LIVE Authentic

An Ellie Mental Health Magazine

Pride Edition

OUR FAVORITE LGBTQIA+ KIDS' BOOKS

TIPS FOR PARENTS

CONVERSION THERAPY: Why It's Harmful

Letter from the Editor

Pride is a celebration of love and authenticity, but it's also a powerful reminder of the resilience and courage of the LGBTQIA+ community. As a therapist, I've had the privilege of walking alongside clients who are learning to embrace who they are—often in the face of rejection or discrimination. Their strength and vulnerability are a constant source of inspiration, and the driving force behind this magazine.

At Ellie Mental Health, we believe that everyone deserves to be accepted and loved, exactly as they are. Therapy is one place where you should never have to mask or shrink yourself. Whether you're processing the pain of strained family dynamics, seeking support for your child, or simply looking for a safe space to be fully yourself, we are here. We will listen without judgment, hold space for your experiences, and support your healing.

Pride is also a call to action—a time to show up for our friends, family, and neighbors. It's a chance to remind them that they are not alone and that they are worthy of love and belonging.

Wishing you a joyful and affirming Pride,

Miranda Barker, LICSW
Therapist and Director of Content

Ellie Magazine Team:
Erin Pash, LMFT, Terri Bly, PsyD, Laura Fegley, Kira Olson, and Miranda Barker, LICSW

Contributors:
Anna Trout, LMFT, Devin Schallert-Thomas, MA, Megan Gooden, and Sunny Barkley

Pride Playlist

We asked our team to come up with their favorite "pride anthems" to add to our playlist this summer!

Scan this code on Spotify to listen.

If you're experiencing a mental health emergency, go to the emergency room or call 911. Here are some LGBTQIA+ resources for crisis help:

THE TREVOR PROJECT FOR LGBTQ+ YOUTH
(866) 488-7386 or
TEXT 'START' to 678678

TRANS LIFELINE
(877) 565-8860

SAGE - ELDER HOTLINE
(877) 360-5428

CRISIS TEXT LINE
TEXT 'HOME' TO 741741

NATIONAL SEXUAL ASSUALT HOTLINE
(800) 656-HOPE(4673)

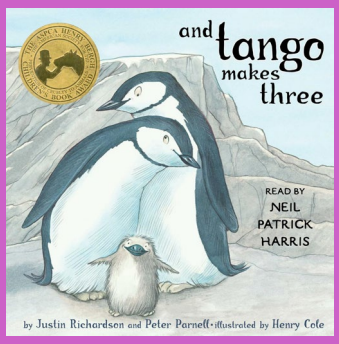
FOR VETERANS
CALL 988 (PRESS 1) OR TEXT: 838255

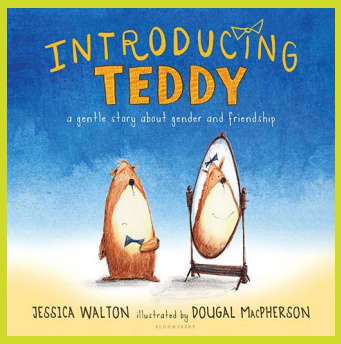
For outpatient mental health therapy, reach out to Ellie here

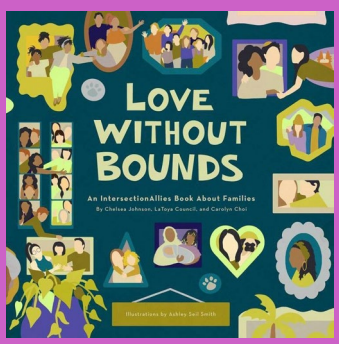
ellie MENTAL HEALTH

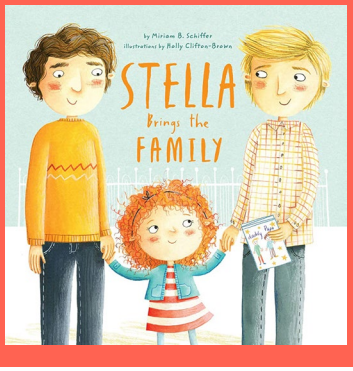
Ellie *Picks*

Therapist-recommended books for kids on this topic.









