

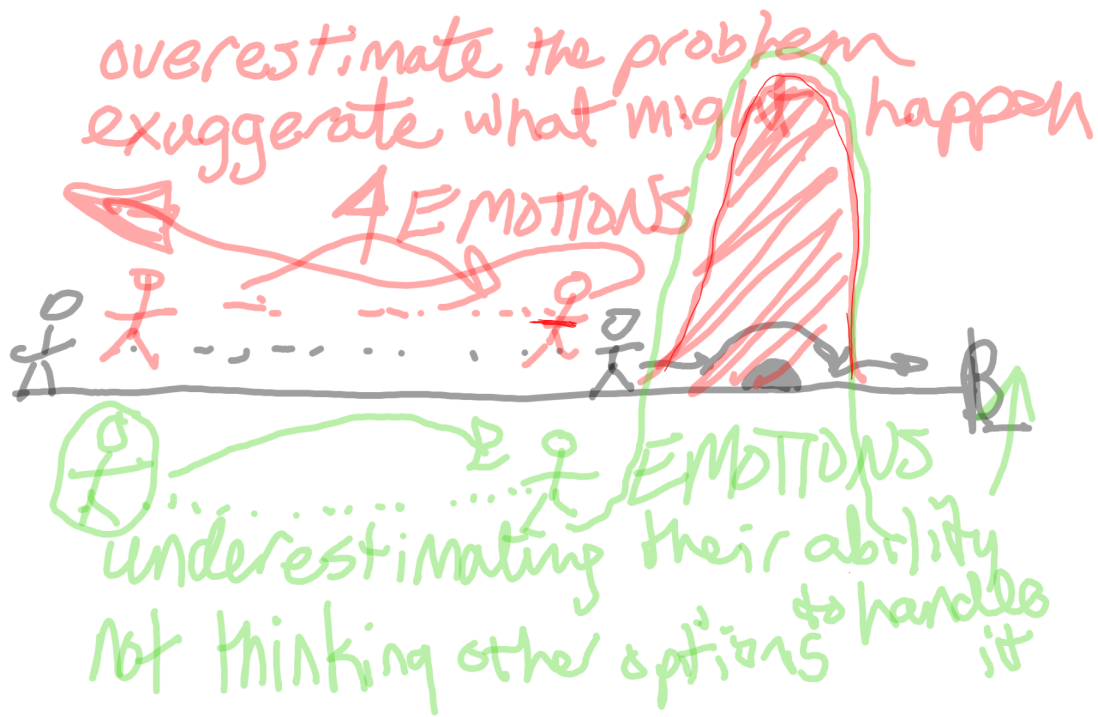
Aging Bodies, Health Minds: 2S-LGBTQ+ Mental Health and Aging

Resource Guide



Aging Bodies, Healthy Minds: 2S-LGBTQ+ Mental Health and Aging Resource Guide

The following resource guide is intended to share materials and resources discussed throughout the presentation on January 23, 2023. The resources are not in any way a replacement for seeking support or crisis intervention.



The above image was used by Mack Treanor HNSSW, MSW, RSW to visualize the effects of anxiety when an individual is faced with an event or task that causes them anxiety, fear or other negatively impacting emotions.

Mack Treanor Greer-Delarosbel, H.N.B.S.W., M.S.W., RSW
NORTH BAY COUNSELLING SERVICES

Specializing in Gender Identity/Gender Expression and
Transgender Positive Informed Consent Model
Decolonized Trauma Informed Practice for Indigenous People
Anxiety and Depression
Intimate Partner Violence and Trauma
Individual and Couple Counselling

Suite 104, 1180 Cassells Street, Main Floor
North Bay Ontario, P1B 4B6
Cell phone: 705-494-5369 (Confidential message)
Email: treanor.greerdelarosbel@gmail.com



CHANGE THE MONSTER

Instead of trying to avoid the feeling of panic, instead of distracting yourself from the feeling of panic, GO TO THE FEELING, ACKNOWLEDGE THE FEELING. Think about that feeling, don't be afraid of that feeling, because that feeling is your feeling. You have made the feeling, so you can change the feeling.

ASK YOURSELF THESE QUESTIONS

WHERE IN YOUR BODY IS THE FEELING? WHAT DOES IT LOOK LIKE? WHAT IS THE SHAPE?

