



# Social Work Practice with LGBTQ\* Populations Affected by Substance Use and Misuse

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- **LGBT**  
**QQQIP**  
**2SAA**

# Basic assumption for **SOGIE**

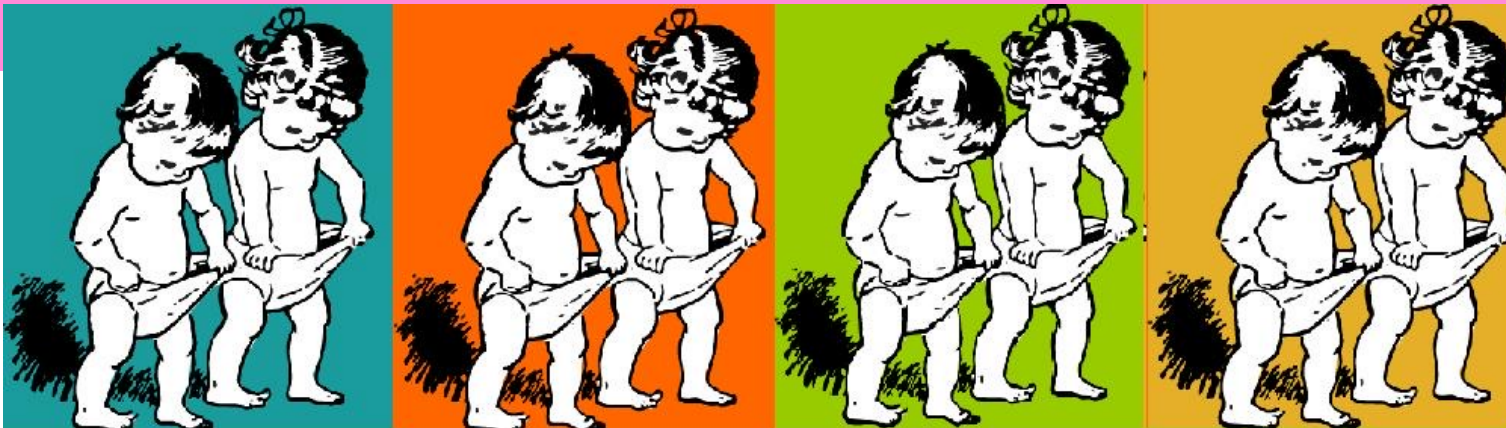
**Knowledge/Truth about SOGIE**

**Gender**

**Social Construction**

**Gender Boxes**

**Sexual fluidity**





- ***Myth***
- ***Bias***
- ***Stereotype***
- ***Stigma***
- ***Discrimination***



POSE Series 2018





# Healthcare

**Social stigma,  
discrimination, and other  
challenges  
harassment and violence.  
Other stressors, sexual  
minorities  
Increased risk for various  
behavioral health issues.**

