

### Methodology

A series of online community surveys that collected primary descriptive data with optional write-in responses. The surveys relied on convenience sampling in order to reach the target population with outreach conducted via Out Boulder County's (OBC) newsletter, social media platforms, and community networking. Survey responses were analyzed using both qualitative and quantitative methods.

### Survey Tools

Study 1: COVID-19 Surveys of the LGBTQ+ Communities in Boulder County (2020)

Data Collection Period: March 18-27, 2020 and April 13-27, 2020 Report Published: May 2020

**Number of Valid Responses:** 89 and 69, respectively **Study Focus:** The first survey provided preliminary information about the status of the community at the onset of the COVID-19 pandemic, and the second survey included more detailed questions and was designed to gauge the changing effects of the quarantine on local LGBTQ+ community members. The goal of the surveys was a shorter turnaround time to inform our organizational decisions and responses rather than to create a fully detailed picture of COVID-19's true impact on local LGBTQ+ community members.

## Study 2: LGBTQ+ COVID-19 Impacts Survey (2021)

Data Collection Period: April-May, 2021

Report Published: June 2021

Number of valid responses: 297

**Study Focus**: This was a follow up to Study 1 with additional questions related to vaccine uptake, different vaccine brands, and the physical, mental health, and economic impacts of the pandemic. This study included the most questions and detailed analyses.

### Study 3: Mental Health Program Survey

Data Collection Period: August-October, 2021

Number of valid responses: 17

**Study Focus:** This survey inquired about potential participant interest, previous experience with mental health services, and service preferences for our nascent mental health program.

# "The Point" Pilot Program LGBTQ+ Mental Health & Case Management

- LGBTQ+ competent providers, many of whom are LGBTQ+ identified
- Spanish language services and program materials
- Interim care to address the typical delay in receiving mental health care
- Navigation services, especially referrals to long-term providers with LGBTQ+ competence

### **Initial Program Data**

**Program Initiation:** November 2021

Clients served through Q1 2022: 37 (7 youth, 24 adults, 4 elders)
Therapeutic clients: 11 Therapeutic sessions: 91

Case management clients: 8 CM sessions: 15

### Participant Feedback

My care is/was adapted to incorporate my various identities. I had/have a say in my care and how my navigation services are/were provided.: 4.75/5

My mental health has improved since engaging with The Point.: 4.25/5

My provider is/was competent in working with my specific needs and concerns.: 4.75/5

My various identities are valued and accepted by my provider(s). 5/5

"The Point has been a vital part of my support system."

"Everyone was very easy to work with and I felt safe expressing my identity and mental health struggles, traumas, etc."

"I enjoyed how safe I felt and how included I felt."

# TURNING FINDINGS INTO PROGRAMMING: THE POINT, LGBTQ+ MENTAL HEALTH & CASE MANAGEMENT PROGRAM



# PRE-EXISTING HEALTH INEQUITIES & COVID-19 PANDEMIC



# COMMUNITY RESEARCH

- Study 1: Identified mental health as a top concern and focus area
- Study 2: Confirmed the COVID-19 pandemic has had a disproportionate impact on LGBTQ+ mental health and identified barriers to accessing care
- Study 3: Targeted key elements for the development of a pilot mental health program

# LGBTQ+ MENTAL HEALTH PROGRAM

DESIGNED TO ADDRESS IDENTIFIED GAPS:

Delay in services • Access & availability Cultural competency • Navigation services