IS IT BIG, SMALL, SQUARE, ROUND, TALL, SHORT? DESCRIBE TO YOURSELF WHAT IT LOOKS LIKE, CREATE IT, MAKE IT, IT IS YOURS.

WHAT DOES IT FEEL LIKE?

WHAT IS THE TEXTURE? IS IT POKEY, SLIMY, SHARP? IS IT HEAVY? DESCRIBE TO YOURSELF WHAT IT FEELS LIKE WHEN YOU TOUCH IT, FEEL IT, THINK ABOUT IT.

WHAT COLOUR IS IT?

DOES IT GLOW, IS IT DARK, LIGHT, DOES IT BLINK? GIVE IT A COLOUR, BE CREATIVE IT IS YOUR FEELING.

IF YOUR FEELING WAS A MONSTER, WHAT KIND OF MONSTER WOULD IT BE?

*



NOW, OUT OF A SCALE OF 1 TO 10, WITH 10 BEING THE WORSE STRESS YOU COULD POSSIBLY FEEL, WHAT IS YOUR STRESS SCORE NOW? RATE YOURSELF.

NOW GIVE YOUR FEELING A NAME. IT IS IMPORTANT TO NAME IT, SO YOU CAN CONTROL IT AT ALL TIMES
GEORGE, GLADYS, BOB, LORRAINE - WHAT WOULD YOU CALL IT? CLAIM IT, MAKE IT YOURS

NOW TAKE CONTROL OF THAT FEELING, MOVE THAT FEELING TO ANOTHER PART OF YOUR BODY, WHY DID YOU PUT IT THERE?

NOW CHANGE THE SHAPE, CHANGE WHAT IT LOOKS LIKE. CHANGE THE FEEL AND THE TEXTURE OF IT. CHANGE THE COLOUR OF IT.

NOW CHANGE THE MONSTER

**



NOW, OUT OF A SCALE OF 1 TO 10, WITH 10 BEING THE WORSE STRESS YOU COULD POSSIBLY FEEL, WHAT IS YOUR STRESS SCORE NOW? RATE YOURSELF

NOTE THE DIFFERENCE, REMEMBER HOW YOU FEEL NOW, YOU CAN RECLAIM THAT FEELING,
YOU CAN MAKE IT YOUR OWN



Mack Treanor Greer-Delarosbel, H.N.B.S.W., M.S.W., RSW
NORTH BAY COUNSELLING SERVICES
Specializing in Gender Identity/Gender Expression and
Transgender Positive Informed Consent Model
Decolonized Trauma Informed Practice for Indigenous People
Anxiety and Depression
Intimate Partner Violence and Trauma
Individual and Couple Counselling

Suite 104, 1180 Cassells Street, Main Floor
North Bay Ontario, P1B 4B6
Cell phone: 705-494-5369 (Confidential message)
Email: treanor.greerdelarosbel@gmail.com

WHAT IS WORRY? AND HOW DO I STOP WORRYING?

What Is Worry?

Worry is more common than you might imagine. Research has shown that around [38% of the population worry](#) at least once a day. With numbers like this, it is not surprising that it is an important subject to many people – especially as worry and feelings of anxiety tend to be very closely linked.

Often people use the words worry and [anxiety](#) interchangeably. Whilst this makes sense (as the two often happen together), it is much more helpful to separate them. When psychologists define worry, they usually mean a process of thinking things over in the mind.

Three good rules of thumb that might help you identify worries are:

- 1) *They tend to be 'wordy'.* For example, 'what will happen if I don't pass the exam I am sitting tomorrow?' Whereas emotions tend to have only one word that fully describes them. For example 'anxiety'.
- 2) *They tend to have a 'what if' statement before them.* In the example above it would be possible to write the worry down as 'what if, I don't pass the exam tomorrow.'
- 3) *They tend to be about things in the future.* For example things that haven't happened yet, might happen or even things that may never happen at all. Whilst it's possible to have things on your mind that fit the first two points above (for example, 'what if I had revised more for that exam'), thoughts that are focused on the past tend not to be worries, but might be something called rumination or negative automatic thoughts. These types of thinking processes are less likely to make you feel anxious, but rather, tend to be associated with stress, low moods or [depression](#).

Can Worry Be Harmful?

