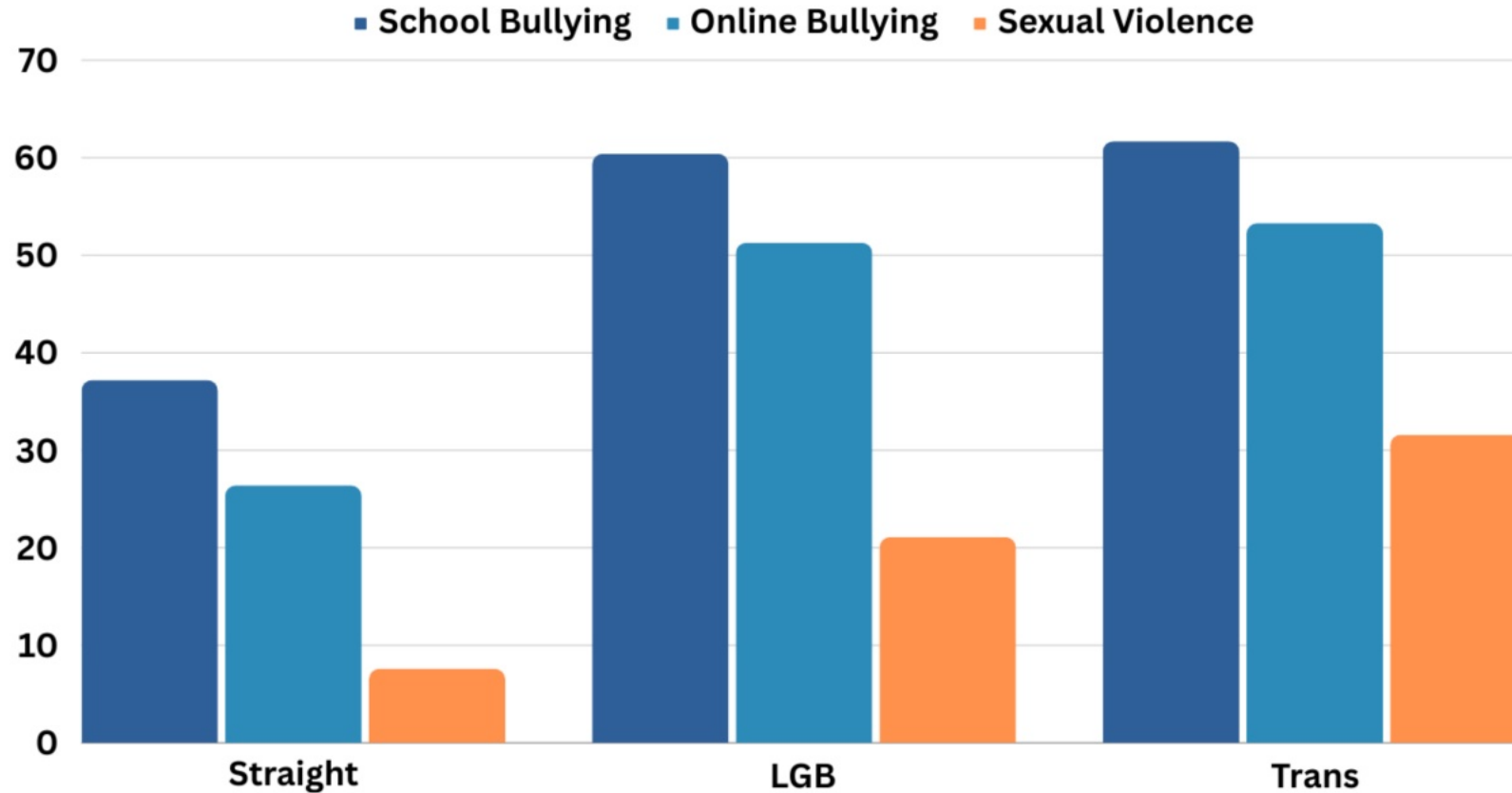


1) The Trevor Project. (2018) The Trevor Project Research Brief: Accepting Adults Reduce Suicide Attempts Among LGBTQ Youth. New York, New York: The Trevor Project.

**Key Topic: Understanding Trust and Safety**

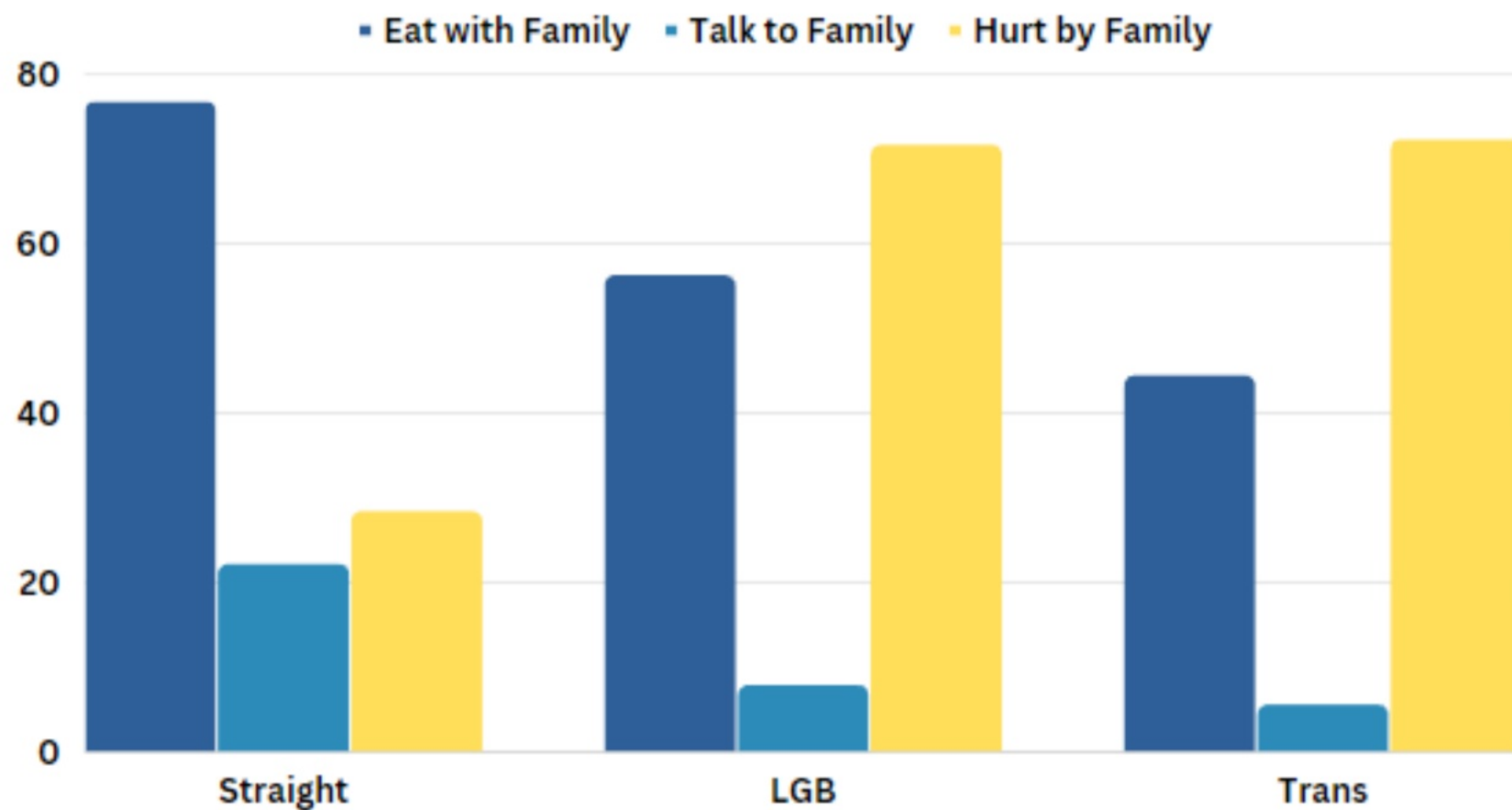


## Safety



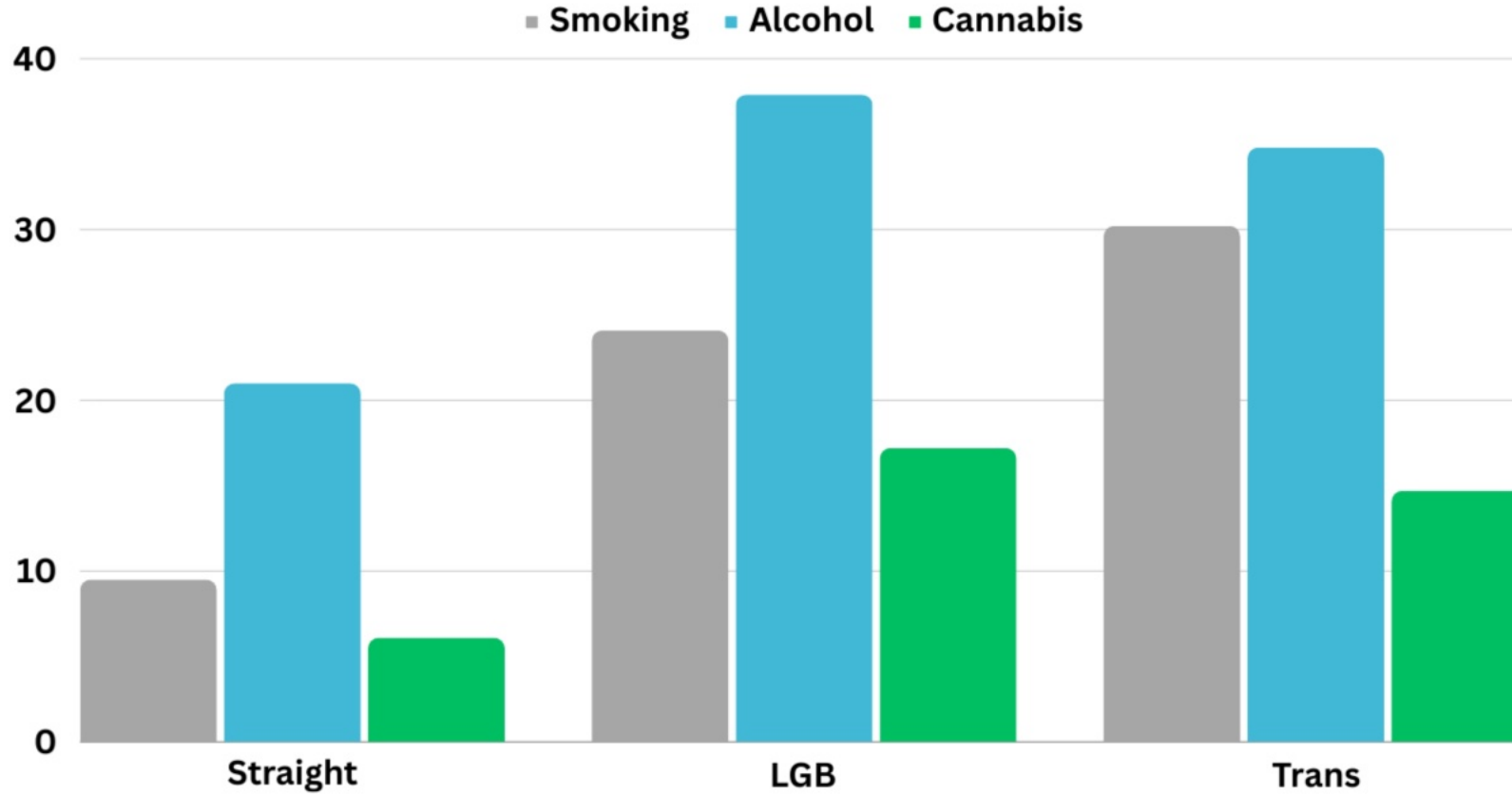
**Centers for Disease Control and Prevention. 2021 Youth Risk Behavior Survey Data. Available at: [www.cdc.gov/yrbs](http://www.cdc.gov/yrbs).**