TIPS FOR COMING OUT

Coming out is a deeply personal decision and there's no one-size-fits-all approach. However, leaning into wise practices shared by others who've been there can be helpful. If you're at this stage, you may want to consider these tips:

1. Before coming out, take the time to explore and understand your own sexuality or gender identity. Reflect on your feelings, experiences, and desires, and identify the labels that resonate with you (If you don't find one, that's okay too! Labels are only helpful if YOU find them helpful). Journaling can be a great way to unpack this. Understanding and accepting yourself is an essential first step in the coming out process!

2. Decide who you want to tell and when you want to tell them. Pick a time and place where you feel safe, comfortable, and supported. We recommend starting with someone that you trust, like a close friend or family member that you know will be accepting and supportive. This can give you the confidence to come out to others.

3. Be prepared for different reactions. Keep in mind that some people may react differently to your coming out, ranging from acceptance and support to confusion or even rejection. While you can't control how others will react, you can control how you respond. Be patient and give them time to process the information, and be prepared to answer questions or address concerns they may have.

4. When coming out, be open and honest about your feelings and experiences. Use "I" statements to express yourself, such as "I've realized for a long time now that I'm [insert sexuality or gender identity]," and explain what this means to you. Remember though—you don't owe anyone an explanation and it's totally fine to have responses like: "I haven't figured that out yet" or "Can we talk about that when I'm more ready?"

5. Be patient with yourself. Coming out is a process, and it's okay to take things at your own pace. Self-acceptance is an essential part of the coming out journey.

6. Seek out support by surround yourself with other members of the LGBTQIA+ community who can offer you guidance and encouragement. This is crucial! Consider joining a support group or seeking therapy if you need additional support in navigating your coming out journey.

7. Make sure you're familiar with your legal rights as someone who identifies as LGBTQIA+. This is especially important if you're in an area where discrimination against sexual orientation or gender identity is a problem.

Remember that coming out is a very personal decision, and it's ok for you to wait until you feel ready and comfortable. We also acknowledge that some LGBTQIA+ folks will never be able to come out due to a lack of safety and security within their community, and that is understandable.

We can all continue to be allies and continue to create a more welcoming community so this becomes less common. You are not alone, and there is a supportive community ready to embrace and celebrate you for who you are here at Ellie.

Advice
for allies

- **Stay up to date on correct terminology. Read the books!** Follow individuals who share their experiences on social media! You want to be curious about your loved one's individual experience, but they will appreciate it if you already have a solid foundation of knowledge.
- **Listen to your friend or family member and stay curious.** If they bring up a situation at school or work, or ask a seemingly random question about sexuality or gender identity, ask them more about what they already know, how they feel about it, what questions they have. From there, a conversation begins, and now they know they can trust you with these topics in the future.
- **Reinforce love and acceptance at every opportunity.** Conversations about sexual orientation and gender identity are part of a bigger conversation around your loved one's ability to love and accept themselves for who they are, and to do the same for others. Tell your person you love them, no matter what, and that you hope they can love themselves as much as you do.
- **Ask yourself, what come up for you with regard to sexual orientation and gender identity?** How was it talked about in your home as a kid? If you weren't able to have open and healthy conversations about these topics when you were growing up, it's possible you might find discomfort when trying to talk about them now. If so, lean into that discomfort, explore it, understand it, resolve it. This is an opportunity for personal growth!
- **It's not just one conversation: it's many conversations that happen over time.** If talking with your children, use age-appropriate information regarding these topics, with language and concepts your children understand now, building on that information as they grow. If you're talking with an adult, try to stay with them wherever they are in their process. Focus on being a sounding board, rather than a problem-solver.

Q&A with a Queer Therapist:

Sunny Barkley on Identity, Affirmation, and Showing Up Authentically

At Ellie Mental Health, we believe representation matters—especially when it comes to mental health care. For LGBTQIA+ individuals, finding a therapist who understands the nuances of queer identity can make all the difference in feeling safe, seen, and supported.