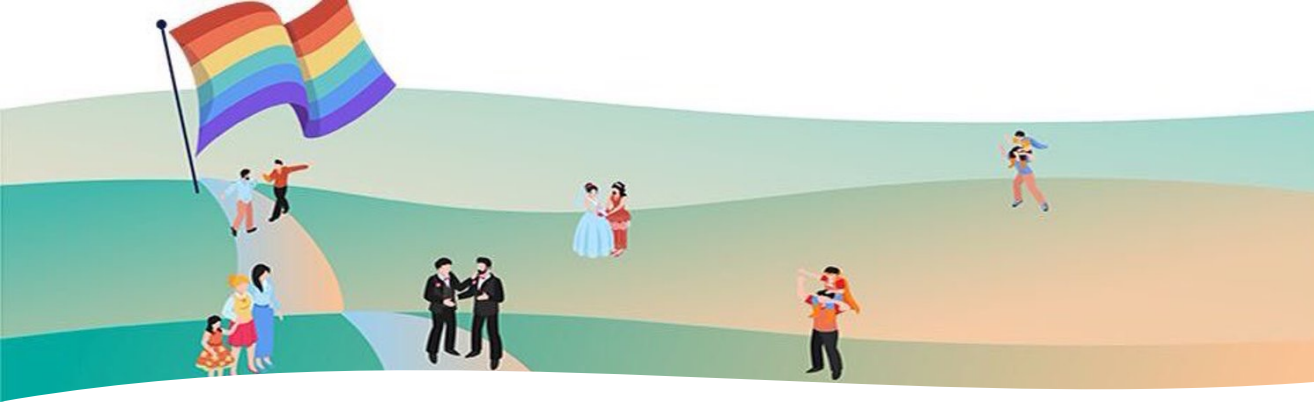
# Mental health

**Mental health issues and substance use are closely connected.**

**LGBTQ individuals who have a mental health condition are more likely to misuse substances and develop SUD, and the reverse is also true.**







# Bio Psycho Social Issues

- **LGBTQ individuals continue face discrimination, bullying, and stigma in our society.**
- **Many report being harassed, threatened, assaulted, or having experienced violence due to their gender identity or sexuality at some point in their lifetimes.**
- **Chronic stress can also lead to mental health conditions, including depression and anxiety.**
- **Both issues also raise the risk for substance misuse and SUD.**

# **The Need for Specialized Treatment Options**

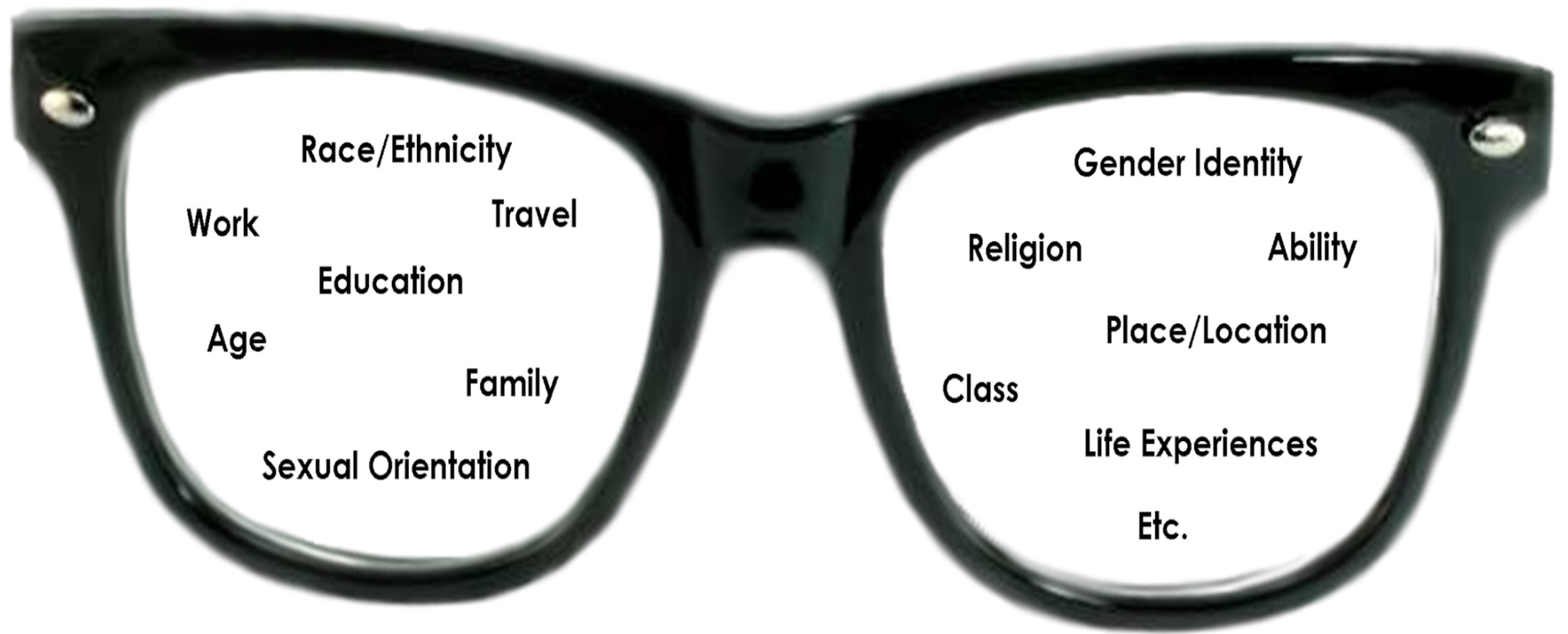
The background of the slide features a vibrant rainbow flag, a symbol of the LGBTQ+ community, waving in the upper portion. In the center, two hands are shown from different perspectives, their fingers interlaced to form a heart shape. The background is softly blurred, showing other people and flags, suggesting a public gathering or pride event.