## Family Social Capital



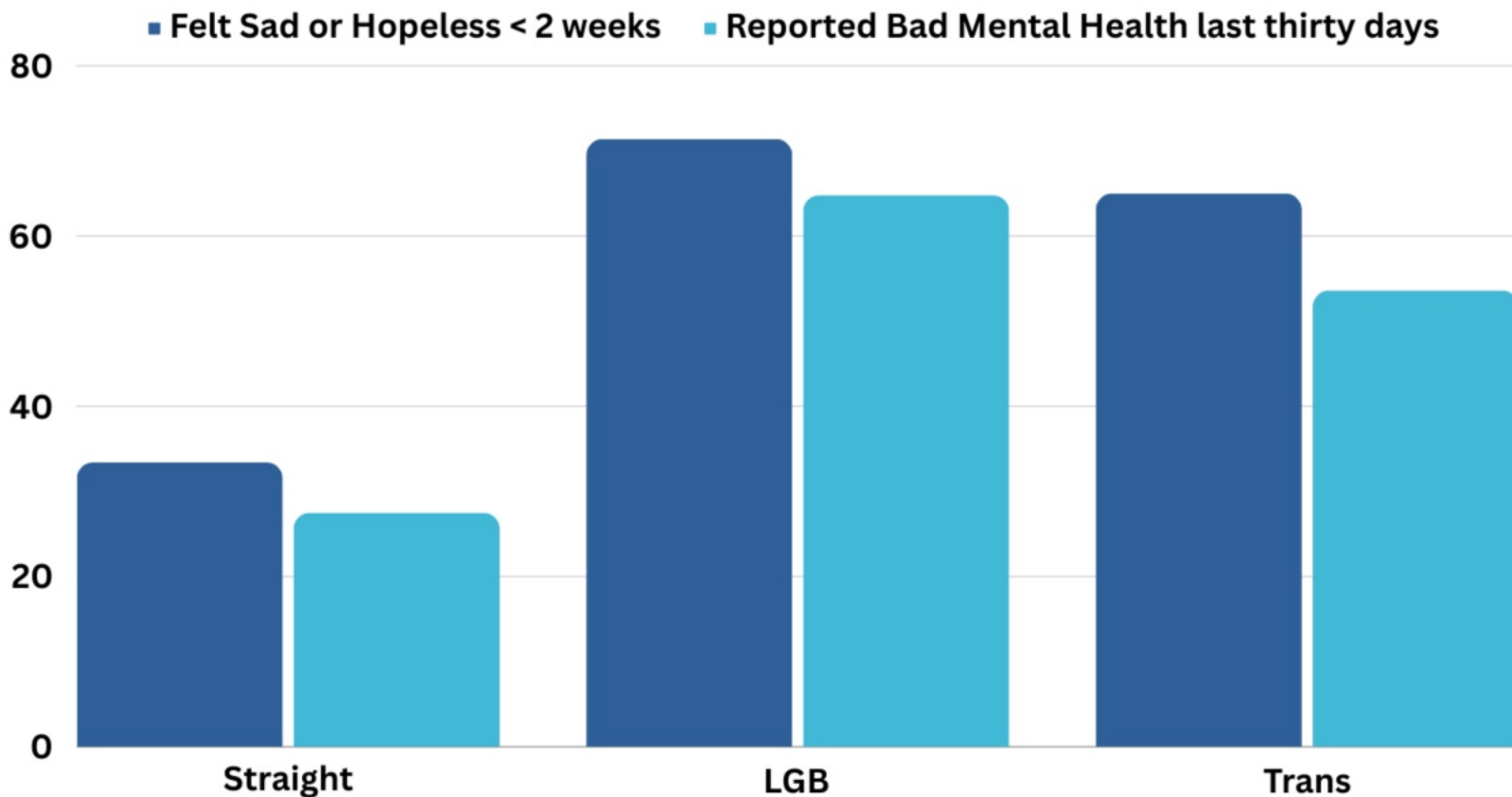
**Centers for Disease Control and Prevention. 2021 Youth Risk Behavior Survey Data. Available at: [www.cdc.gov/yrbs](http://www.cdc.gov/yrbs).**

## Substance Use



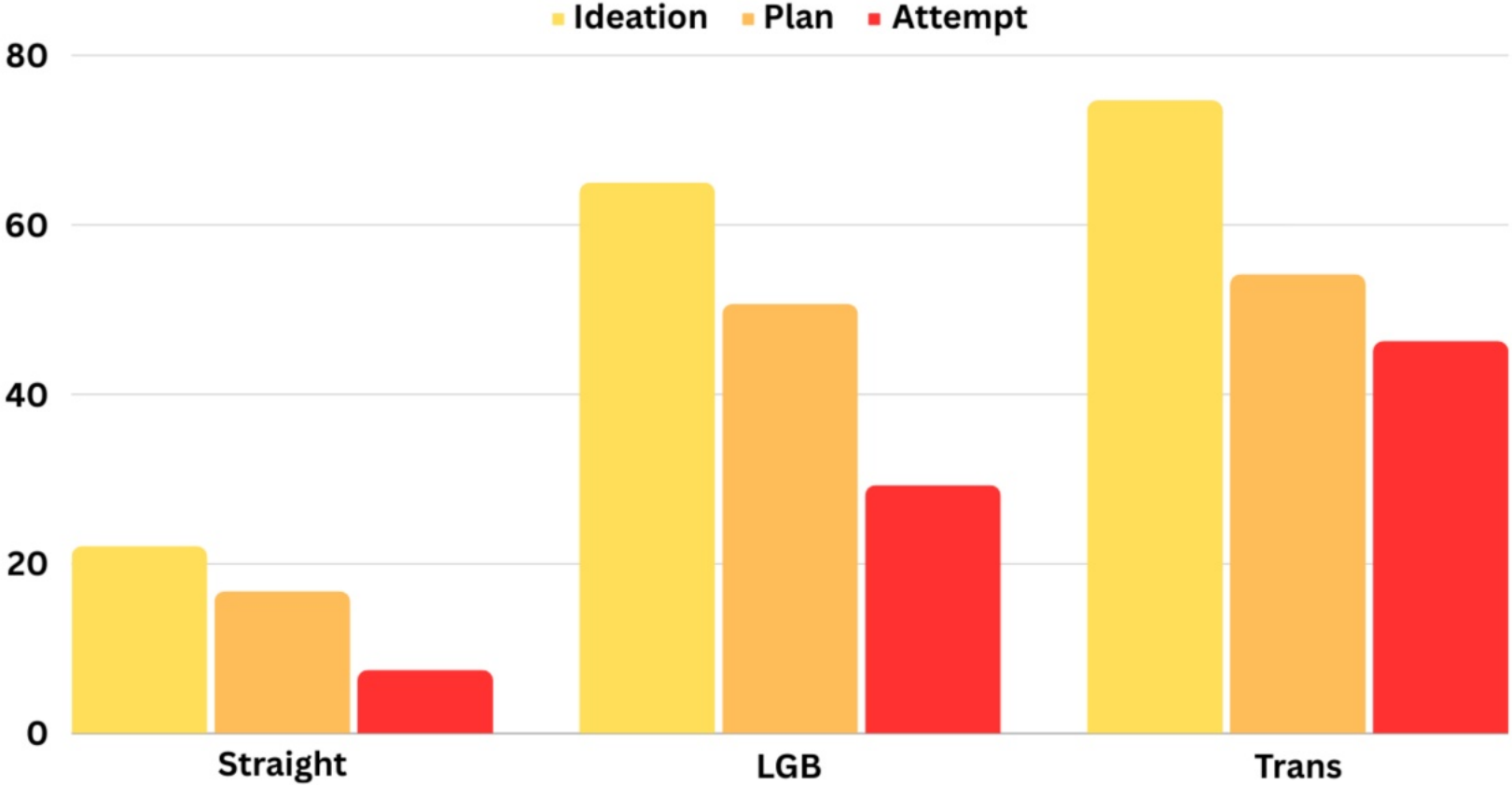
**Centers for Disease Control and Prevention. 2021 Youth Risk Behavior Survey Data. Available at: [www.cdc.gov/yrbs](http://www.cdc.gov/yrbs).**

## Mental Health



**Centers for Disease Control and Prevention. 2021 Youth Risk Behavior Survey Data. Available at: [www.cdc.gov/yrbs](http://www.cdc.gov/yrbs).**

# Suicidality

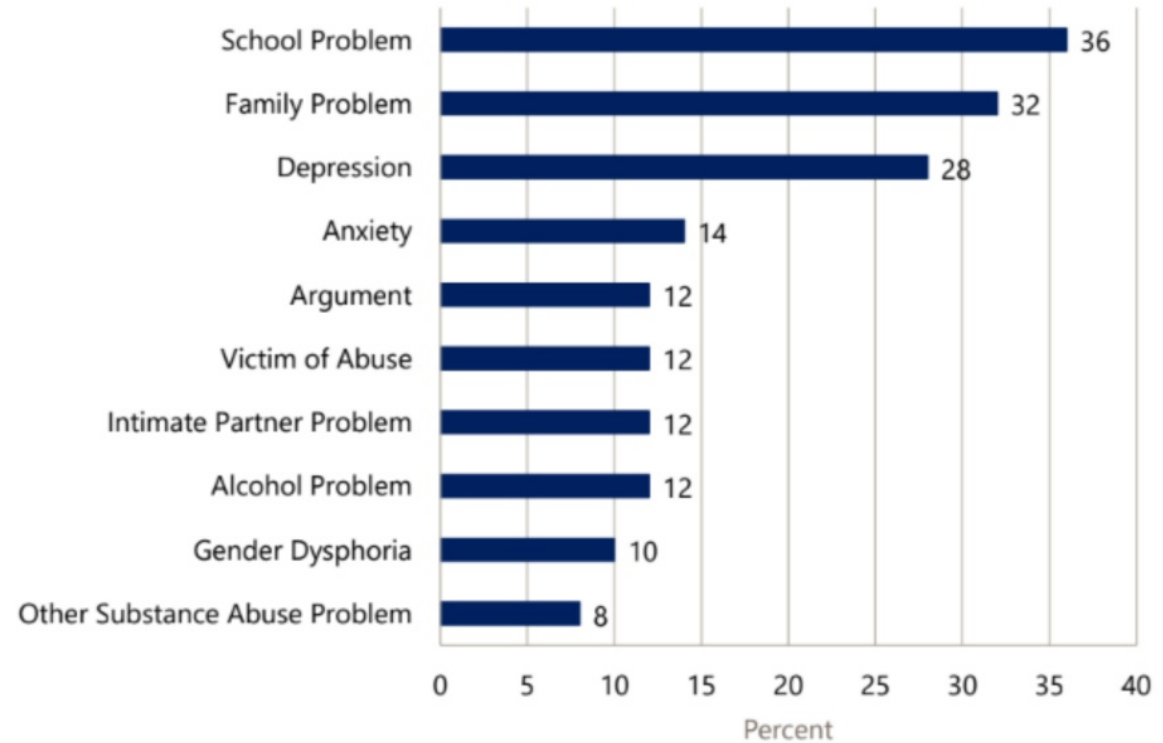


**Centers for Disease Control and Prevention. 2021 Youth Risk Behavior Survey Data. Available at: [www.cdc.gov/yrbs](http://www.cdc.gov/yrbs).**

# CHILDREN & ADOLESCENTS (AGED 0-18)

Of the circumstances listed in the figure, **50%** had **multiple contributing circumstances**. Nearly **36%** either had a **current mental health diagnosis** or were reportedly in a **depressed mood** leading up to their death. Approximately **30%** were **ever treated** for mental health or substance abuse problems. Around **4%** had contact with a health care system **within 2 weeks** of their death.