Many people can find themselves worrying about their worry.

This might seem like a strange concept but it is usually focused around the idea that continuing to worry will in some way be harmful. In therapy sessions it is not unusual for people to share concerns that worrying will in some way increase their risks of physical problems such as heart attack or stroke, or that in some way worrying will make them 'go mad' or lose control.

The truth is that worrying can sometimes carry a large cost. For example, it can make it difficult to enjoy life or concentrate on important things. It can also have negative impacts on close relationships. So although it is unlikely that worrying will cause you physical problems, it is likely to maintain psychological problems – even if it is simply falling into the cycle of worrying about the fact that you are worrying.

How Do I stop Worrying?

Many people believe that worrying is uncontrollable or that they won't be able to stop. If you've been a lifelong worrier over a period of many years then it is not surprising that it might seem like a hard thing to stop worrying. However there are a large number of things that you can do to help you stop worrying, and some of them are described below.

1) Understand When You Are Worrying

Many people have no idea when they are worrying – it just seems to happen. The best place to start if you want to stop worrying is to recognise when you are actually doing it. You might want to try something like keeping a worry diary – a simple chart that has columns for 'triggers', 'worries' and 'emotions'. As you are going through your day see if you can notice when you are worrying, by checking your thoughts against the *3 rules of thumb* above.

Another good way to identify if you are worrying is to label your emotions and bring an awareness to times that you notice a rise in your anxiety levels. If you are feeling more anxious suddenly then there is a possibility that you are also worrying. Sometimes it can be a bit like the 'chicken and the egg' to work out if the anxiety came first, or the worrying. But it's usually the case that if you are worrying, then it is playing a significant part in keeping your anxiety high too at that moment in time.

2) Differentiate Between Practical Worries and Hypothetical Worries

Once you have a list of worries see if you can split them into two groups. The first group we'll call practical (or sometimes called actual) worries. These are the things on your mind that require you to take some form of action. For example a trigger might be receiving a bill from your credit card company, and the worry might be 'what if I can't pay the amount that I need to?' Because this is a current situation you are faced with, it's a problem that needs to be solved. For this reason we'll call it a practical worry.

Hypothetical worries are things where there is nothing that you can reasonably and practically do at that current time. For example 'what if my girlfriend finds someone else?'

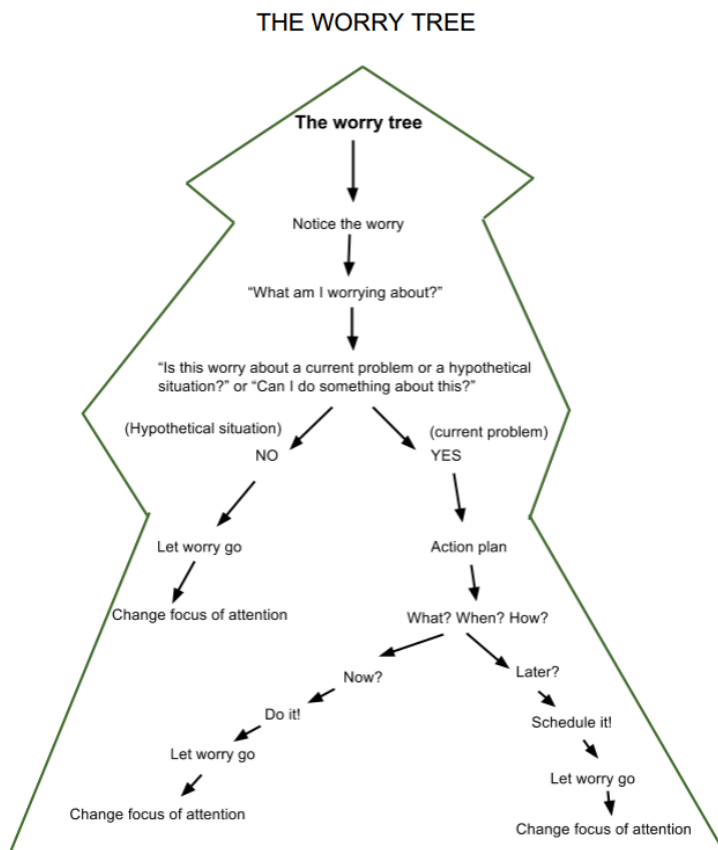
The key thing here is to think about whether there is anything reasonable that you can do in the current moment. In the hypothetical example above there might be many things you can do to reduce the possibility of your girlfriend finding someone else (for example take her on a long holiday, prevent her from meeting other men, checking up on her frequently etc), but these are unlikely to be things that are reasonable, because the consequences of them are likely to also be unpleasant or unhelpful to you or her.