**Treatment of SUD in the LGBTQ community needs to be trauma informed and sensitive to the unique needs of this population.**

**Ideal treatment in this community includes both MAT but also access to providers, therapists, counselors, and a mental health team that has experience and familiarity working with LGBTQ patients and the unique concerns they face.**

# **Serious mental illness (SMI) and co-occurring substance use disorders (SUDs) ?**

- **Mood Swings**
- **Withdrawal From Family and Frequent Changes In Relationships**
- **Defiance Abandoning Commitments**
- **Lack Of Frustration**
- **Tolerance and Impulse Control**
- **Verbal Aggression**
- **Changing appearance**
- **Low Self esteem**
- **Sleeping Harder And Longer**
- **Preoccupied and Distracted**



Race/Ethnicity

Work

Travel

Education

Age

Family

Sexual Orientation

Gender Identity

Religion

Ability

Place/Location

Class

Life Experiences

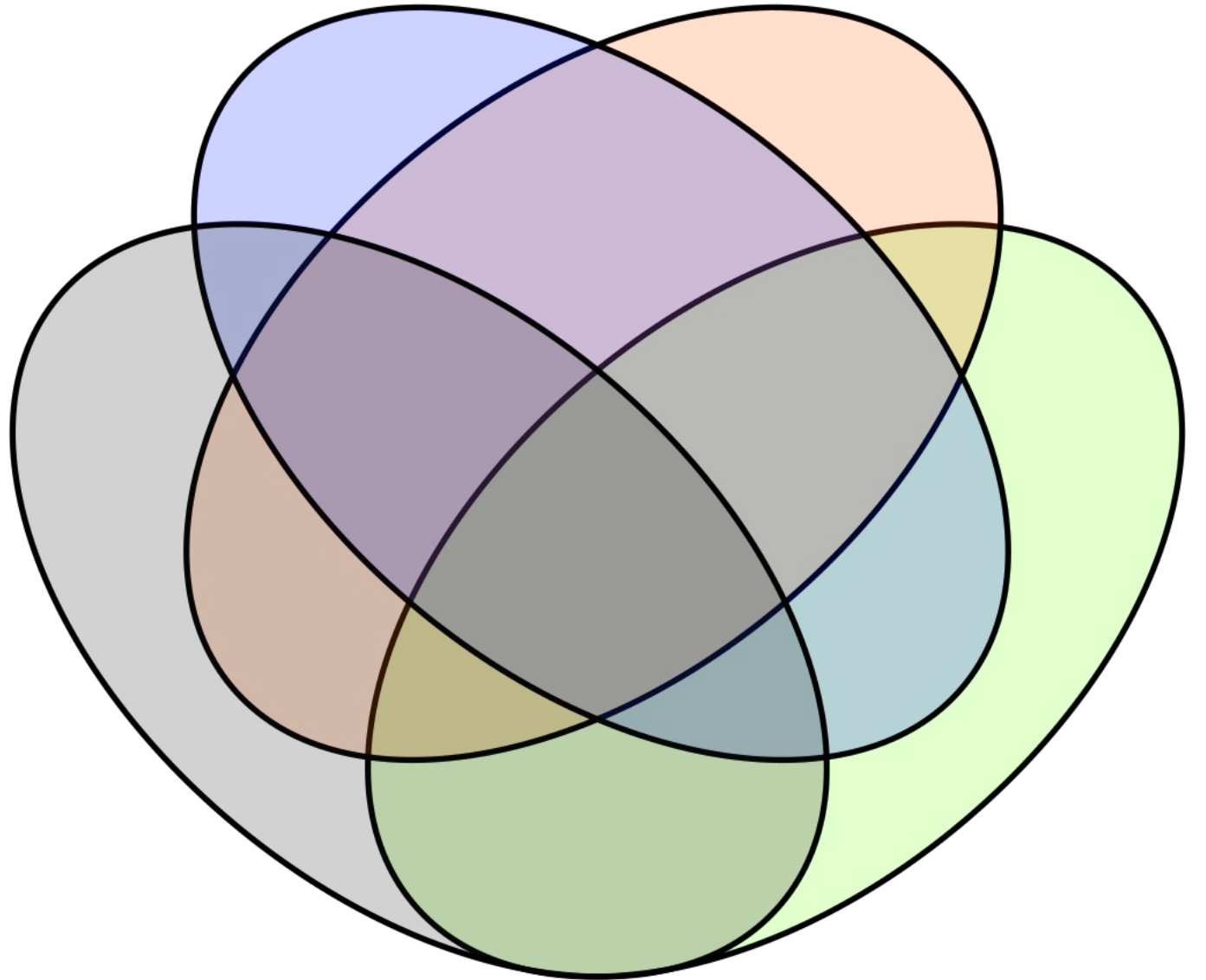
Etc.