We had the opportunity to ask Sunny Barkley, a therapist at Ellie, some questions about what it means to be a queer therapist, how they support identity exploration, and what advice they'd give to someone nervous about starting therapy.

What inspired you to work specifically with the LGBTQIA+ community?
As a queer person, it's always been important to show up for my community. Talking about identity, emotional health, and regulation is something I care deeply about. It felt like a natural fit to give people a brave space where people can explore who they are and feel supported in that process.

How does your queer identity shape the way you show up as a therapist?
Being queer and neurodivergent helps me step outside of rigid assumptions. I don't walk into sessions with preconceived ideas about how people "should" live or love. That openness helps clients feel less judged. For example, I've had clients navigating open relationships, and sharing that I'm a polyamorous provider has helped them feel more comfortable and affirmed. I think my queer identity is helpful in giving people that support and openness to explore.

What should someone look for in an LGBTQ+ affirming therapist?
Look for someone who meets you where you're at, understands your terminology, and asks thoughtful questions without judgment. A queer affirming therapist won't try to fit you into a box, they'll see your identity as a piece of who you are, not the whole picture. They'll also connect you with resources and keep learning alongside you. I think that willingness is really important in a provider.

What's the difference between a queer affirming therapist and a queer therapist?
A queer therapist is someone like myself who identifies as part of the LGBTQIA+ community. A queer affirming therapist should be a good ally. They may not identify as queer themselves, but has done the work, understands queer experiences, and actively supports the community. Both are very good— just a little different.

How do you support clients navigating identity exploration or coming out?
For identity exploration, I focus on what feels good. We talk about moments of gender euphoria—when it feels like your body is matching what you feel on the inside. Often with clients who are trying to navigate identity, we talk about times when it felt like something clicked, like wearing a certain outfit or being called by the right pronouns. From there, we follow those feelings to learn more about what fits.

Coming out is a different process. We do the identity exploration first, then we get clear on the "why": why does this matter to you? Then we talk about the "who": who feels like a safe person to start with? I help clients build a support network so they feel safe and loved no matter the response.

What advice would you give someone who's queer and nervous about starting therapy?
It's okay to be nervous. A lot of therapists have anxiety too! You can name that nervousness out loud, and we're here to help you feel more comfortable. You deserve to feel seen and heard, and it's okay to take your time finding the right fit.

If you could give your younger self a message, what would it be?
You don't have to have it all figured out. Therapy can be the space where you explore those questions. Maybe you're someone who can sort through all on these questions on your own—I wasn't. Talking to someone with lived experience can be so overwhelmingly wonderful.

If you want to start therapy, you should. Whether it's anxiety, identity, or just needing someone to talk to—those are good reasons to start.

If you could give your younger self a message, what would it be?
Things can be hard, but there's nothing more relieving than being yourself. You're going to find love and connection in friends and relationships, even if you feel lonely right now. That won't last forever. Sunny reminds us that therapy is

Conclusion
about showing up with compassion, curiosity, and openness. For queer clients, having a therapist who understands their world can transform therapy from intimidating to empowering. Whether you're exploring your identity, coming out, or just trying to find your footing, there's a place for you here. And as Sunny says: you deserve to be seen exactly as you are.

TOOLS TO HELP YOU IN MOMENTS OF PANIC OR STRESS

Miranda Barker, LICSW, LCSW

When you're having a panic attack, it can feel like you're in real danger—even though there's no actual threat. That's because your brain and body are responding as if a lion is about to pounce towards you, triggering your fight-or-flight system. Your heart races, your breathing speeds up, and your muscles tense, all to prepare you for survival. But the tricky part is, there is no lion. Your nervous system is reacting to perceived danger, not real danger.

The good news is that techniques like grounding exercises, controlled breathing, and progressive muscle relaxation can teach your body that it's safe. These strategies help deactivate the alarm system, signaling to your brain that the lion isn't real, so your body can return to a calmer state.

54321 Grounding Exercise: Focus on the Present

The 5-4-3-2-1 grounding technique is a simple and effective way to bring yourself back to the present moment when anxiety is taking over. By engaging your senses, you can distract your mind from overwhelming thoughts and focus on what's happening around you.