3) Solve The Practical Worries

Remember we said that a large portion of the population worry at least once a day? This is why...

Not all worry is unhelpful – the practical worries actually alert you to solving a very real problem. So the important thing here is to clarify exactly what the problem to be solved is. See if you can trace the worry back to a problem. In the example above the problem might be something like ‘needing to deal with my credit card statement.’ Once you have clearly identified the current problem you are faced with, it is likely that you will need to make some decisions about how to solve it. This should be a very practical process, in order to help prevent you from turning a practical problem into lots of further hypothetical ones. Find out more on how to do this in another of our articles about [how to make a decision](#). Whilst this sounds like a simple thing to do, sometimes it can be useful to have a clear structure – especially if you are still trying to stop engaging in a string of hypothetical worrying.

4) Look At The Balance



Remember separating the practical and hypothetical worries apart? You might have noticed that you have more of one type of worry than the other. This is perfectly normal. Often if you have more practical worries it is likely that you are in the middle of some big life changes or difficulties. If this is the case then it is a good idea to keep an eye on your stress levels in order to manage stress as effectively as possible whilst things are difficult. There are some basic stress management techniques in our article on dealing with [‘the day from hell’](#).

If, however you find that you have more hypothetical worries on your list then this can tend

to be associated more with issues such as [Generalised Anxiety Disorder](#), and continuing to read the further ideas below might be helpful to you.

Putting It Another Way:

The worry tree can be a useful visual way of teasing apart how to handle each type of worry.

Why Do I Worry?

As we said above, worry is a mixture of practical and hypothetical things that you explore in your mind.

It makes sense that if something needs practically solving you'll think about it more. This can be a really helpful thing to do if you are trying to solve a specific problem. But the issues tend to come in when people use the same idea of thinking something over when it is in fact a hypothetical worry.

In essence they find that they are trying to practically solve a problem that doesn't even exist yet – which unsurprisingly is a really hard thing to do! After all, if the problem doesn't exist, but you are trying to solve it anyway, how will you know when it is solved?! This is one reason why worry can sometimes seem to spiral out of control.

Therefore one of the things that psychotherapists and psychologists often find is that people can worry about things in the hope of trying to find a solution that doesn't exist.

Another reason people can worry, paradoxically is to try and reduce the amount of anxiety they feel.

This might seem like a strange thing to say, but think of it this way: If something makes you feel anxious then you are likely to want to do something to avoid it in your mind. For example, if someone has a phobia of spiders then they are likely to close their eyes, or try and think of other things in order to make their anxiety go away when they are faced with a spider. Worry can act in a similar way. If there is something that has triggered your anxiety, then by thinking around the subject in your mind it often provides a level of distraction that can reduce anxiety levels – CBT Therapists call this 'cognitive avoidance strategies.'

One key psychologist (Michel Dugas) has completed a number of years research on why people worry, which has led to strong evidence showing that people who worry more tend to have a lower tolerance to having uncertainty in their lives. The best way to imagine this is by thinking of situations or possibilities in which the outcome or result is unclear. All of the hypothetical worries above have elements of uncertainty to them.

In the same way as people with physical allergies (such as nut allergies) experience large reactions in their bodies to only small amounts of the thing that they are allergic to (for example someone with a nut allergy having a big physical reaction to a small peanut), it is suggested that people with generalised anxiety disorder type symptoms tend to experience large reactions in the mind to potentially only small amounts of uncertainty. In this case the large reaction is a feeling of anxiety that people try to reduce through worrying and thinking about the situation even more in order to try and make it seem more

certain. The downside to this of course is that, because there isn't a practical problem to solve, they get exposed to more hypothetical worries which actually increases the amount of uncertainty they see in the situation!