**Population**

**Problem**

**Policy**

**Politic**



# Medical Social Work

## Standard of Care

- Social Assessment and Diagnosis
- Social Treatment
- Social Rehabilitation
- Social Problems Prevention
- Community Social Work
- Social Resources Management and Advocacy
- Medical Social Work Research and Development

## Social Assessment and Diagnosis

- Need Assessment
- Risk Assessment
- Family Assessment
- Bio-Psychosocial Assessment
- Capacity, Functioning and Development Assessment

# **Social Worker process**

- **Initial screening and evaluation of patient and families**
- **Comprehensive psychosocial assessment of patients**
- **Helping patients and families understand the illness and treatment options, as well as consequences of various treatments or treatment refusal**
- **Helping patients/families adjust to hospital admission; possible role changes; exploring emotional/social responses to illness and treatment**
- **Educating patients on the roles of health care team members; assisting patients and families in communicating with one another and to members of health care team; interpreting information**
- **Educating patients on the levels of health care (i.e. acute, sub- acute, home care); entitlements; community resources; and advance directives)**

# **Social Worker process**

- **Facilitating decision making on behalf of patients and families**
- **Employing crisis Intervention**
- **Diagnosing underlying mental illness; providing or making referrals for individual, family, and group psychotherapy**
- **Educating hospital staff on patient psychosocial issues**
- **Promoting communication and collaboration among health care team members**
- **Coordinating patient discharge and continuity of care planning**
- **Promoting patient navigation services**



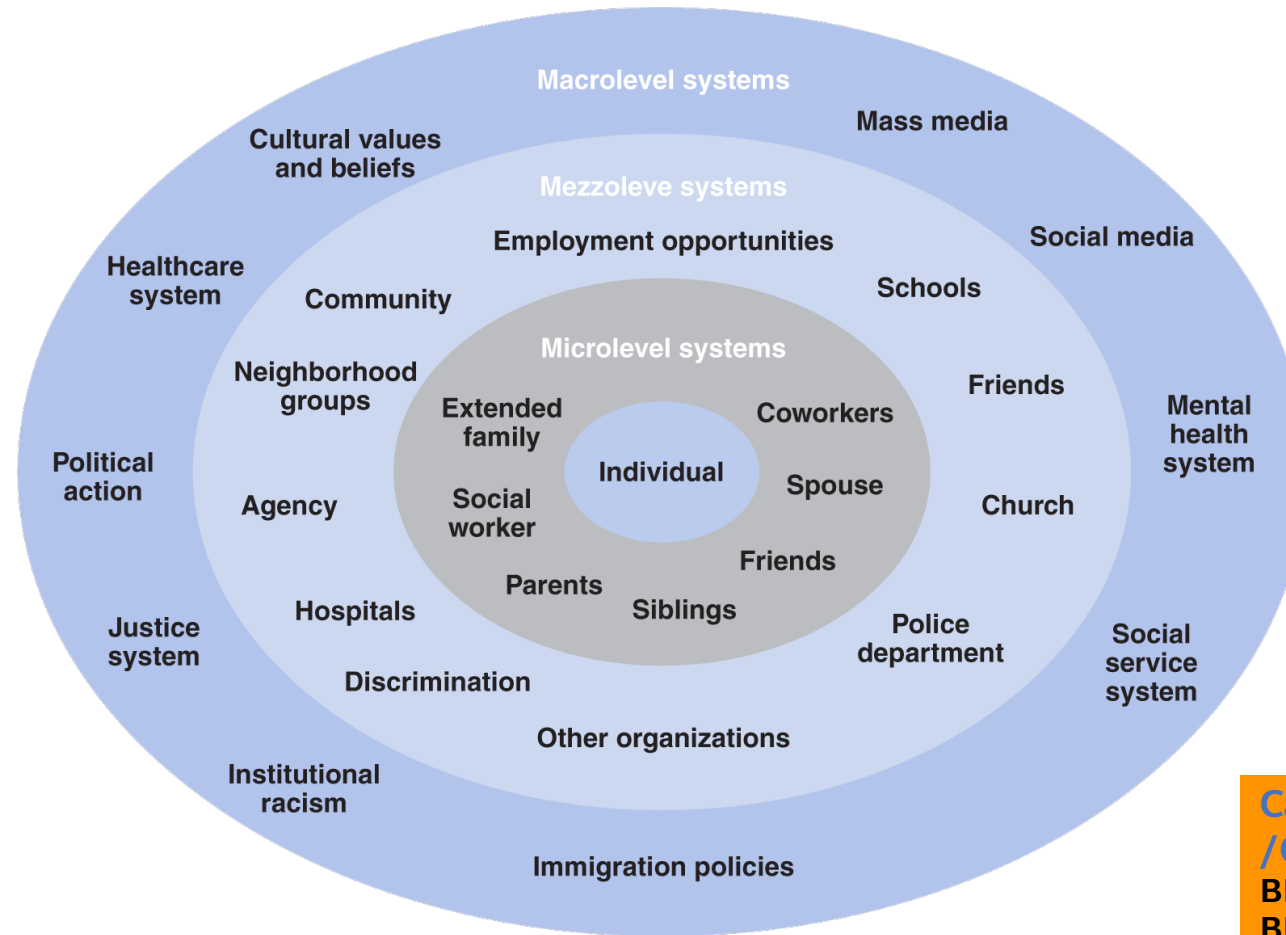
**“Addiction is a family disease.  
One person may use, but the  
hold family suffer.”**

# Building Recovery Capital Recovery Oriented Systems of Care

- **Social** –family and social networks
- **Physical** –tangible assets
- **Human** –internal, intangible assets
- **Cultural** –values, principles, beliefs

Sexual Orientation  
Gender Identity  
Expression  
Social Construction  
Gender Boxes  
Sexual fluidity

- Systems Theory**
- Ecological Systems Theory
  - Family Systems Theory
  - Contingency Theory



- Practice Models Used in Social Work**
- Problem Solving Model
  - Task Centered Practice
  - Solution Focused Therapy
  - Narrative Therapy
  - Cognitive-Behavioral Therapy
  - Crisis Intervention Model

Peer support

Harm Reduction

**Evidence-based Care**  
**Measurement-based Care**  
**SBIRT**  
**MAT**

**Case Work / Group Work /Community Work**  
BRIEF ADVICE : BA  
BRIEF INTERVENTION : BI  
Motivation Interview :MI  
Motivational Enchantment Therapy :MET  
Cognitive Behavioral Therapy :CBT  
Matrix Program  
Stage of change  
Family Therapy