Scan on Spotify to practice this skill:

Other Quick Calming Techniques

- **TIPP Skill:** This stands for temperature (like taking a cold shower, holding an ice cube), intense exercise (bring your heart rate up with a run, jumping jacks or quick dance party), progressive muscle relaxation (find the link below), and paced breathing (we love the box breathing method for this). Each of these elements can be used to quickly soothe your body's stress response.
- **Mindful Observation:** Choose one object in your environment and focus all your attention on it. Notice its color, texture, and shape, and describe it to yourself in detail.
- **Sour or Spicey Candy:** Trust me on this one, but candies like warheads, cinnamon gum, or sour patch kids can be a quick shock to your senses.

This progressive muscle relaxation to calm your mind:

These are just a few of the many tools you can use to find calm during moments of panic. Need more support? A therapist can help you get to the root of what's causing you anxiety.

CONVERSION THERAPY

Why It's Harmful and Why Banning It Matters

Terri Bly, PsyD, LP

According to a recent study by the Williams Institute at UCLA, approximately 698,000 adults in the US have received conversion therapy, and about 350,000 of them were adolescents at the time of the treatment. It is also estimated that another 16,000 American teens will participate in conversion therapy with a licensed mental health provider before they reach adulthood, and around 57,000 American teens will undergo conversion therapy efforts with a religious or spiritual advisor.

As of April 2023, 21 states and the District of Columbia have passed laws prohibiting licensed mental health professionals from providing conversion therapy services for adolescents or vulnerable adults. The law does not apply to faith leaders or churches. Conversely, 11 other states (and counting) have passed laws in 2023 banning gender-affirming care for minors. Not coincidentally, none of those 11 states have passed laws banning conversion therapy. In other words, lines are being drawn when it comes to the treatment of sexual orientation and gender identity, with people on both sides of the issue insisting that young people's lives are at stake and laws must be passed to protect them. Emotions, and tensions, are high.

So, what is the "truth" when it comes to therapeutic interventions designed to change someone's sexual orientation or gender identity? Why are so many states pushing to ban it, and why are some groups fighting to keep it legal? And for young people experiencing distress related to their sexual orientation and/or gender identity, what help can mental health professionals offer if conversion therapy is off the table?

For those unfamiliar with the practice of conversion therapy, a brief overview: Attempts to alter someone's same-sex attraction began in earnest at the very end of the 19th century. Initially targeted at homosexual men, but eventually branching out to include women and transgendered individuals, these early attempts to "cure"

homosexuality included electroconvulsive treatments ("shock therapy"), testicle transplants, hormone injections, even lobotomies. Although conversion therapy has since moved away from these more dramatic interventions, research on all forms of conversion therapy fails to show any evidence that sexual orientation and gender identity are changeable, and that trying to change them can have a lasting negative impact on a person's mental health.

In 1986, homosexuality as a disorder was removed entirely from the Diagnostic and Statistical Manual (DSM). Meanwhile, many in the mental health community concluded that conversion therapy was not only ineffective, but also unethical and unnecessary, and this continues to be the official position by prominent groups such as the American Psychological Association. Some religious organizations and faith-based groups, however, continue to assert that identifying as anything other than cis gender and heterosexual is morally wrong, and that with appropriate help and prayer, a person can change their sexual orientation or gender identity. Or, barring their ability to change how they feel, people can learn to behave in line with religious teachings without negatively compromising their mental health. As such, some people who experience same-sex attraction or gender dysphoria (or their family members) still seek help for these "conditions," particularly those who belong to families, churches and communities in which being gay or transgender is viewed as an abomination.

In response to the ongoing demand for interventions that claim to modify a person's sexual orientation or gender identity, there continue to be faith-based counseling centers and private practitioners offering what is now more commonly referred to as "change-allowing therapy." The justification for providing these services is that therapists should be able to meet the client where they are at, respecting the client's right to determine their own goals for treatment. In other words, if someone feels distress related to their same-sex attraction or gender identity, they should have the right to pursue treatment for it.