One area Dugas suggests people with problematic worry explore is gradually increasing their tolerance to having uncertainty in their lives. There are a number of ways to do this, but a great place to start is by writing down a list of activities you can do or be involved in where there are different amounts of uncertainty. For example, trying a new food and being uncertain whether you will like it or not. Or trying a new route to work and being uncertain if you have estimated the amount of time correctly.

By thinking of a number of these types of uncertain situations you can rank them in order from the least anxiety provoking, right through to the most anxiety provoking. Gradually work your way through the list, whilst avoiding worrying or focusing on the outcome of the task as a way to slowly build up your own tolerance to uncertainty in your life.

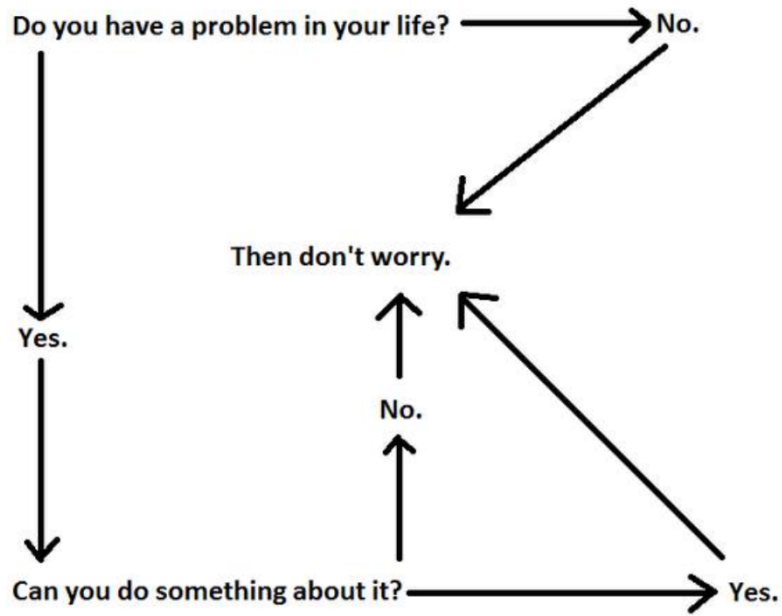
What Help Can I Get to Stop Worrying?

There are some great resources out there to help you stop worrying. A good place to start is trying out the ideas above and seeing how you get on.

If you need more help or information then some Cognitive Behavioural Therapy self-help books also provide a great option to find out more – for example, 'Overcoming Worry' by Mark Freeston, which provides a similar approach to the ideas above.

Your GP is also able to arrange a referral to a local NHS service for you, if this is likely to be helpful. For problems such as Generalised Anxiety Disorder, Cognitive Behavioural Therapy is usually the recommended first treatment – before trying things like medication or other types of psychotherapy.

Another good place to get help is finding a local private Cognitive Behavioural Therapist. Whilst fees to see a private therapist can be a little higher than options such as counselling, it is usually worth paying slightly more to get the right treatment. This is especially important when you are working with worry, as it is not uncommon for counsellors (that often have a lower level of qualification and experience than BABCP accredited CBT Therapists) to actually invite clients to discuss their worries more in session, which is potentially a strategy that will make the problem even worse than it was before seeing them.



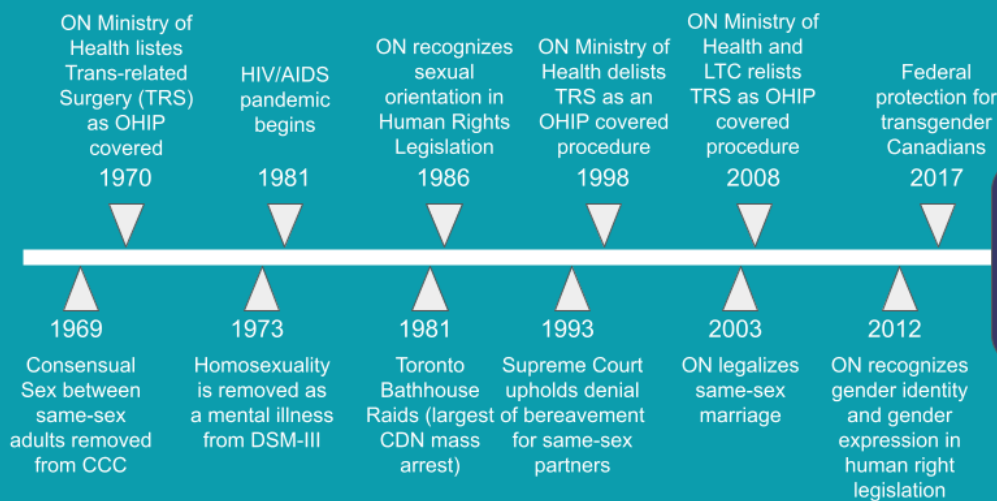
Always remember we believe worrying will fix things, but it doesn't. If something needs to be fixed, then just do it. If you can't fix something then don't worry about it because it is out of your hands, or beyond your control. There is an old saying that *worrying doesn't fix anything*. And that is so true. Worrying prevents you from focusing on things that make us or could make us happy.