# SBIRT

## **Screening, Brief Intervention, and Referral to Treatment**

**Improves clinical care**

- **Transforms culture and prepares your workforce for health care changes**
- **Screening –Expands reach to new audiences**
- **Replaces less effective screening methods**
- **Substance use as a bio-behavioral disorder and a chronic health condition**

# Medication Assisted Treatment

- **MAT = FDA approved medication + behavioral therapy + psychosocial supports**
- **FDA-approved medications include : buprenorphine, methadone, naltrexone (NRTs)**
- **Behavioral therapies can include : counseling, family therapy, peer support programs**
- **Recovery Supports: 12 Step; SMART**

**Figure 3: CDTs: Dissuasion intervention model**

<b>First phase: Evaluation</b>	1. Interview	Gathering of information about the individual, his/her personal, family and social situation and her/his substance use (history, current frequency and context)	
	2. Evaluation of motivation	Evaluation of the risk of use and of the individual's motivation to change behaviour and undergo treatment if applicable	
	3. Evaluation of substance use	Evaluation of the problems related to the substance use	
		Application of ASSIST to evaluate the level of dependence	
	4. Evaluation of problems related to substance use	Clinical (physical and mental) problems	
		Social functioning and available social support	
How the individual relates to the substance and problems associated with use			
5. Identification of risk levels	Low Moderate High		
<b>Second phase: Individualised intervention</b>	Establishing an intervention strategy based on the risk level	Low risk <sup>4</sup>	Prevention and education
		Moderate risk	Brief motivational intervention Referrals
		High risk	Brief motivational intervention Health referrals

# Commissions for the Dissuasion of Drug Abuse' (CDTs)

Source: Aveiro CDT (2013)

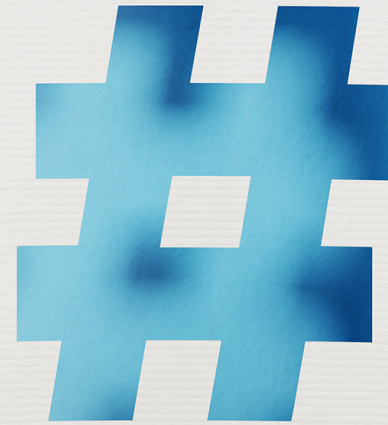
# Impacts in Education

- Expanded SBIRT training
- Shifting the paradigm
- Empathy & stigma changes
- Social workers are poised to provide services in treatment gaps
- Engagement with treatment
- Adherence to plan/goal
- Sociocultural triggers for relapse

**“where they’re at,”**

**“start from where they are”**

**“work with not work for”**




# Advocacy Empowerment

Thai Transgender Alliance  
PRESENTS

BANGKOK IDA HOT 2014  
วันสถาปนาเพื่อสิทธิการรณรงค์ด้วยภาพวาดที่สวนสาธารณะบ้านพล

## WHERE EVERYONE CAN EXPRESS THEMSELVES




= Everywhere  
= Somewhere  
= NOWHERE

LET'S MAKE  
EVERYWHERE  
FREE FOR  
EVERYONE

MAY, 16 2014  
AT BANGKOK ART  
AND CULTURE  
CENTER

[www.thaitga.com](http://www.thaitga.com)  
[www.facebook.com/thaitga](http://www.facebook.com/thaitga)







# BSW Curriculum

**Faculty of Social Administration**

**Thammasat University**

**SW496 Social Work Practice with Drug and Substance Abusers and Addicts Groups**

- **Contexts of drug and substance abusers and addicts; effects of drugs and substances on brain behavior, families and society; and application of social work methods, techniques, and skills in the rehabilitation of people at risk, abusers, and addicts. (Field study required)**
- **3 credits**

# Tangerine Community Health Center:

Trans-led, hormone-integrated and sexual health services



## Online Outreach Strategies

IHRI - Institute of HIV Research and Innovation

# Become LGBTQ-inclusive





THAMMASAT UNIVERSITY  
**Faculty of Social  
Administration**  
Since 1954

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