Is there a case, then, to be made for trying to help someone who believes their sexual orientation or gender identity is a problem, and who wants to live their life in a way that aligns with the values of their religious faith or culture? After all, many people who are gay or transgender risk losing their faith community, their friends, and even their family. They are also at higher risk of becoming targets of violence, are more likely to suffer from mental health problems, and have a higher rate of suicide than heterosexual and cis gender individuals. Is there something to be said for trying to help them avoid these outcomes, by helping them adjust their sexual attraction or gender identity? Perhaps more importantly, shouldn't everyone - including teenagers - have the right to determine their own goals for treatment?

The first problem with this logic is the implication that being queer or transgender are disorders that can be treated. "Sexual orientation and gender identity are no more 'curable' than left-handedness," explains Dr. Nicolas Griffith, a retired clinical psychologist and former professor of psychopathology at the Minnesota School of Professional Psychology. "You can ruler someone's left hand bloody and it won't stop them from being left-handed," referring to the now-antiquated practice of punishing students for writing with their left hands. "Sexual orientation and gender identity are no different." He goes on to point out that licensed clinicians are required to practice only those interventions with demonstrated effectiveness, which conversion (or change-allowing) therapy does not have. Because of this, "we are no more allowed to participate as a clinician in conversion therapy for sexuality than we are for conversion for right- and left-handedness."

In other words, one major problem with conversion therapy - aside from its underlying assumptions that certain sexual orientations and gender identities are disordered - is that it doesn't work. Moreover, it can cause harm. And licensed clinicians are prohibited from offering services if the research shows they don't work and can hurt people, even if the client actively wants the service. Since there is no evidence to suggest that changing one's sexual orientation or gender identity is any more possible than changing one's skin color, or which hand they write with, for a licensed therapist to claim otherwise is both inaccurate and unethical.

But what about the higher rates of mental health problems in the queer community? If they are so much higher than they are for cis gender, heterosexual individuals, shouldn't mental health providers be allowed to help someone who is experiencing distress they believe is due to their sexual orientation or gender identity, even if it means helping them live as a straight, cis gender person? "I think this is a societal pathology [causing the distress], rather than an individual pathology," asserts Griffith, "just like racism, classism, and sexism. The DSM only focuses on the individual and has nothing in it about societal pathology that then results in the distress."

The second problem with conversion therapy, therefore, is that it essentially treats a societal problem - specifically, the pathologizing of queer or transgender identities - as an individual one. Consequently, conversion therapy becomes akin to "blaming the victim," which may help explain why individuals who undergo conversion therapy have even higher rates of mental health problems and suicidal ideation than queer individuals who are accepted by their family and community.

In response to the evidence showing conversion therapy as both ineffective and potentially harmful, some faith-based counseling organizations have started moving away from a change focus, proposing instead that therapists help their clients learn how to avoid acting on their sexual feelings, either through celibacy or heterosexual marriage. While behavior changes like engaging in a heterosexual marriage may be possible, Griffith believes they are also problematic. "They might not be able to function particularly well sexually with their partner, but enough to beget [children]." More importantly, he adds, "it is always going to be incongruent with their experience," which is likely to have a negative impact on their mental health. It also reinforces the idea that their authentic self is wrong and must be repressed. As for promoting celibacy as an alternative to homosexual relationships? "It's evil," states Griffith." [The therapist] is essentially preventing their client from learning how to be in relationship. And that is evil."

So, if changing one's sexual orientation or gender identity is not possible, and trying instead to live as a cis gender, heterosexual person is not psychologically healthy, what options does a person have if they are unsure how to reconcile their sexual orientation or gender identity with other important aspects of their life? Even if the "pathology" is societal, trying to change an entire community, or their religion's belief system, isn't exactly an appropriate goal for therapy, either. One possible approach, suggests Dr. Griffith, would be to address the problems within the family system that come up in response to the person's sexual orientation or gender identity. "I think it would be better to ask them to invite their family in for some therapy sessions, to talk about their discomfort. I bet it distresses them as well, so let's talk about that. And if the family won't [address their discomfort], let's talk about developing a support system of people who like you and accept you for who you are. Then you can have your biological family and also a family of choice."