Aging Bodies, Healthy Minds: 2S-LGBTQ+
Mental Health and Aging - Slide Deck

Approx. 15% of adults aged 60 years and over suffer from a mental disorder

Between 2015 and 2050, the world's population over 60 years of age will nearly DOUBLE
From 12% to 22%

Anxiety disorders affect 3.8% of the older population



How do you think this history has impacted you?

Some barriers that prevent 2S-LGBTQ+ older adults from accessing the necessary care are:



Healthcare providers' competency and comfort levels in serving these clients and addressing concerns specific to their identity, as well as clients' lack of trust because of these issues



Insurance coverage and/or monetary constraints, especially for people living with HIV



Physical and mental health conditions that result in missed appointments



Lack of transportation, especially outside of urban areas

Some barriers that prevent 2S-LGBTQ+ older adults from accessing the necessary care are:



Lack of recognition as a group with great social need by policy and programming;



The ways that care can be provided (i.e. virtual or in person).

Service providers should consider the unique needs of 2S-LGBTQ+ seniors, such as (*but not limited to*):

- 1 **Physical health:** sexual health, dementia, and frailty
- 2 **Mental health:** effects of stigma and discrimination
- 3 **Social isolation:** chosen family, belonging, and social disparity
- 4 **Spiritual health:** exclusion from faith
- 5 **Inclusivity:** being "out", fear of discrimination in care settings, and need for affirmation



Stressors common to older adults

Ongoing loss
of capacities

Bereavement

Reduced mobility,
frailty, or chronic
pain

Decline in functional
abilities

Drop in socioeconomic
status at retirement

Protective Factors for 2S-LGBTQ+ Older Adults

2S-LGBTQ+ Older Adults potentially develop life skills, known as, crisis competency due to their experience of being a sexual and/or gender minority

In 2006, MetLife study found 38% of 2S-LGBTQ+ Older Adults reporting positive consequences of being a sexual and/or gender minority in terms of resilience, self-reliance, and being accepting of others

Protective Factors for 2S-LGBTQ+ Older Adults

Acceptance of sexual orientation and gender identity

Development of coping strategies; and resilience

As these two points imply, some 2S-LGBTQ+ older adults who have experienced adversity may have developed coping strategies that promote resilience and protective factors

Being part of a community

Being part of an activist group

Having access to appropriate and inclusive services

Having a social support network
(chosen family & friends)

External Resources and references used for presentation

WHO

<https://www.who.int/news-room/fact-sheets/detail/mental-health-of-older-adults>

Rainbow Health Resource

https://www.rainbowhealthontario.ca/wp-content/uploads/2021/03/Health-in-focus_LGBT2SQ-Seniors.pdf

Queer generativity in lesbian, gay, and bisexual older adults: Personal, relational, and political/social behaviours

<https://onlinelibrary.wiley.com/doi/pdf/10.1002/casp.2529>

Barriers and opportunities for the mental health of LGBT older adults and older people living with HIV: a systematic literature review

<https://healthiv.org/wp-content/uploads/2022/09/Marshall-A.-Cahill-S.-.pdf>

Resources in reference to aging as a queer person

<https://www.lgbtagingcenter.org/resources/resources.cfm?s=2>

Facilitator Contact Information

Ashley Di Benedetto (she/her)

Program Coordinator

705-497-3560 ext 202

ACNBANewHorizons@gmail.com

Mack Treanor (he/him/they/them)

HNBSW, MSW, RSW

705-494-5369

treanor.greerdelarosbel@gmail.com