Most Common Risks/Stressors or Triggers



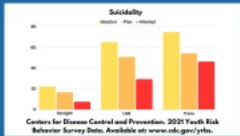
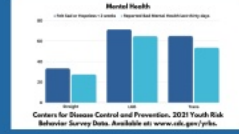
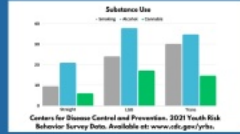
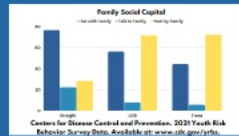
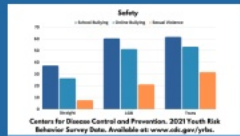
\*Preliminary Data for 2022 and 2023

\*\*Data through August 10, 2023

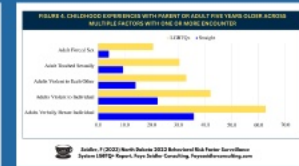
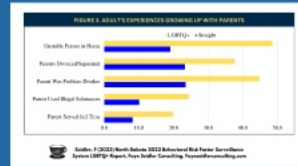
<sup>1</sup>More than one circumstance may be present in a single case, so subsets will not equal 100%

# LGBTQ+ OUTCOME DATA

## Youth



## Adult

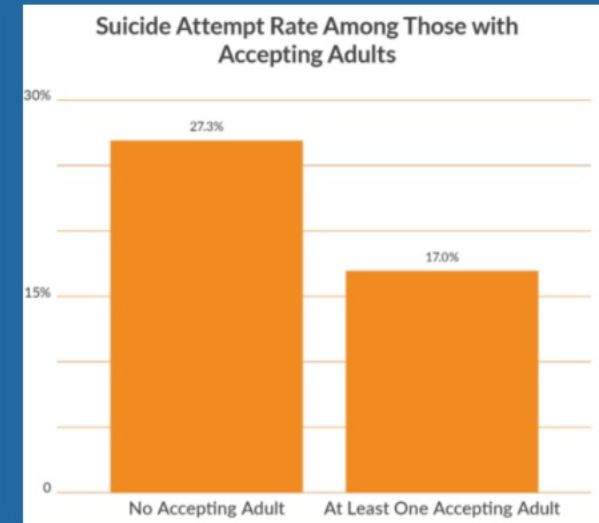


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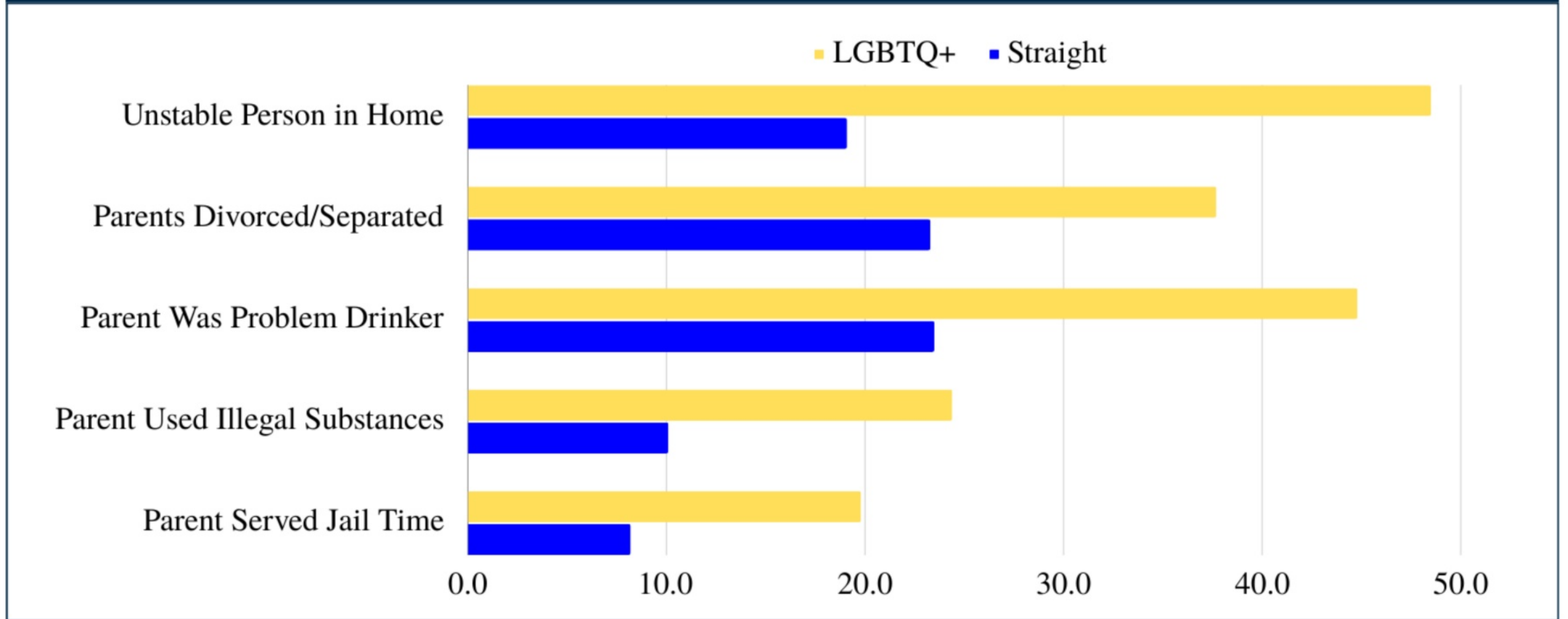
Seidler, F (2023) North Dakota 2022 Behavioral Risk Factor Surveillance System LGBTQ+ Report. Faye Seidler Consulting. FayeSeidlerConsulting.com

## Impact



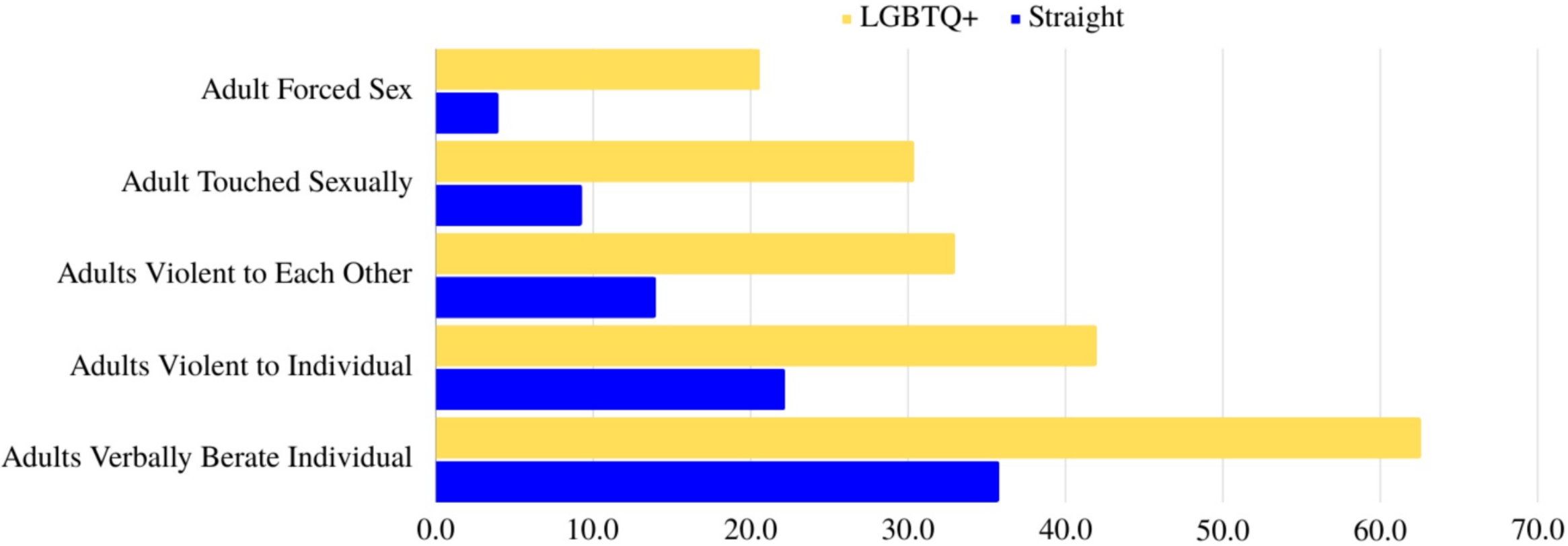
**Key Topic: Understanding Trust and Safety**

**FIGURE 3. ADULT'S EXPERIENCES GROWING UP WITH PARENTS**





**FIGURE 4. CHILDHOOD EXPERIENCES WITH PARENT OR ADULT FIVE YEARS OLDER ACROSS MULTIPLE FACTORS WITH ONE OR MORE ENCOUNTER**



**Table 5. Mental Health Outcomes**

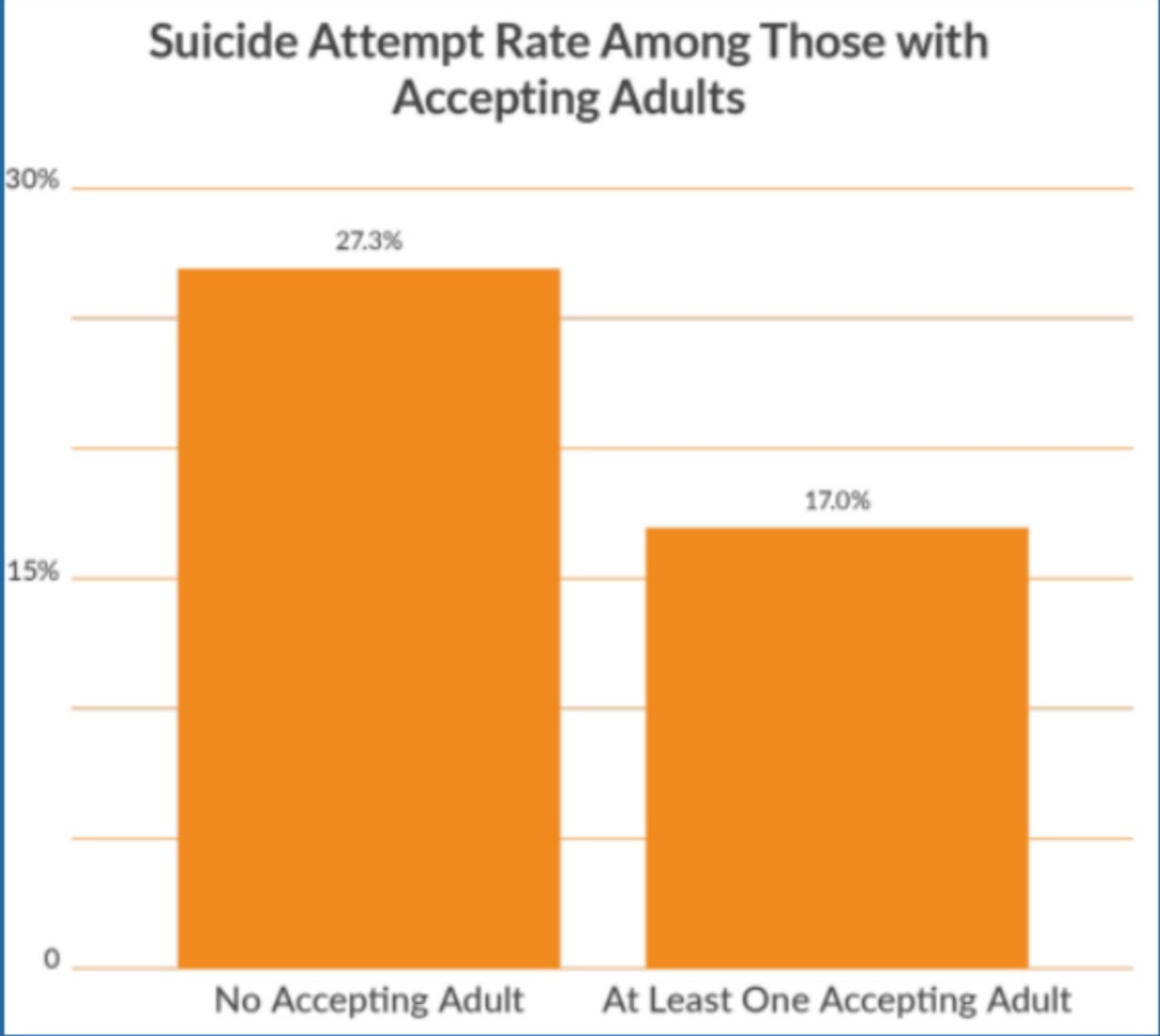
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<b>Straight</b>
19.6%
9.6%
37.1%
39.8%
1.9%
68.0%
68.6%

ance  
g.com



11) The Trevor Project. (2019) The Trevor Project Research Brief: Accepting Adults Reduce Suicide Attempts Among LGBTQ Youth. New York, New York: The Trevor Project.



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# LGBTQ+ Identity, History, and Demographics

## Some Basics To Get Started

**Trans** is Latin for "Opposite Side of" or "Out of Alignment"  
**Cis** is Latin for "Same Side of" or "In Alignment"

**Transgender** means someone who's sex assigned at birth is the opposite or out of alignment with who they are

**Cisgender** means someone who's sex assigned at birth matches or is in alignment with who they are

**Queer** has history with being used as a slur, but has been reclaimed over the last fifty years and no longer has the connotation. It is used as an umbrella term for anyone who is not cisgender or heterosexual.

These are **DEMOGRAPHICALLY** important

## Queer Narratives



## Queer Demographics

WILLIAM INSTITUTE STATE DATA

STATE	PERCENT OF LGBT ADULTS	NUMBERS OF LGBT ADULTS
West Virginia	0.1%	58,000
Mississippi	0.1%	48,000
North Carolina	0.4%	253,100
Rhode Island	0.5%	440,000
Alabama	0.6%	172,000
Idaho	0.7%	110,000
South Carolina	0.8%	192,800
North Dakota	0.9%	18,800

1) <https://williamsinstitute.lsa.umich.edu/state-data/tables/tables-lgbt-population/>



## What You Need to Know About Labels



<https://www.glaad.org/reference/lgbtq>

## It's Part of Our Biology

### Medical History

How long have we been treating trans people with hormones?

### Common Questions

How do we know that the chemistry is different?

The Data

### Science Review

Research Links and Q&A

### Science Discussion

Common Questions

## What does it feel like being Trans?

Balance and Labels

# Some Basics To Get Started

**Trans** is Latin for "Opposite Side of" or "Out of Alignment"

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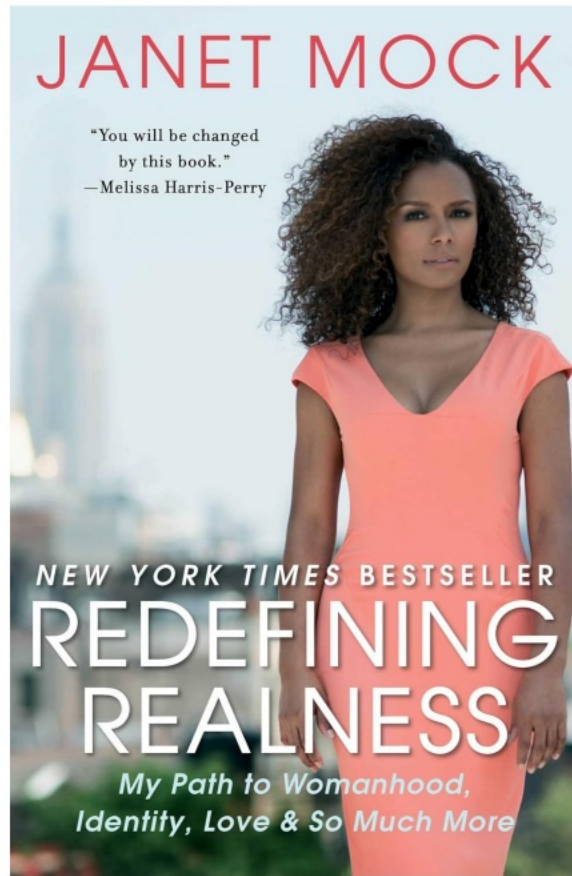
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# Queer Narratives



## Exercise on Personal Reflection

1. How old were you when you first heard or understood what it meant to be Gay? Bi? Transgender?
2. How old were you when you explored or determined your sexual orientation or gender identity? (gay, straight, trans, cisgender, etc)
3. What was the culture like or opinion about LGBTQ+ people during these moments in your life? What might it be like for other people's culture?

## What Informs our Perception?

### Timeline in our Culture

- In 1924 - Hays Code disallowed any positive representation of LGBTQ+ people. This would last for 30 years (1)
- In 1980s - Aids Pandemic rampaged both the LGBTQ + community and garnered significant cultural backlash.
- In 1986 - Matthew Shepard was killed, sparking national attention to LGBTQ+ rights

1. <https://www.jhu.edu/article/707228>

In 2012 - GLAAD studied 10 years of media representation of Transgender people and found, "only 12% of storylines were considered groundbreaking, fair and/or accurate (2)

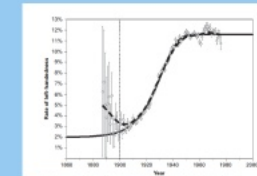
- In 2018 - 52% of people got information about trans people from media (2)
- In 2018 - 61% of people got information about trans people from media (2)
- In 2021 - 51% of people got information about trans people from media (4)

2. <https://www.glaad.org/trans-visibility>

3. <https://www.glaad.org/trans-visibility>

4. <https://www.glaad.org/trans-visibility>

Generation	Identify as LGBT	Identify as Bisexual
Generation Z born 1997-2013	20%	11%
Millennials born 1981-1996	10%	5%
Generation X born 1965-1980	4%	3%
Baby boomers born 1946-1964	3%	2%
Postwarborn born before 1946	0%	0%



# Exercise on Personal Reflection

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# What Informs our Perception?

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In 2012 - GLAAD Studied 10 years of media representation of Transgender people and found, "only 12% of storylines were considered groundbreaking, fair and/or accurate (2)

In 2008 - 92% of people got information about trans people from media (3)

In 2015 - 84% of people got information about trans people from media (3)

In 2021 - 58% of people got information about trans people from media (4)

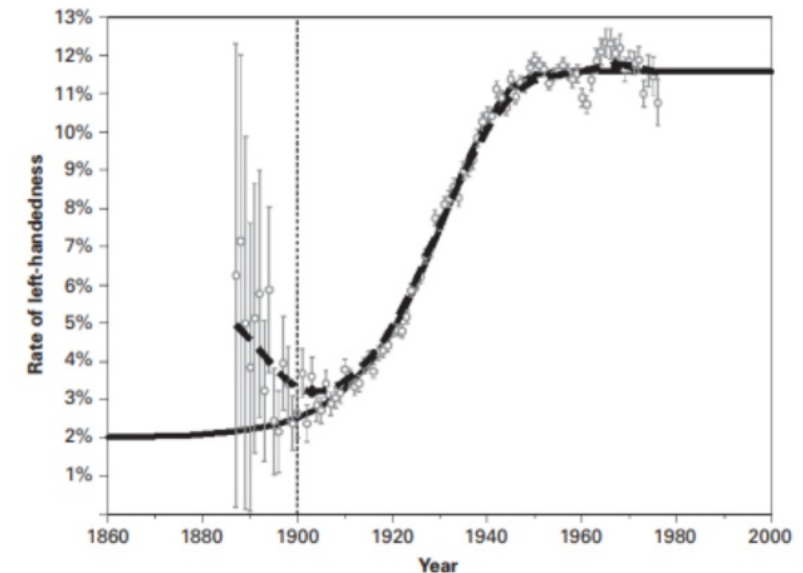
2. <https://www.glaad.org/publications/victims-or-villains-examining-ten-years-transgender-images-television>  
3. <https://www.glaad.org/releases/number-americans-who-report-knowing-transgender-person-doubles-seven-years-according-new>  
4. <https://www.pewresearch.org/fact-tank/2021/07/27/rising-shares-of-u-s-adults-know-someone-who-is-transgender-or-goes-by-gender-neutral-pronouns/>

Americans' Self-Identification as LGBT, by Generation

	LGBT %	Straight/Heterosexual %
Generation Z (born 1997-2003)	20.8	75.7
Millennials (born 1981-1996)	10.5	82.5
Generation X (born 1965-1980)	4.2	89.3
Baby boomers (born 1946-1964)	2.6	90.7
Traditionalists (born before 1946)	0.8	92.2

GALLUP, 2021

5) <https://news.gallup.com/poll/470708/lgbt-identification-steady.aspx>



6) <https://www.medrxiv.org/content/10.1101/2021.07.27.21261011v1.full.pdf>

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**3. <https://www.glaad.org/releases/number-americans-who-report-knowing-transgender-person-doubles-seven-years-according-new>**

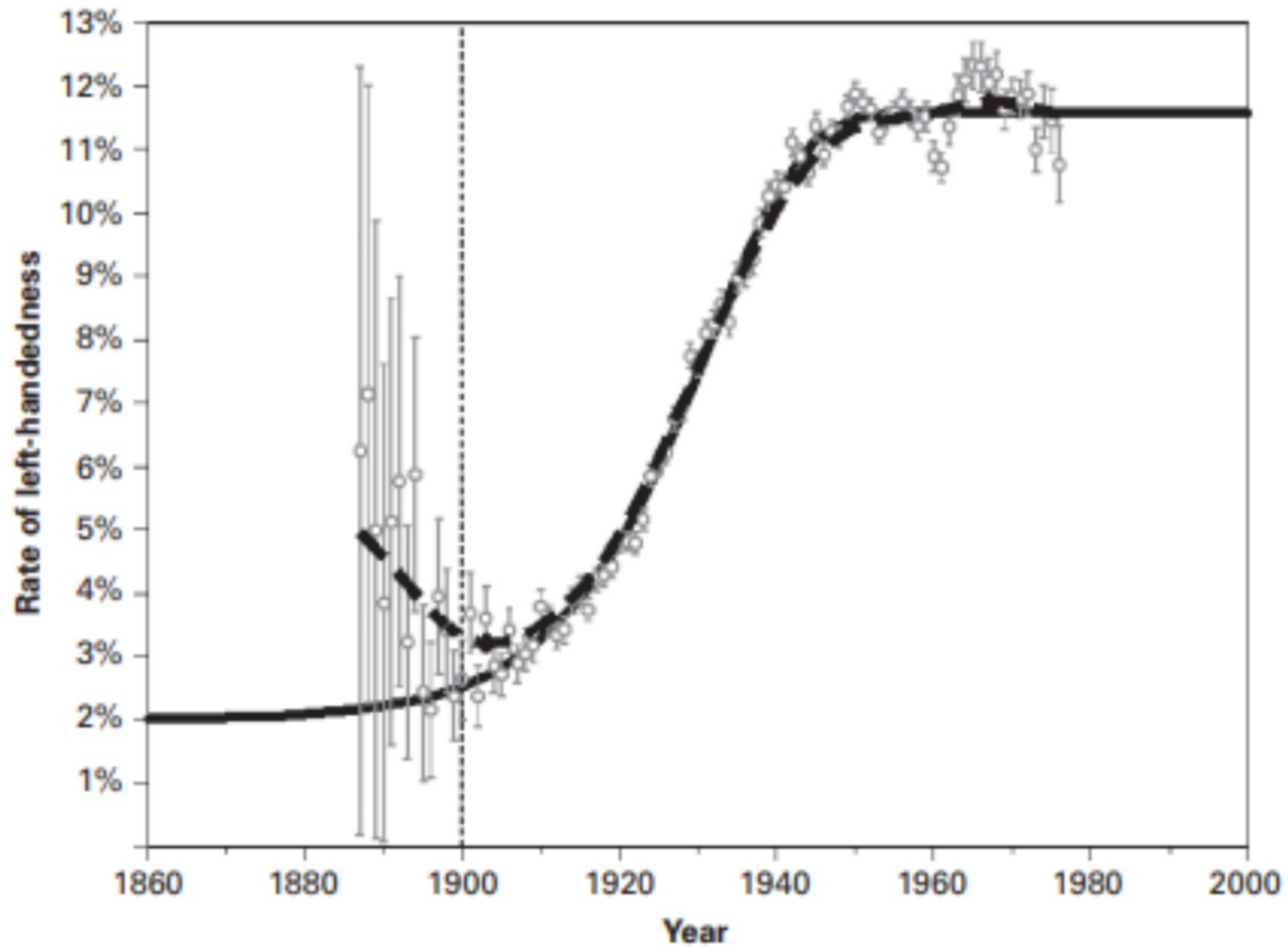
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GALLUP, 2021

5) <https://news.gallup.com/poll/470708/lgbt-identification-steady.aspx>





# PBS Two-Spirit Map

7) [https://www.pbs.org/independentlens/content/two-spirits\\_map-7\) html/](https://www.pbs.org/independentlens/content/two-spirits_map-7) html/)

# Queer Demographics

## WILLIAM INSTITUTE STATE DATA

	PERCENT OF LGBT ADULTS	NUMBER OF LGBT ADULTS
West Virginia	4.1%	60,000
Mississippi	4.1%	93,300
North Carolina	4.4%	353,100
Illinois	4.5%	446,600
Alabama*	4.6%	173,000
Iowa	4.7%	113,600
South Carolina	4.9%	192,800
North Dakota*	4.9%	28,400

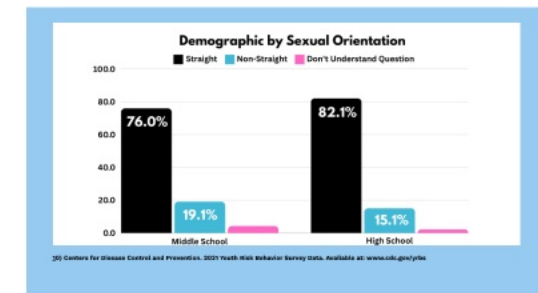
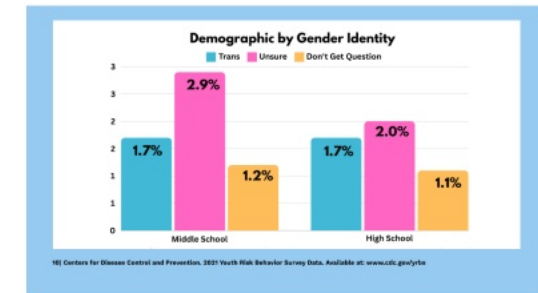
8) <https://williamsinstitute.law.ucla.edu/publications/adult-lgbt-pop-us/>

YHSI Demographic Data		
Grades	LGBTQ+	Total in Survey
7th-8th	38.3%	1,095
9th-12th	15.1%	1,139
Estimated ND Population		10,468

NHHS LGBTQ+ Data		
Age	LGBTQ+	Total in Survey
18-24	13.0%	34
25-34	12.7%	33
35-44	5.1%	24
45-54	2.8%	14
55-64	3.4%	24
65+	3.3%	49
ALL	5.1%	198
Estimated ND Population		30,643

YI: <https://www.williamsinstitute.law.ucla.edu/publications/adult-lgbt-pop-us/>  
NHHS: <https://www.cdc.gov/nchs/2011/youth-risk-behavior-survey/>

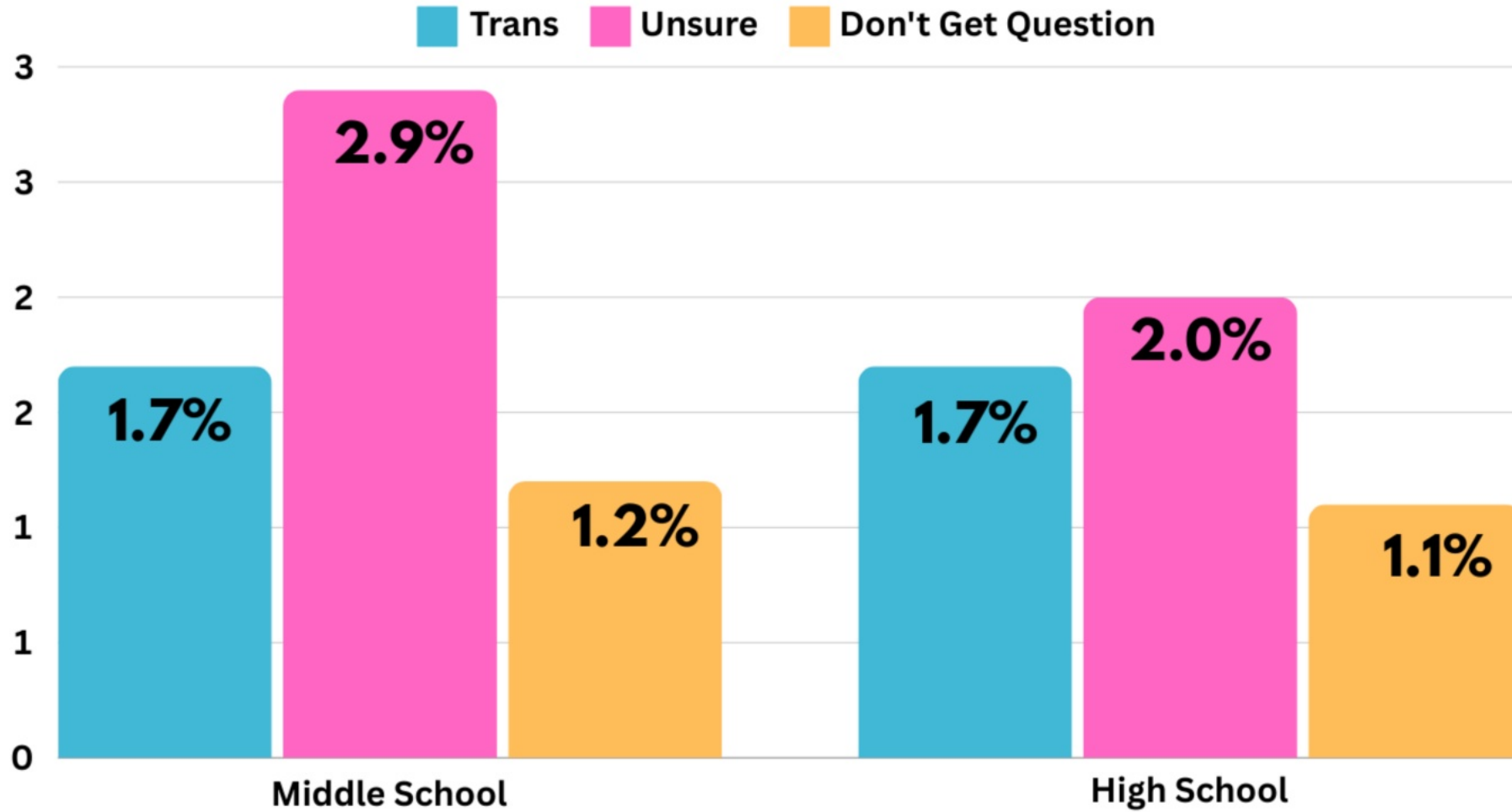


<b>YRBS Demographic Data</b>		
<b>Grades</b>	<b>LGBTQ+</b>	<b>Total in Survey</b>
7th-8th	19.1%	1095
9th-12th	15.1%	1139
Estimated ND Population		10,466

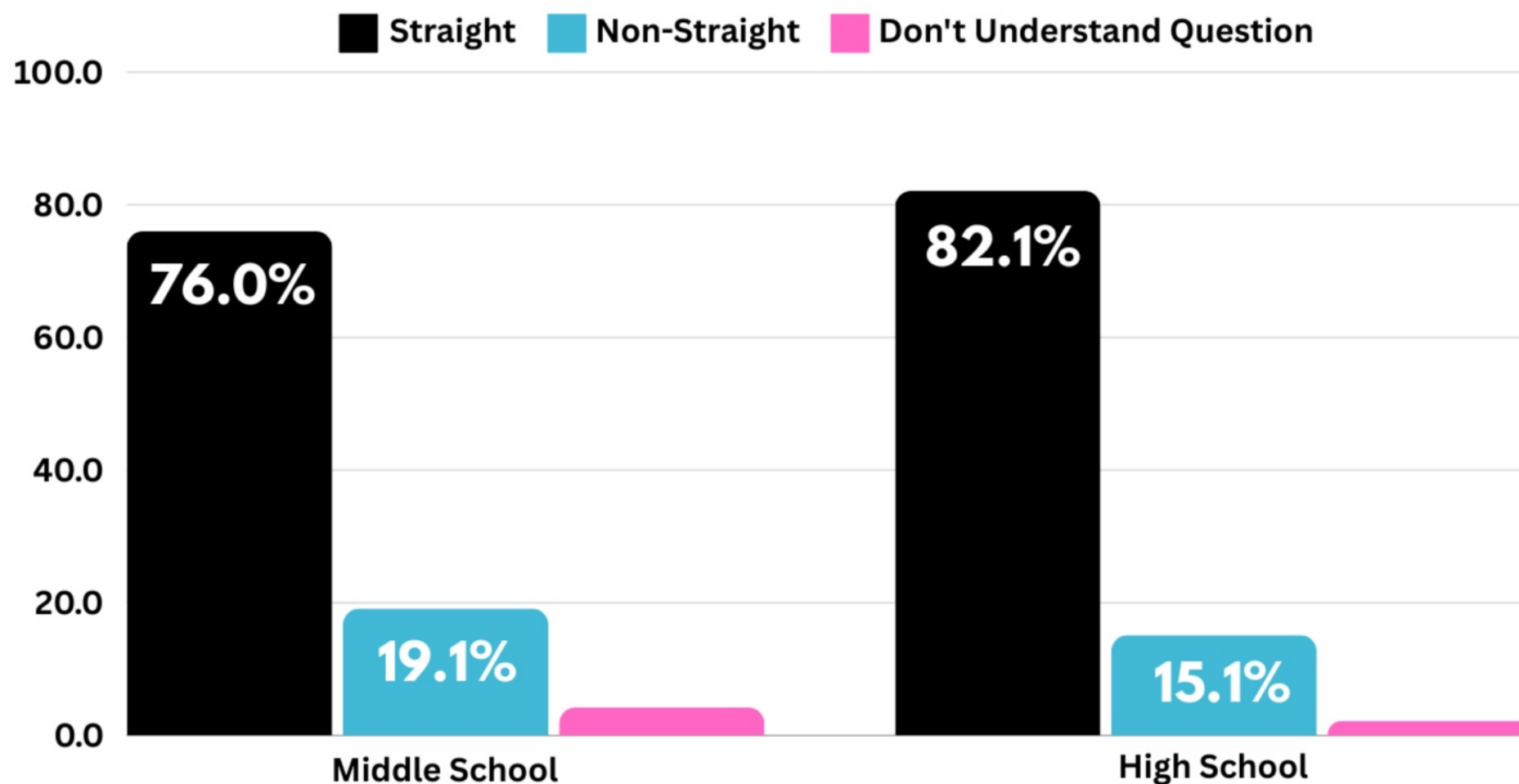
<b>BRFSS LGBTQ+ Data</b>		
<b>Age</b>	<b>LGBTQ+</b>	<b>Total in Survey</b>
18-24	13.0%	34
25-34	12.7%	53
35-44	5.1%	24
45-54	2.8%	14
55-64	3.4%	24
65+	3.3%	49
All	5.1%	198
Estimated ND Population		30,643



## Demographic by Gender Identity



## Demographic by Sexual Orientation



10) Centers for Disease Control and Prevention. 2021 Youth Risk Behavior Survey Data. Available at: [www.cdc.gov/yrbs](http://www.cdc.gov/yrbs)

# What You Need to Know About Labels



<https://www.glaad.org/reference/lgbtq>

# It's Part of Our Biology

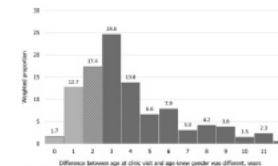
## Medical History

How long have we been treating trans people with hormones?

## Common Questions

Are Kids Getting Trick into Identifying as LGBTQ+?

### The Data



TI1 River IR, Lawson ML, Metzger DL, Trans Youth CART Research Team. Do Clinical Data from Transgender Adolescents Support the Prevalence of "Trick or Treat Gender Dysphoria"? *J Pediatr*. 2022 Apr;242:234-237.e4. doi: 10.1016/j.jpeds.2021.07.016. Epub 2021 Nov 16. PMID: 34793056.

### The Situation for Kids

1. A feeling they're different for years
2. Tired of consequences of being different: stress, harassment, rejection
3. Find groups of people like themselves: feel safe, develop confidence
4. Come out to parents

### The Situation for Parents

1. Assumption kid is straight and not trans
2. Kids not hanging out with LGBTQ+ youth or being LGBTQ+ friends
3. Not sure what to do from, wanting out of nowhere
4. Assume kid was tricked (the thinking they were different because of social pressure - there's nothing not in parenting that)

## Science Review

1. Developmental Psychologist have found gender identities develops around age 3, we all have one, and the strength of this identity is consistent for trans and cisgender kids.
2. A forty year lit review from Endocrine Society of America determined trans identity has a biological underpinning. Identical Twins were ten times more likely to have concordant trans identity than general population.
3. There is no evidence kids are influenced into being trans, most kids wait an average of 2-3 years between realizing they're trans and going to a doctor.
4. Detransition rates are typically 2-5%, more common with social rejection. Trans boys and girls have even ratio within the CDC YRBS measuring 100k students. Conversion Therapy increases suicide risk, so does misgendering or deadnaming.

### Research Limits and WPATH

12) Coleman, E., Radix, A. E., Bouman, W.P., Brown, G.R., de Vries, A. L. C., Deutsch, M. B., Ettner, R., Fraser, L., Goodman, M., Green, J., Hancock, A. B., Johnson, T. W., Karasic, D. H., Knudson, G. A., Leibowitz, S. F., Meyer-Bahlburg, H. F.L., Monstrey, S. J., Motmans, J., Nahata, L., ... Arcelus, J. (2022). Standards of Care for the Health of Transgender and Gender Diverse People, Version 8. *International Journal of Transgender Health*, 23(5), 51-5260. <https://doi.org/10.1080/26895269.2022.2100644>

## Science Discussion

### SOC VERSION 8

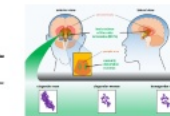


### APA 2024 STATEMENT



### CONTINUING EDUCATION OPPORTUNITY

Trans care is not perfect, but medical experts who treat and research trans care are significantly more qualified to understand short comings and research solutions and find best treatment models.



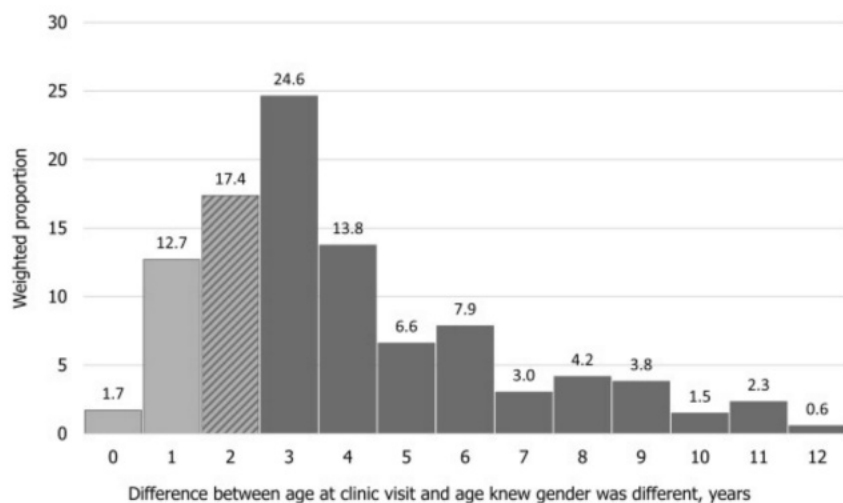
# Medical History

How long have we been  
treating trans people  
with hormones?

# Common Questions

## Are Kids Getting Trick into Identifying as LGBTQ+?

### The Data



11) Bauer GR, Lawson ML, Metzger DL; Trans Youth CAN! Research Team. Do Clinical Data from Transgender Adolescents Support the Phenomenon of "Rapid Onset Gender Dysphoria"? J Pediatr. 2022 Apr;243:224-227.e2. Doi: 10.1016/j.jpeds.2021.11.020. Epub 2021 Nov 16. PMID: 34793826.

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1. Assumption kid is straight and not trans
2. Sees kid hanging out with LGBTQ+ Youth or having LGBTQ+ Friends
3. Kid comes out to them, seemingly out of nowhere
4. Assumes kid was tricked into thinking they were different because of social pressure - thinks stopping kid is protecting them

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# Science Discussion

## SOC VERSION 8



### HISTORY AND PURPOSE

The field of transgender healthcare is a rapidly evolving interdisciplinary field. The last few years have seen a globally unprecedented increase and visibility of transgender and gender diverse people seeking support.



### ESTABLISHING THE SOC8 REVISION COMMITTEE

The Standards of Care 8 revision started by identifying a multidisciplinary team of clinicians, researchers and stakeholders using a clearly defined process. The following steps were followed to select...



### METHODOLOGY FOR THE DEVELOPMENT OF SOC8

Following the publication of the SOC8, in the future, unless there is a major need to adapt the entire document, small adaptations/adendums can take place, if/when new data is available that will affect specific...



### SOC8

SOC8 publication is complete. Please follow the link to view the document. FAQ's for the SOC8

## APA 2024 STATEMENT

" This policy statement affirms APA's support for unobstructed access to health care and evidence-based clinical care for transgender, gender-diverse, and nonbinary children, adolescents, and adults.

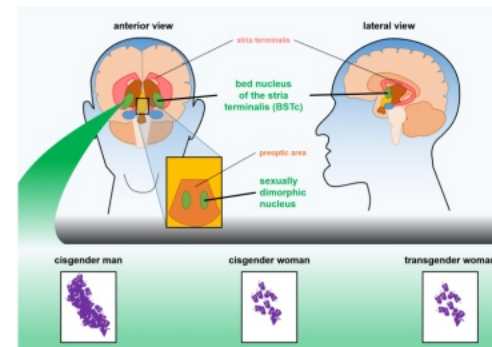
Furthermore, this policy statement addresses the spread of misleading and unfounded narratives that mischaracterize gender dysphoria and affirming care, likely resulting in further stigmatization, marginalization, and lack of access to psychological and medical supports for transgender, gender-diverse, and nonbinary individuals.

13) <https://www.apa.org/about/policy/transgender-nonbinary-inclusive-care>

## CONTINUING EDUCATION OPPORTUNITY

Trans care is not perfect, but medical experts who treat and research trans care are significantly more qualified to understand short comings and research solutions and find best treatment models.

1. <https://scihub.wikicn.top/10.1073/pnas.1909367116>
2. <https://www.endocrine.org/advocacy/position-statements/transgender-health>
3. [https://www.tandfonline.com/doi/abs/10.1080/15532739.2013.750222#:~:text=Combining%20data%20from%20the%20present,than%20for%20females%20\(23%25\).](https://www.tandfonline.com/doi/abs/10.1080/15532739.2013.750222#:~:text=Combining%20data%20from%20the%20present,than%20for%20females%20(23%25).)
4. <https://psychcentral.com/lib/there-is-no-evidence-that-rapid-onset-gender-dysphoria-exists/>
5. [https://www.jpeds.com/article/S0022-3476\(21\)01085-4/fulltext](https://www.jpeds.com/article/S0022-3476(21)01085-4/fulltext)
6. <https://fenwayhealth.org/new-study-shows-discrimination-stigma-and-family-pressure-drive-detransition-among-transgender-people/>
7. <https://publications.aap.org/pediatrics/article/150/3/e2022056567/188709/Sex-Assigned-at-Birth-Ratio-Among-Transgender-and>
8. [https://www.jahonline.org/article/S1054-139X\(18\)30085-5/abstract](https://www.jahonline.org/article/S1054-139X(18)30085-5/abstract)



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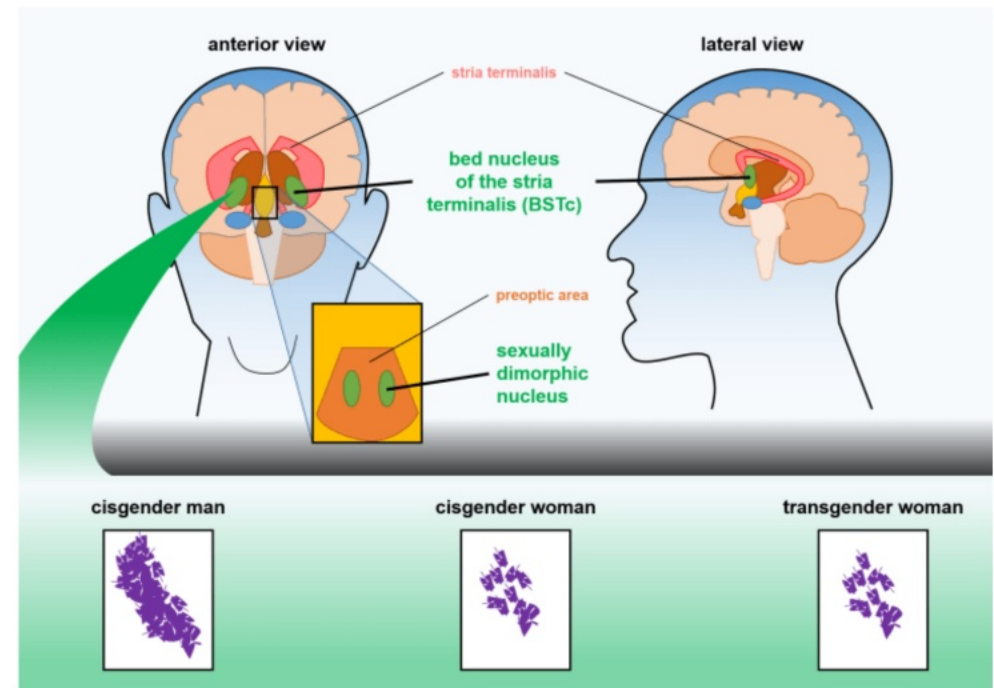
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4. <https://psychcentral.com/lib/there-is-no-evidence-that-rapid-onset-gender-dysphoria-exists/>
5. [https://www.jpeds.com/article/S0022-3476\(21\)01085-4/fulltext](https://www.jpeds.com/article/S0022-3476(21)01085-4/fulltext)
6. <https://fenwayhealth.org/new-study-shows-discrimination-stigma-and-family-pressure-drive-detransition-among-transgender-people/>
7. <https://publications.aap.org/pediatrics/article/150/3/e2022056567/188709/Sex-Assigned-at-Birth-Ratio-Among-Transgender-and>
8. [https://www.jahonline.org/article/S1054-139X\(18\)30085-5/abstract](https://www.jahonline.org/article/S1054-139X(18)30085-5/abstract)



**What does it feel  
like being Trans?**

**Balance and Labels**

# LGBTQ+ Identity, History, and Demographics

## Some Basics To Get Started

**Trans** is Latin for "Opposite Side of" or "Out of Alignment"  
**Cis** is Latin for "Same Side of" or "In Alignment"

**Transgender** means someone who's sex assigned at birth is the opposite or out of alignment of who they are

**Cisgender** means someone who's sex assigned at birth matches or is in alignment with who they are

**Queer** has history with being used as a slur, but has been reclaimed over the last fifty years and no longer has the connotation. It is used as an umbrella term for anyone who is not cisgender or heterosexual.

These are **DEMOGRAPHICALLY** important

## Queer Narratives



## Queer Demographics

WILLIAM INSTITUTE STATE DATA

	PERCENT OF LGBT ADULTS	NUMBER OF LGBT ADULTS
West Virginia	4.7%	94,900
Mississippi	4.7%	95,300
North Carolina	4.4%	353,100
Illinois	4.3%	446,000
Alabama*	4.2%	170,000
Iowa	4.2%	110,400
South Carolina	4.2%	152,800
North Dakota*	4.2%	28,400



\* <https://williamsinstitute.lsa.umich.edu/publications/adult-lgbt-pop-est/>

## What You Need to Know About Labels



<https://www.glaad.org/reference/lgbta>

## It's Part of Our Biology

**Medical History**  
How long have we been treating trans people with hormones?

**Common Questions**  
Are We Getting Tickled Identifying as LGBT?\*

**Science Review**  
The Science of Gender: A Review of the Literature

**Science Discussion**  
The Science of Gender: A Review of the Literature

## What does it feel like being Trans?

Balance and Labels



SCHOOLS



RESOURCES



DATA



APPOINTMENT



INTAKE



IDEAS



CONSULTING

# Increasing Your Effectiveness in Working with LGBTQ+ Populations



SPEAKER



DIRECTORIES



HORIZON



SYSTEMS



TARGETS



DEMOGRAPHICS



GOALS



# Five Keys to Service

## 1. Don't Categorize; Use Your Client's Terms

- Always use the labels and pronouns they identify as

## 2. Know Why You're Asking, and Explain Why

- Only ask question relevant to the care or programs they are receiving and be able to answer why you're asking that question

## 3. Consider the Whole Person

- A Transgender person's "trans-ness" is only one aspect of them, consider the whole of their race, class, family history, and life style when treating them.

## 4. Partner With Your Client

- Transgender people often know their what makes them comfortable and can educate you in what is right for their treatment.

## 5. Manage Your Curiosity

- Also consider whether you would ask a non-transgender client the same question—or how you would feel if someone asked you the question you want to know.



SCHOOLS



RESOURCES



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CONSULTING

# Increasing Your Effectiveness in Working with LGBTQ+ Populations



SPEAKER



DIRECTORIES



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SYSTEMS



TARGETS



DEMOGRAPHICS



GOALS

# Where Are We Losing Patients?

## Case Examples

1. Patient is a bisexual man but has not told any friends or family about their same sex attraction. They are worried about a possible STI due to sex with another male partner they hooked up with on Grindr. What might be barriers for them getting care?
2. Patient is a black transgender woman in the middle of her transition with a history of suicidality and one attempt. She has moved to Bismarck, North Dakota. She finds herself isolated and struggling with depression. What might be barriers for her getting care?
3. Patient is indigenous two-spirit individual who has previously been committed against their will. At the time they were treated as "male" as that was their legal sex on file. They are struggling with mental health, but afraid if they're honest it would result in losing their agency again. What might be barriers for them getting care?

**Website:** Is there any indication you're LGBTQ+ affirming?

**Lobby:** Is there any positive or negative representations within the lobby?

**Paperwork:** Can Patients identify themselves on forms with preferred name? Is legal and preferred name identified on each document for what is required?

**In Office:** Are you asking about their sexual health in a sensitive manner? Are you making assumptions about sexual health?

**Systems:** Do systems display preferred name, do receptions/nurses/doctors check these systems regularly?

**Outpatient:** Are you considering safety when referring to outpatient places or other specialists or therapists?

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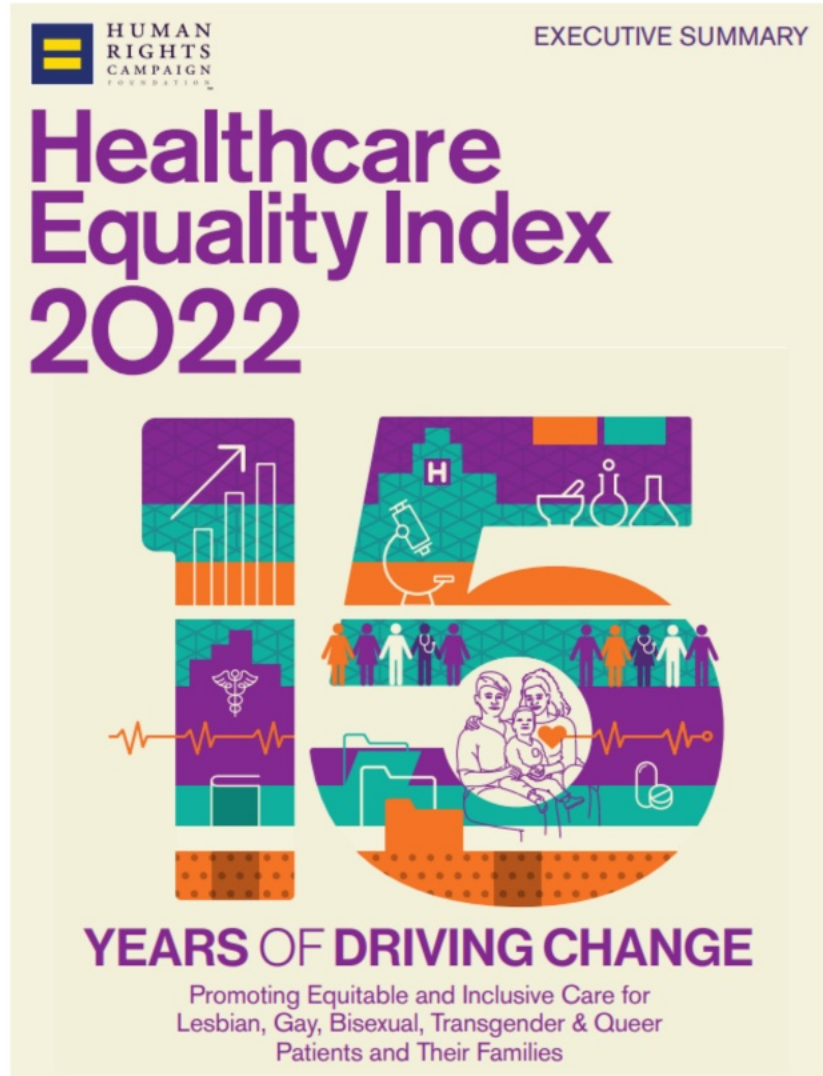


DEMOGRAPHICS



GOALS

# HRC: Health Equality Index



The **Health Equality Index** is a flagship resource for any healthcare entity. Step-by-step guides on how to improve your organization with accountability and within industry standards for human rights.

One doesn't need to reinvent the wheel - this is a fantastic starting point for any organization looking to improve both locally and regionally.

<https://reports.hrc.org/hei-2022>



SCHOOLS



RESOURCES



DATA



APPOINTMENT



INTAKE



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CONSULTING

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SPEAKER



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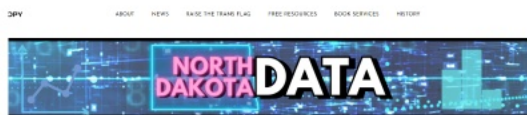
DEMOGRAPHICS



GOALS



# FAYE'S RESOURCES



## FAYE SEIDLER DATA CENTER

**2017 Behavioral Risk Factor Surveillance System LGBTQ+ Report**

Category	Percentage
Identified as LGBTQ+	11.7%
Identified as straight	88.3%
Identified as neither	0.0%
Identified as other	0.0%

**New Data**  
 The North Dakota 2022 Behavioral Risk Factor Surveillance System LGBTQ+ Report is now live. Reviewing the fact book at LGBTQ+ adult data in our state. This report is an informational summary and exploration of 2022 BRFSS data provided by the ND Department of Health and Human Services. Data analysis provided by Chae Davis, Research Analyst with North Dakota Department of Health and Human Services. [Full Report Available Here](https://www.nd.gov/health/lgbtq/)



### Resource Guide

First Responders and Secondary Trauma

**24/7 CRISIS NUMBERS - NORTH DAKOTA**

- 781.767.7828
- 781.767.7828
- 781.767.7828

**24/7 CRISIS NUMBERS - NATIONAL**

- 800.985.5899
- 800.985.5899
- 800.985.5899

**EMERGENCY - YOUR MENTAL HEALTH MATTERS**

- North Dakota Suicide Hotline
- 24/7 Crisis Support
- 24/7 Crisis Support

**NATIONAL RESOURCES**

- 24/7 Crisis Support
- 24/7 Crisis Support
- 24/7 Crisis Support

**NO ASFP RESOURCES**

- 24/7 Crisis Support
- 24/7 Crisis Support
- 24/7 Crisis Support

**MISC RESOURCES**

- 24/7 Crisis Support
- 24/7 Crisis Support
- 24/7 Crisis Support

**IMPROVE THIS RESOURCE**

- 24/7 Crisis Support
- 24/7 Crisis Support
- 24/7 Crisis Support

### NORTH DAKOTA LGBTQ+ RESOURCE LIST

**STATE ORGANIZATION**

- Faye Seidler - Suicide Prevention Advocate
- 781.767.7828
- faye.seidler@nd.gov

**EMERGENCY SUPPORT**

- You Matter - You Deserve Help
- 781.767.7828
- 781.767.7828

**ADVOCACY**

- LGBTQ+ Health and Community Directory
- 781.767.7828
- 781.767.7828

**LEGAL SUPPORT**

- Gay Safe, Not Just Sheltered
- 781.767.7828
- 781.767.7828

**HUMAN RIGHTS**

- Human Rights in a Legal, Fair, and Inclusive World
- 781.767.7828
- 781.767.7828

**ADVOCACY**

- Be the Change You Want to See
- 781.767.7828
- 781.767.7828

**EVENTS/PLANS**

- General Help Services for All Populations
- 781.767.7828
- 781.767.7828



**SUNDAY NIGHTS WITH FAYE SEIDLER**

- Commonly known as Sunday Nights at 6:30 PM on WNDU-TV
- Topics include news, health, and community issues
- Focuses on important health issues, news, and local events

**THE WEEKLY REPORT**

- Updated every Monday morning
- Written by Faye Seidler and Faye Seidler
- Topics include news, health, and community issues

**THE COFFEE BREAK**

- Updated every Tuesday morning
- Written by Faye Seidler and Faye Seidler
- Topics include news, health, and community issues

**THE MONTHLY NEWSLETTER**

- One email per month
- Topics include news, health, and community issues
- Includes important information for the LGBTQ+ community

### JOURNALISM AND MEDIA SUICIDE PREVENTION PRINT OUT

**REPORTING ON A SUICIDE IN NORTH DAKOTA?**

**FOR THE MEDIA:**

- Don't Stigmatize Suicide
- Use the Words "Suicide"
- Don't Report on the Method
- Don't Report on the Location
- Don't Report on the Person
- Don't Report on the Story
- Don't Report on the News
- Don't Report on the Facts
- Don't Report on the Details
- Don't Report on the Numbers
- Don't Report on the Statistics
- Don't Report on the Facts
- Don't Report on the Details
- Don't Report on the Numbers
- Don't Report on the Statistics

**FOR THE COMMUNITY:**

- Don't Stigmatize Suicide
- Use the Words "Suicide"
- Don't Report on the Method
- Don't Report on the Location
- Don't Report on the Person
- Don't Report on the Story
- Don't Report on the News
- Don't Report on the Facts
- Don't Report on the Details
- Don't Report on the Numbers
- Don't Report on the Statistics
- Don't Report on the Facts
- Don't Report on the Details
- Don't Report on the Numbers
- Don't Report on the Statistics

**FOR THE PROFESSION:**

- Don't Stigmatize Suicide
- Use the Words "Suicide"
- Don't Report on the Method
- Don't Report on the Location
- Don't Report on the Person
- Don't Report on the Story
- Don't Report on the News
- Don't Report on the Facts
- Don't Report on the Details
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- Don't Report on the Statistics



- Every LGBTQ+ Affirming Medical Provider
- Trans Specific Resources
- Suicide Prevention Resources
- Insurance Guides
- Every LGBTQ+ serving Group

<https://harborhealthinitiative.org/>



# FAYE SEIDLER DATA CENTER

## ND 2022 Behavioral Risk Factor Surveillance System LGBTQ+ Report

Adverse Childhood Experiences - Parents		LGBTQ+	Straight
Was there an adult in your household who always tried hard to make sure your basic needs were met?	61.2%	84.6%	
Was there an adult in your household who always made you feel safe and protected?	44.1%	73.5%	
Did you live with anyone who was depressed, mentally ill, or suicidal?	48.5%	19.1%	
Were your parents separated or divorced?	37.7%	23.3%	
Did you live with anyone who was a problem drinker or alcoholic?	44.8%	23.5%	
Did you live with anyone who used illegal street drugs or who abused prescription medications?	24.4%	10.1%	
Did you live with anyone who served time or was sentenced in a prison, jail, or other correctional facility?	19.8%	8.2%	
Adverse Childhood Experiences - Sexual Abuse and Violence		LGBTQ+	Straight
Has anyone at least 5 years older than you or an adult, force you to have sex?	20.6%	4.0%	
Has anyone at least 5 years older than you or an adult, ever touch you sexually?	30.4%	9.3%	
Has anyone at least 5 years older than you or an adult, tried to make you touch them sexually?	28.9%	6.4%	
Have your parents or adults in your home ever slapped, hit, kicked, punched or beaten each other up?	33.0%	14.0%	
Not including spanking, (before age 18), has a parent or adult in your home ever hit, beat, or kicked you?	42.0%	22.2%	
Has a parent or adult in your home ever sworn at, insulted, or put you down?	62.6%	35.8%	
Adult Health and Behaviors		LGBTQ+	Straight
(Ever told) (you had) a depressive disorder?	51.2%	19.6%	
Did you have days during the past 30 days were your mental health not good?	72.6%	37.2%	
Did you have days during the past 30 days, where poor health kept you from doing your usual activities?	70.6%	39.9%	
In the past 12 months, have you been intentionally harmed or hurt by another person?	9.0%	1.9%	
For a non-emergency healthcare problem, would you choose a walk-in clinic as first choice?	37.4%	27.8%	
Have you been to the dentist in the last year?	51.6%	68.6%	
Do you sleep more than 7 hours a night?	56.8%	68%	
Substance Use and Employment		LGBTQ+	Straight
During the past 30 days, have you ever had alcohol?	61.8%	57.9%	
Adults who are current cigarette smokers?	21.9%	14.8%	
Adults who are current electronic cigarette users?	19.6%	8.0%	
Have you completed college?	26.3%	27.9%	
Are you not working? (Out of work, Homemaker, Student, or Unable to work?)	28.8%	13.4%	
Is your annual income less than \$35,000 a year?	42.9%	21.1%	

## New Data

[The North Dakota 2022 Behavior Risk Factor Surveillance System LGBTQ+ Report](#) is now live, featuring the first look at LGBTQ+ adult data in our state. This report is an informal summary and exploration of 2022 BRFSS data provided by the ND Department of Health and Human Service. Data analysis provided by Clint Boots, Research Analyst with North Dakota Department of Health and Human Services. [Full Cross-Tabulated Results can be Found Here.](#)





## SUNDAY NIGHTS with FAYE SEIDLER

- Community News Show on Sunday night at 9:00 PM on FB Live
- Typically 10 Minutes long, 3 stories, with guests speakers
- Focuses on important opportunities, warm check-in, and fun

[THE LAST EPISODE](#)

[--> NEXT EPISODE<--](#)



## THE WEEKLY REPORT

- Updated Every Monday Morning
- Written Version and hosting of Sunday Nights with Faye Seidler
- Weekly breakdown of stories, job opportunities, and local events

[LANDING PAGE](#)



## THE COFFEE BREAK

- Action oriented emails featuring things you can do!
- Generally one per week - more depending on breaking news
- Simple, short, and direct and unsubscribe at any time

[THE LATEST ISSUE](#)

[--> SIGN UP <--](#)



## THE MONTHLY NEWSLETTER

- One Email at the Start of the Month
- One stop shop for all upcoming training, community events, new data, resources, state + national news.
- Spotlights important things across the state to be aware of

[THE LATEST ISSUE](#)

[--> SIGN UP <--](#)



# Resource Guide

## First Responders and Secondary Trauma

### **24/7 CRISIS NUMBERS - NORTH DAKOTA**

First Link or CISM can provide a direct number to another state's 988 center

988/211

[FIRSTLINK](#)

SUICIDE AND CRISIS PREVENTION LIFELINE/HELP LINE

701-328-0707

[ND CISM](#)

FIRST RESPONDER CRISIS INTERVENTION

### **24/7 CRISIS NUMBERS - NATIONAL**

206-459-3020

[SAFE CALL NOW](#)

CONFIDENTIAL FIRST RESPONDER CRISIS REFERRAL

1-800-267-5463

[COPLINE](#)

CONFIDENTIAL SUPPORT/CRISIS HELP LINE POLICE

1-800-985-5990

[DISASTER HELPLINE](#)

DISASTER RELATED CRISIS/REFERRAL/SUPPORT

Text Home 741-741

[CRISIS TEXT LINE](#)

MENTAL HEALTH AND CRISIS INTERVENTION

### **RESILIENCY - YOUR MENTAL HEALTH MATTERS**

Build Resiliency by reaching out for help before you're in a crisis.

- [North Dakota Resiliency Support Therapy](#)
- Contact your employer's EAP (Employee Assistance Program)
- Utilize public safety agencies that offer peer support programming

### **NATIONAL RESOURCES**

- [International Association of Firefighters](#)
- [National Action Alliance for Suicide Prevention](#)
- [International Association of Chiefs of Police](#)
- [Suicide Prevention Resource Center](#)
- [International Critical Incident Stress Foundation](#)

### **ND AFSP RESOURCES**

- [Information After Loss](#)
- [Taking Care of Yourself](#)
- [Talking to Others](#)
- [Healing Conversations](#)
- [Postvention in the Work Place](#)

Email: [schristopherson@afsp.org](mailto:schristopherson@afsp.org)  
Number: 701.371.1194

### **MISC RESOURCES**

- [Talking to Children When Scary Things Happen](#)
- [After a Shooting - Resource Response](#)

### **IMPROVE THIS RESOURCE**

Website: [Print Outs](#)  
Email: [Fayeseidler@gmail.com](mailto:Fayeseidler@gmail.com)

# NORTH DAKOTA LGBTQ+ RESOURCE LIST

## STATE ORGANIZER

### Faye Seidler - Suicide Prevention Advocate

Phone: 701-732-0228

Email: fayeseidler@gmail.com

Website: fayeseidlerconsulting.com

## EMERGENCY SUPPORT

### You Matter. You Deserve Help.

- Dial or text 988 for Mental Crisis or 911 for Crisis
- Dial 211 or text ND4me to 898-211 for General Help
- FirstLink prioritizes resolution without police

<https://myfirstlink.org>



## AFFIRMING HEALTHCARE

### LGBTQ+ Health and Community Directory

- All Affirming Providers in ND + Border Cities
- All LGBTQ+ Community/Activity/Support Orgs
- Transition Info + Link to at Home STI Test Kits

<https://harborhealthinitiative.org>



## YOUTH SUPPORT

### Stay Safe, Fed, and Sheltered

- Services for 22 or Under, Drop-Ins across State
- Food, Showers, Transition Housing
- Seeks to Stop Trafficking and Homelessness

<https://youthworksnd.org>



## HUMAN RIGHTS

### Discrimination is Illegal, Your Rights Matter

- Know Your Rights Resources
- Referrals to Human Rights Experts
- Human Rights Training

<https://www.ndhrc.org>



## ADVOCACY

### Be the Change You Want in the World

- Weekly Local Equity News + Email Service
- Statewide Advocacy, Organizing, Data Expert
- Created This Resource List!

[www.fayeseidlerconsulting.com](http://www.fayeseidlerconsulting.com)



## EVERYTHING ELSE

### General Help Services for All Populations

- All the Food Banks and Homeless Shelters
- Access to Legal Help or Fair Housing
- Job and Transportation Access

<https://www.capnd.org/resources-in-nd>



# JOURNALISM AND MEDIA

## SUICIDE PREVENTION PRINT OUT

### REPORTING ON A SUICIDE IN NORTH DAKOTA?

#### INCLUDE

Editor's note: If you or someone you know is struggling or in crisis, help is available. The 988 Suicide and Crisis Lifeline: Call or Text [988](tel:988) or chat [988lifeline.org](https://988lifeline.org)

#### REVIEW

Best Practice, Research, and Suggestions: <https://reportingonsuicide.org/>

#### ASK

Sam Christopherson - American Foundation for Suicide Prevention Area Director ND  
Email: [schristopherson@afsp.org](mailto:schristopherson@afsp.org) | Phone: 701-371-1194

#### AVOID

- Sensational headlines or exaggerating details like suicide attempts are "Sky-Rocketing"
- Overly specific details like means, location, or method of suicide
- Presenting suicide as unavoidable, hopeless, or unpreventable.
- Speculation, presenting suicide as simple, or as the result of a single cause

### SUICIDE PREVENTION ORGANIZATIONS ND



### SAFE REPORTING TRAINING IN NORTH DAKOTA

The American Foundation for Suicide Prevention North Dakota Chapter puts on a Safe Reporting Saves Lives Training each year for free: <https://afsp.org/safereporting/>  
Contact: Sam Christopherson | Email: [schristopherson@afsp.org](mailto:schristopherson@afsp.org) | Phone: 701-371-1194

### SUICIDE PREVENTION ORGANIZATIONS IN NORTH DAKOTA

ORG	FOCUS	DESCRIPTION
<a href="#">FirstLink</a>	988 & 211 Hotline	Suicide and Crisis Lifeline, data, community directory, training, and more. Media Contact: <a href="mailto:jeremyb@myfirstlink.org">jeremyb@myfirstlink.org</a>
<a href="#">AFSP</a>	Data & Advocacy	Hosts events, provides training, data, and advocates. Media Contact: <a href="mailto:schristopherson@afsp.org">schristopherson@afsp.org</a>
<a href="#">NDSPC</a>	Training & Advocacy	Hosts Annual Conference + Hope Cafe. Advocates & networks across state. Media Contact: <a href="mailto:ndsuiicidepreventioncoalition@gmail.com">ndsuiicidepreventioncoalition@gmail.com</a>
<a href="#">SOS</a>	Upstream Youth Suicide Prevention	Works with schools to teach upstream suicide prevention models. Media Contact: <a href="mailto:dan@sourcesofstrength.org">dan@sourcesofstrength.org</a>
<a href="#">HHI</a>	LGBTQ+ Suicide Prevention	LGBTQ+ Resource Directory for North Dakota. Media Contact: <a href="mailto:fayeseidler@gmail.com">fayeseidler@gmail.com</a>
<a href="#">ND HOPES</a>	Suicide Prevention Rural	5-year grant project to reduce suicide within rural/western North Dakota. Media Contact: <a href="mailto:info@ndhopes.com">info@ndhopes.com</a>
<a href="#">TEARS</a>	Survivors of Suicide Loss Support	"Healing TEARS" Support group for those who have experienced a suicide loss. Media Contact: <a href="mailto:TEARSGFND@gmail.com">TEARSGFND@gmail.com</a>
<a href="#">C&amp;C SPC</a>	Advocacy	Collection of suicide prevention advocacy partners in Class/Clay County. Media Contact: <a href="mailto:Sarah.KempTabbut@va.gov">Sarah.KempTabbut@va.gov</a>

### NORTH DAKOTA GOVERNMENT

Melissa Markegard - ND HHS Suicide Prevention Administrator: [mmarkegard@nd.gov](mailto:mmarkegard@nd.gov)  
 • <https://www.hhs.nd.gov/behavioral-health/prevention/suicide>  
 • <https://www.hhs.nd.gov/988>  
 Kodi Pinks - Unit Director of Surveillance and Data Management: [kpinks@nd.gov](mailto:kpinks@nd.gov)

### PROFESSIONAL SUICIDE PREVENTION ADVOCATES IN NORTH DAKOTA

Scott Geiselhart - National Suicide Prevention Speaker and Advocate  
Email: [scott.geiselhart@gmail.com](mailto:scott.geiselhart@gmail.com) | Website: <https://www.seeingincoloragain.com/>  
 Faye Seidler - North Dakota Suicide Prevention Advocate  
Email: [fayeseidler@gmail.com](mailto:fayeseidler@gmail.com) | Website: <https://www.fayeseidlerconsulting.com/>

### MOST CURRENT VERSION LOCATED



<https://www.fayeseidlerconsulting.com/print-outs.html>



# HARBOR

## HEALTH INITIATIVE

- Every LGBTQ+ Affirming Medical Provider
- Trans Specific Resources
- Suicide Prevention Resources
- Insurance Guides
- Every LGBTQ+ serving Group

<https://harborhealthinitiative.org/>

**LAND MEDIA**  
**ON PRINT OUT**

**TA?**

is struggling or in crisis, help is available.  
Text 988 or chat 988lifeline.org

<https://reportingonsuicide.org/>

on for Suicide Prevention Area Director ND  
701-375-1194

like suicide attempts are "sky-rocketing"  
or method of suicide  
is, or unpreventable  
or as the result of a single cause

**NORTH DAKOTA**  
Prevention North Dakota Chapter puts on a Safe  
year for free: <https://afsp.org/nfdpreporting/>  
a [scott@afspnorthdakota.org](mailto:scott@afspnorthdakota.org) | Phone: 701-375-1194

**LOCATIONS IN NORTH DAKOTA**

DESCRIPTION
of Crisis, Fatigue, stress, community distress, healing, and more <a href="mailto:scott@afspnorthdakota.org">scott@afspnorthdakota.org</a>
its, provides training, films, and advocates. <a href="mailto:scott@afspnorthdakota.org">scott@afspnorthdakota.org</a>
of Conference - helps CPE, education & research to help <a href="mailto:ndsu@afspnorthdakota.org">ndsu@afspnorthdakota.org</a>
to help to reach upstream suicide prevention needs <a href="mailto:and@afspnorthdakota.org">and@afspnorthdakota.org</a>
Resource Directory for North Dakota <a href="mailto:ndsu@afspnorthdakota.org">ndsu@afspnorthdakota.org</a>
of project to reduce suicide within residential North Dakota <a href="mailto:ndsu@afspnorthdakota.org">ndsu@afspnorthdakota.org</a>
2021 Support group for those who have experienced suicide loss <a href="mailto:KARIS@afspnorthdakota.org">KARIS@afspnorthdakota.org</a>
of suicide prevention advocacy partners in Cass County <a href="mailto:Sarah.Kemp@afspnorthdakota.org">Sarah.Kemp@afspnorthdakota.org</a>

Administrator: [ndsu@afspnorthdakota.org](mailto:ndsu@afspnorthdakota.org)

Site Management: [afsp@nd.gov](mailto:afsp@nd.gov)

**LET'S BE HEALTHY TOGETHER**  
Cass County and Administrator  
[afsp@nd.gov](mailto:afsp@nd.gov)

Advocate  
<https://www.afspnorthdakota.org/>

**MOST CURRENT REGIONAL LOCATIONS**

**FOOTPRINT**



SCHOOLS



RESOURCES



DATA



APPOINTMENT



INTAKE



IDEAS



FAYE SEIDLER  
CONSULTING  
CONSULTING

# Increasing Your Effectiveness in Working with LGBTQ+ Populations



SPEAKER



DIRECTORIES



HORIZON



SYSTEMS



TARGETS



DEMOGRAPHICS



GOALS



Q & A



SCHOOLS



RESOURCES



DATA



APPOINTMENT



INTAKE



IDEAS



CONSULTING

# Increasing Your Effectiveness in Working with LGBTQ+ Populations



SPEAKER



DIRECTORIES



HORIZON



SYSTEMS



TARGETS



DEMOGRAPHICS



GOALS