Lastly, it is important to note that while conversion therapy bans are intended to prevent licensed mental health practitioners from practicing conversion therapy or similar interventions, therapists can (and do) talk with their teenage and adult clients about sexual orientation, gender identity, and whatever distress they may experience in response to any or all of the above. And just as therapists should neither endorse nor attempt an intervention that doesn't work, nor should they actively encourage a client to disown their family or leave their church as a result of their sexual orientation or gender identity. An ethical, competent therapist will be able to sit with a person at any stage of their identity exploration, discuss their distress, support them as they work through the complexities of their situation, and empower them to determine how best to reconcile their identity with their culture, faith, and family.

For a complete list of sources used for this article, please find this article on our blog:www.elliementalhealth.com/blog/

MY KID IS GAY, WHAT DO I DO NOW?

By Anna Trout, MA LMFT

This is a question I've heard countless times over the years while working with LGBGTQ+ youth. Parents are often scared, and I get it; I mean, we are persecuting drag queens right now. But while the world is often chaotic and unpredictable, we as parents need to be our kids' safety nets. As a parent of two children, I can honestly say that I would love to wrap them both up in bubble wrap and prevent anything bad from ever happening to them. But that's not realistic.

So, first and foremost, let me say this: the most important thing you can do is love your child. The world may be cruel and unkind at times, but you do not need to be like the world. You can be your child's refuge.

Now, when I say this, I often hear, "But how do I know that this isn't a phase?" And to be fair, you don't. You love them anyway. I've had many clients change how they define their sexual orientation, gender identity, and gender expression numerous times before settling into their full identity. And some never do. And that's okay. Sexuality is a spectrum, and it's ever-evolving. Change is normal.

So, if your teen says, "I think I'm a boy," and asks you to use he/him pronouns, please do. Show him that you accept who he is. If later he changes to she/her pronouns or they/them, please use those pronouns. Follow your child's lead. Let them tell you who they are, while you continue to love them no matter what. It is 100% normal for a child to explore and question their sexuality and gender. This is part of identity formation, and it is a normal part of development. This can be scary for parents. We don't always like to think about our kids as sexual beings. But these conversations are important. If you want a close relationship with your child, you need to be willing to talk to them with an open mind about a variety of topics - including their sexuality and gender identity.

To answer the question, "What do I do now?," you do what you've likely already been doing: you love your child. Follow their lead in their journey. Ask questions if you don't understand. That's okay! They will appreciate you trying to understand them and getting further clarification. Ask them how they would like to be supported. Would they like to see a mental health therapist to navigate the coming out process or to further explore their sexuality? Would they like you to help talk to grandma?

Additionally, you can look at groups such as PFLAG to meet with other families and allies so that you can get support as well. You can also meet with a therapist to talk about your anxieties. This is a change for all of you, after all!

Finally, let me say this: It is true that the world is unpredictable, and at times scary. But the only way we can change the world is if we change ourselves. If more people become allies to the LGBTQ+ community, we can create a safer (and, might I add, more colorful) world for all.

Why Does Ellie Mental Health Celebrating Pride?

Ellies across the nation celebrate Pride joyfully attending Pride events, parades, booths, performances, committees, concerts, and dinners, and joining together to support their local LGBTQIA+ community. But we also know that truly supporting the community goes beyond designing with rainbow graphics and fun giveaway merch. It also means educating clinicians and communities on the importance of caring for the unique mental health needs of the queer community. The statistics are painful: ***60% of LGBTQ+ youth who wanted mental health care in the past year were not able to get it and nearly half of LGBTQ+ youth seriously consider suicide.***

We consider it our responsibility to do our part in positively impacting these statistics, not just as one of the nation's leading mental health companies, but because it's our responsibility as human beings. Each Pride, Ellie focuses intentionally on raising awareness of gaps in care provision for the LGBTQIA+ community. And puts focused effort behind educating clinicians on adequately providing affirmative, ethical care to this great group of people who need it. Informed, accessible mental health care provision for all members of the LGBTQIA+ community is certainly something worth celebrating!

Looking for Support?
Find Your Local Clinic Here: