



NON-BINARY & INTERSEX MENTAL HEALTH SURVEY

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Purpose

- To remove barriers to mental health services for the non-binary and intersex (NBI) communities in Los Angeles County (LAC), by way of conducting research via focus groups and community-based surveys.
- To reduce stigma and barriers to mental health services for the NBI population utilizing LAC services
- Increase the capacity of the mental health system to provide affirmative treatment to NBI patients.



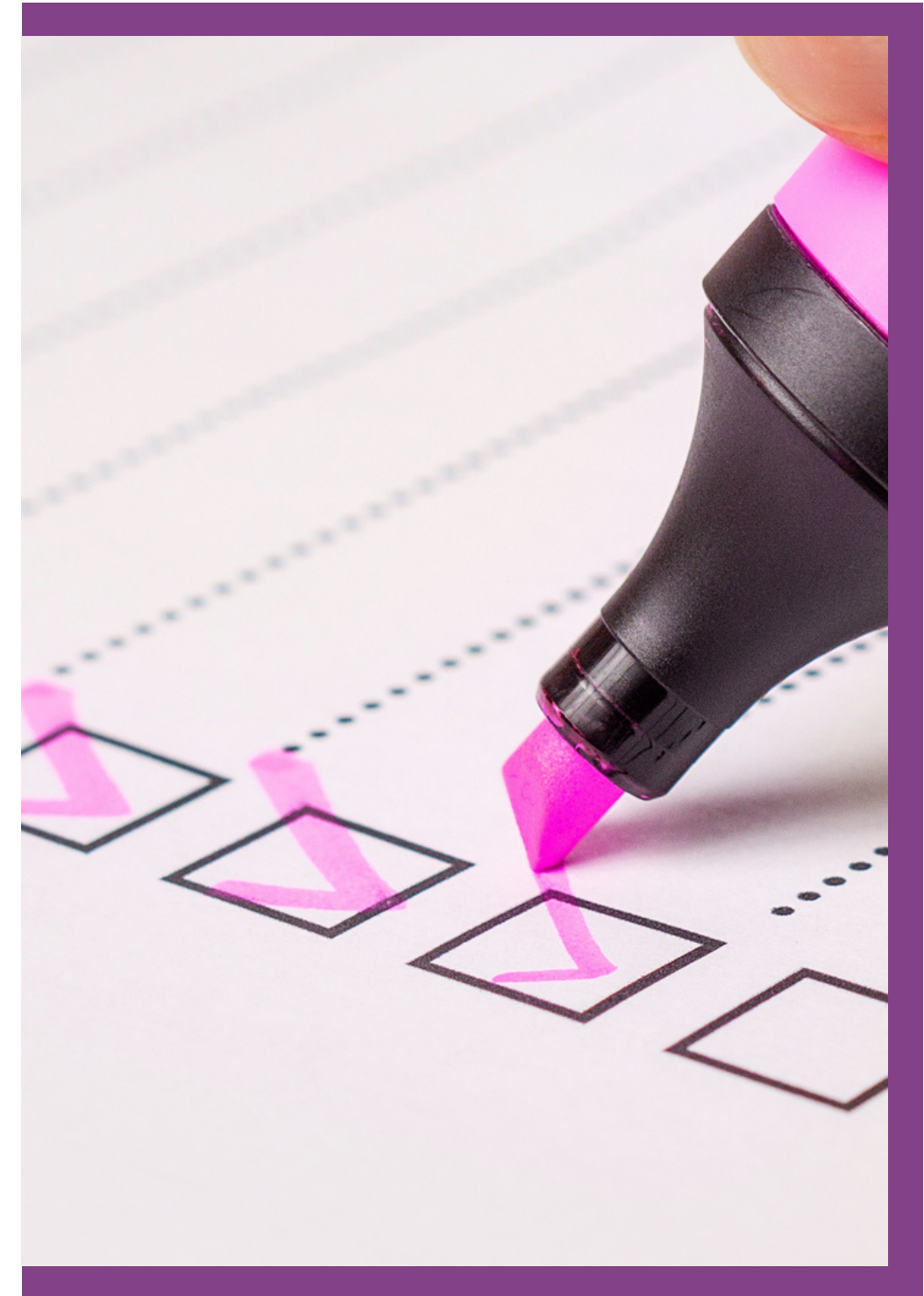
Phases

Phase 1

- Creation and distribution of a resource guide for LAC programs.
- Conduction of focus groups (17 participants who identified as nonbinary and 3 who identified as intersex). Focus groups used to formulate the questions for the surveys.

Phase 2

- Launch of Survey
- Analyzing of Data



Focus Group: Findings



Access

There is difficulty with affording and finding affirmative mental health.

Difficulty in finding an affirmative therapist.

Too many barriers to care.

Differences in Needs

NBI mental health needs greatly differ from the cisgender population.

NBI mental health needs also differ greatly from binary transgender clients.

Survey - Glimpse

Data

Survey one resulted in 296 usable data entries. Survey 2 resulted in an additional 300 usable entries, with some repeat participants answering the additional questions. Each participant listed in our data is an LA County resident and/or utilized LA County services.

Breakdown

The data shows most survey participants were non-binary, Caucasian individuals who were between 25-45 years old. This would fall in line with the narrative throughout this summary.

Mental Health

When asked about mental health diagnosis received from licensed providers, all participants marked at least one diagnosis. Most participants listed two or more. The top three diagnosis were Major Depressive Disorder, Generalized Anxiety Disorder, and Gender Dysphoria which usually go hand in hand.



Recommendations

- Advertisement: Providing advertisement around NBI mental health services that is widely disbursed throughout LAC, as well as through a variety of platforms and media.
- Assessing current program locations and its accessibility/safety to NBI Clients: Can some of these locations also provide telehealth?
- County Wide Training: Training around NBI mental health needs to be conducted by mental health clinicians of lived experience or vast experience working with NBI clients.
- Assessment of implementation of the Informed Consent Model: Review current policies and recommendations around working with NBI clients and try to train and implement the Informed Consent Model which helps to move away from WPATH Standards of Care.
- Focus Efforts on Reaching BIPOC NBI Clients