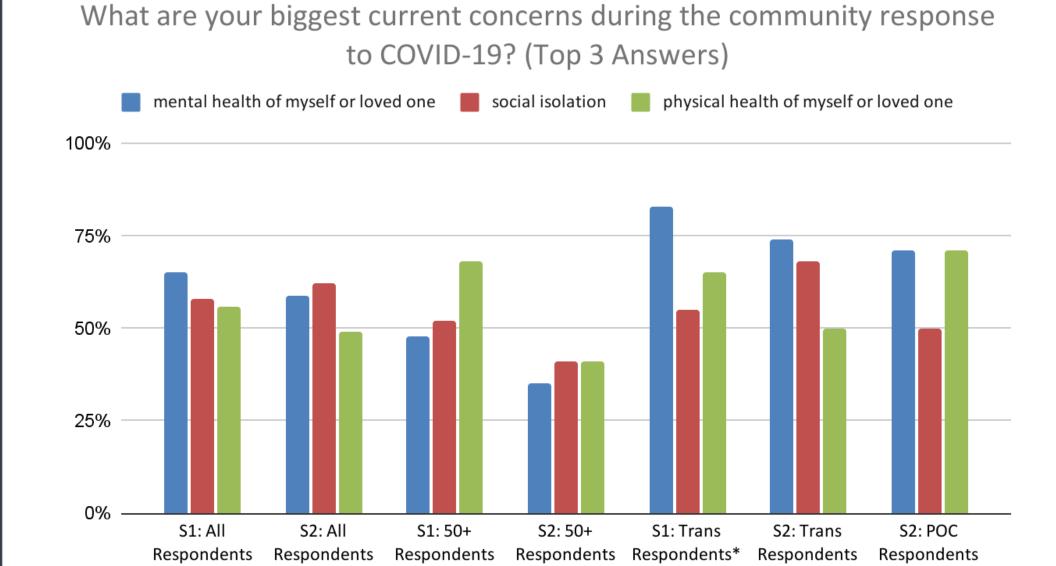
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### **Key Figures**

# Study 1: Identified mental health as a top concern and response focus area

COVID-19 Surveys of the LGBTQ+ Communities in Boulder County (March-April 2020)



\*63% of Survey 1 Trans Respondents ranked job security/lost wages as a top concern - this was the only variation from having the same top 3 concerns across respondent categories.

Key Finding: Social isolation and mental health are top concerns across all respondent groups.

# Study 2: Confirmed the COVID-19 pandemic has had a disproportionate impact on LGBTQ+ mental health and

identified barriers to accessing care
LGBTQ+ COVID-19 Impacts Survey (April-May 2021)

the past month (42% vs. 21%) than non-LGBTQ+ respondents.

How stressful has the past year of the pandemic been for you?

64% of LGBTQ+ respondents indicated the past year has been extremely or very stressful compared to 44% of non-LGBTQ+ respondents. The LGBTQ+ subgroup reporting the highest levels of stress was the 18-24 age range, with 77% indicating the pandemic has been extremely or very stressful.

How challenging has the past year of the pandemic been with respect to your mental health?

A greater percentage of LGBTQ+ than non-LGBTQ+ persons surveyed reported that the pandemic was extremely or very challenging to their mental health, 57% vs. 41%.

Depression & Anxiety

Compared to non-LGBTQ+ respondents, LGBTQ+ respondents reported much higher levels of depression over the pandemic year (46% vs. 21%) and over the past 30 days (34% vs. 17%). Anxiety rates during the pandemic were higher across the entire sample than those for depression, although again LGBTQ+ respondents reported higher rates of anxiety over the past year (54% vs 32%) and

### LGBTQ+ barriers to seeking mental health services:

More than one answer nossible: IGRTO+ resnonses of

More than one answer possible; LGBTQ+ responses only							
Answer	All			Trans &	Cis-		
<b>Options</b>	LGBTQ+	BIPOC	White	Nonbinary	gender	55+	18-24
Overwhelming							
/Don't have							
the energy	39%	30%	41%	42%	36%	24%	56%
Lack of							
therapist or							
psychiatrist							
availability	34%	26%	36%	41%	27%	24%	62%
Lack of							
LGBTQ+							
affirming							
therapists or							
psychiatrists	32%	36%	30%	43%	22%	24%	39%
Cost of co-pay							
with insurance	32%	40%	29%	39%	25%	24%	50%
None	25%	22%	26%	14%	35%	44%	17%
Cost because							
no insurance	15%	28%	11%	19%	12%	0%	11%
Stigma							
regarding							
needing							
support	10%	14%	9%	9%	10%	9%	11%
Another	4%	6%	3%	3%	5%	6%	0%
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# Study 3: Targeted key elements for the development of a pilot mental health program ("The Point")

Mental Health Program Survey (August-October 202:

"It's hard to navigate the mental health resources to find someone to advocate for me and help find what I need. So, I've just recently heard that a case manager is a possibility. I am extremely interested in having a case manager to help me get the help and support I need."

