



NALGAP

National Association of Lesbian and Gay Addiction Professionals ■ Serving the Lesbian, Gay, Bisexual and Transgender Communities Since 1979

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NALGAP PREVENTION POLICY STATEMENT

July, 1994

The board of directors of the *National Association of Lesbian and Gay Addiction Professionals (NALGAP)* has adopted a Prevention Policy Statement regarding alcohol, tobacco, and other drug problems among lesbian, gay, bisexual, and transgender individuals. The general goals of prevention for this population should be:

- Heterosexist and/or homophobic attitudes and practices should be eliminated through education, prevention, treatment, public policy, and law enforcement;
- Lesbian/gay/bisexual/transgender peoples and their culture should be affirmed as valued elements of the larger society, with equal access to legal protection, economic opportunity, health care, education, and all human rights accorded others;
- Alcohol consumption should be limited to those of legal drinking age and only when the risk of associated harm is minimal;
- Prescription/over-the-counter drugs should be used only for their intended purposes;
- Tobacco, inhalants (i.e., “poppers”), and illegal drugs should be avoided.
- Other abusable substances (gasoline, solvents, aerosols, etc.) should be used only as intended.

To be effective, prevention for lesbian, gay, bisexual, and transgender people must respect and involve the culture of this rich and diverse American community. These citizens often experience high levels of stress and shame as a result of negative social attitudes they have internalized about their identities, and various forms of external oppression. This cultural victimization may contribute to elevated alcohol/other drug prevalence rates. Conversely, becoming connected to a positive, lesbian/gay-affirming community can buffer such stresses and prevent substance abuse and other high-risk behaviors.

NALGAP PREVENTION GUIDELINES

July, 1994

The following guidelines will assist all agencies, organizations, institutions, programs and services in their efforts to achieve prevention goals with lesbian, gay, bisexual, and transgender individuals:

- ❖ Written policies of non-discrimination should be published which specifically include lesbian, gay, bisexual, and transgender persons; policies should be publicly displayed in facilities and routinely provided to all staff and clients; all employees and volunteers should sign a statement that they understand and will abide by these policies.
- ❖ All staff, including administrators and volunteer staff, should receive comprehensive training about lesbian/gay/bisexual/transgender culture, including alcohol, tobacco, and other drug (ATOD) risk factors and special issues in prevention and treatment, annually or as staff turnover dictates.
- ❖ The right of clients and staff to self-identify as lesbian/gay/bisexual/transgender should be honored. They may serve as positive role models for those still struggling with coming out and may be sources of accurate information for those ignorant about the lesbian/gay/bisexual/transgender experience. Or, those who self-identify may not feel comfortable as spokespersons on these matters; this should also be respected.
- ❖ Similarly, the right of clients and staff to decline to self-identify as lesbian/gay/bisexual/transgender should be respected and protected; private disclosure should be treated confidentially.
- ❖ Support for the coming out experience should be available to those preparing to establish an openly lesbian/gay/bisexual/transgender identity and strategies for countering internalized heterosexism/homophobia, and/or referral to appropriate resources should be offered. Such resources should provide lesbian/gay-affirming therapies. Therapies to “re-orient” clients to a heterosexual orientation are *not* recommended because they are usually ineffective and raise serious ethical questions.
- ❖ Written and oral references to lesbian/gay/bisexual/transgender people should be non-judgmental and positive. Wherever possible, emphasis should be placed on affirming safe, healthy, non-ATOD-abusing aspects of lesbian/gay culture.

- ❖ Information about lesbian/gay/bisexual/transgender organizations, publications and events should be readily available; resources offering lesbian/gay/bisexual/transgender-specific alcohol and other drug information or help, such as lesbian/gay AA and Al-Anon groups, treatment providers, community centers, etc. should be prominently features.
- ❖ All audiences and clients should receive information about the medical and behavioral links between use of alcohol, tobacco, other drugs, HIV infection, and the developmental progression of AIDS.
- ❖ HIV-positive persons should receive counseling and support in establishing a smoke-free, clean and sober lifestyle as a basic strategy for extending healthy life.
- ❖ The significant role of alcohol, and of other drugs use in much of lesbian/gay/bisexual/ transgender culture dictates that substantial emphasis be placed on harm-reduction strategies for this population.
- ❖ Recommendations on use of alcoholic beverages include in the U.S. Department of Agriculture/U.S. Department of Health and Human Services’ ***“Dietary Guidelines for Americans,”*** should be endorsed and promoted to all audiences.
- ❖ Representatives of lesbian/gay/bisexual/transgender-sensitive ATOD groups should be included on boards, task forces, coalitions, planning committees, advisory bodies, etc.
- ❖ Alternative activities for lesbians/gay men/bisexuals, and transgender people, **particularly youth**, which are specifically non-smoking and alcohol-/other drug-free, should be planned and supported; lesbian/gay organizations should use events they sponsor to model non-drinking/using norms.
- ❖ Responsible hospitality guidelines should be included in the operation of all events where alcohol is served, including equal access to and promotion of a range of appealing non-alcoholic beverages, food, and “safe ride” or “designated driver” programs, and information about the risks of sex under the influence should be provided.
- ❖ Corporate contributions, sponsorships, in-kind services, scholarships, etc., should be sought from businesses that do not benefit from the sale of alcohol or tobacco products in order to avoid policy conflicts-of-interest, mixed messages to the gay community, and reinforcement of high-risk community norms and negative imaging.

