



## Creating Supportive Policies for LGBT Youth

When it comes to mental, emotional, and behavioral (MEB) health concerns, lesbian, gay, bisexual, and transgender (LGBT) youth are a distinct, high-risk group due to the experience of stigma and discrimination. Not only are LGBT youth at increased risk for harassment and assault because of their sexual orientation or gender identity but the stress of these risks also increases the likelihood that LGBT youth will experience behavioral health problems.

Because of a lack of attention and effective legal protection, however, the needs of LGBT youth are often overlooked. Advocacy for a set of policies that have proven successful at the state and community levels can ensure the safety of these young people and promote nurturing, inclusive environments.

### Risk Factors Facing LGBT Youth

LGBT youth experience a higher risk of being harassed and assaulted than their non-LGBT peers.

- A study conducted in 2009 by the Gay, Lesbian and Straight Education Network reported that:<sup>1</sup>
  - In the past year, 84.6 percent of LGBT students were verbally harassed, 40.1 percent were physically harassed, and 18.8 percent were physically assaulted at school because of their sexual orientation.
  - In the past year, 63.7 percent of LGBT students were verbally harassed, 27.2 percent were physically harassed, and 12.5 percent were physically assaulted at school because of their nonconforming gender expression.





## Creating Supportive Policies for LGBT Youth



- In the month prior to the survey, 29.1 percent of LGBT students missed a class at least once and 30.0 percent missed at least 1 day of school because of safety concerns, compared with only 8.0 percent and 6.7 percent, respectively, of a national sample of secondary school students.
- Harassment can lead to poor academic performance. The grade point average of students who were harassed more frequently because of their sexual orientation or gender expression was almost half a grade lower than for students who were harassed less often.
- LGBT youth often experience rejection and violence in their homes.<sup>2,3</sup>
- LGBT adolescents are at higher risk of becoming homeless, either because they leave home to escape violence or because they have been forced out of their homes.<sup>4,5</sup> Studies estimate that 20 to 40 percent of homeless youth identify themselves as LGBT.<sup>6</sup>
- LGBT youth in foster care settings may face challenges that range from disregard of their identity to harassment and mistreatment by foster parents, group home staff, their peers, and even case workers. In some foster homes that are operated by religious organizations, negative beliefs about homosexuality can create hostile environments for LGBT youth.<sup>7,8</sup>
- Within juvenile justice settings, LGBT youth have reported being exposed to humiliating or violent treatment; having staff fail to protect them from abuse; facing forced segregation and isolation; and experiencing the inappropriate housing of LGBT youth with sex offenders solely on the basis of the youth's sexual orientation or gender identity.<sup>9</sup>



## Creating Supportive Policies for LGBT Youth

LGBT youth are also at higher risk of experiencing a MEB disorder because of the stigma and discrimination associated with their sexual orientation or gender identity:

- The stress that LGBT youth experience as a result of stigma and discrimination is associated with elevated rates of depression, anxiety, substance use, and self-harm.<sup>10,11,12</sup>
- Studies have shown that LGBT adolescents are at higher risk for suicide attempts than non-LGBT adolescents.<sup>13,14</sup>
- A recent study found that nearly half of the transgender youth (ages 15–21) surveyed had “seriously thought about” taking their lives and 26 percent had made at least one attempt.<sup>15</sup>
- Family rejection of LGBT youth has been shown to negatively affect healthy development and is associated with behavioral health problems. A recent study found that LGBT young adults who reported family rejection during adolescence are:<sup>16</sup>
  - 8.4 times more likely to have attempted suicide;
  - 5.9 times more likely to have high levels of depression;
  - 3.4 times more likely to use illegal drugs; and
  - 3.4 times more likely to have engaged in unprotected sexual behavior.



## Policies Can be Enacted To Reduce These Risks

Policymakers can positively influence the environments in which LGBT youth live through policy changes and targeted legislation. Such efforts can result in increased school attendance and performance and a decrease in costly behavioral health problems.



## Creating Supportive Policies for LGBT Youth

Positive steps that Departments of Education and school districts can take to protect youth include:<sup>17,18,19,20</sup>

- Establishing and enforcing formal policies that prohibit bullying, harassment, and violence on the basis of students' actual or perceived sexual orientation or gender identity.
- Providing professional development training for school administrators and personnel on sexual orientation and gender identity. Training should include how to foster accepting environments for these youth, along with strategies for intervening when harassment takes place.
- Ensuring that schools identify "safe spaces," such as counselors' offices, designated classrooms, or student organizations, where LGBT youth can receive support from administrators, teachers, or other school staff.
- Making single-unit, gender-neutral bathrooms and private shower facilities available to better meet the needs of transgender youth.
- Ensuring that information and resources made available through the school are inclusive of and relevant to LGBT youth.
- Facilitating access to community-based providers with experience in providing strength-based services to LGBT youth.

Additionally, all state agencies serving children and families can commit to policy and practice changes that will improve the environment for LGBT youth, and local groups serving the community can take similar steps in their organizations:<sup>21,22,23,24,25</sup>

- Institute and enforce written policies that specifically bar discrimination on the basis of actual or perceived sexual orientation and gender identity, and provide staff with training on those policies.
- Implement required in-service training for staff and contracted providers on LGBT-supportive practices, as well as information on issues faced by many LGBT youth.
- Develop materials that offer LGBT-affirming information on promoting safety and well-being for LGBT youth. The agency and its providers can share these materials with youth, families, and other stakeholders.



## Creating Supportive Policies for LGBT Youth

- Implement child-specific service planning guidelines to ensure that youth are matched with service providers who are equipped to address their unique needs.
- Include specific language in procurement requests, when contracting for provider services, to stipulate that contractors must adhere to a policy specifically barring discrimination on the basis of actual or perceived sexual orientation and gender identity for the clients that they serve under state funding.
- Mandate individual-level LGBT awareness training and demonstrated competency as a part of the professional licensing process for health and social service providers.
- Advocate for the repeal of existing state policies and practices that may impede LGBT persons from serving as foster or adoptive parents.
- Ensure that publicly funded programs are supportive of the needs of transgender youth by providing single-unit, gender-neutral bathrooms and private shower facilities.



## Be Aware of Legal Protections That Already Exist

LGBT youth in state custody have legal rights protecting their safety and physical, mental, and emotional well-being. According to a legal review conducted by the Child Welfare League of America, states can be held liable for:<sup>25</sup>

- Failing to protect LGBT youth from harassment and violence at the hands of caretakers or other youth;
- Requiring a young person to participate in therapies intended to change their sexual orientation or gender identities;
- Failing to assist an LGBT young person in identifying community supports and resources in order to ameliorate feelings of isolation and depression;



## Creating Supportive Policies for LGBT Youth

- Classifying LGBT youth automatically as sex offenders or placing them in isolation;
- Not providing appropriate medical care for transgender youth;
- Punishing LGBT youth for behaviors for which non-LGBT youth are not punished;
- Moralizing, ignoring, or pathologizing LGBT youth; and
- Placing LGBT youth in humiliating, embarrassing, or dangerous situations.

Policymakers and providers at the state and local levels can make a meaningful difference in creating safer and more nurturing environments for LGBT youth, thereby creating healthier communities. For additional resources, please see the list below.



### Additional Resources

- **The Gay Lesbian Straight Education Network**, <http://www.glsen.org>  
Strategies for creating safer and more inclusive school environments for LGBT youth.
- **The Human Rights Campaign**, <http://www.hrc.org/resources/entry/lgbt-cultural-competence>  
Resources and sample policies to assist providers and organizations in promoting LGBT cultural competency.
- **Child Welfare League of America**, <http://www.nclrights.org/site/DocServer/bestpracticeslgbtyouth.pdf?docID=1322>  
Best practices for serving LGBT youth in the child welfare system.
- **Family Acceptance Project**, <http://familyproject.sfsu.edu/>  
Research-based, culturally grounded approaches to help ethnically, socially, and religiously diverse families decrease rejection and increase support for their LGBT children.



## Creating Supportive Policies for LGBT Youth

- **Lambda Legal** (in partnership with the National Association of Social Workers) Train-the-trainer materials developed by child-serving professionals working with LGBT youth: see [http://data.lambdalegal.org/publications/downloads/mtm\\_moving-the-margins.pdf](http://data.lambdalegal.org/publications/downloads/mtm_moving-the-margins.pdf)

Research best practices for serving LGBT youth who are homeless:  
[http://data.lambdalegal.org/publications/downloads/bkl\\_national-recommended-best-practices-for-lgbt-homeless-youth.pdf](http://data.lambdalegal.org/publications/downloads/bkl_national-recommended-best-practices-for-lgbt-homeless-youth.pdf)
- **American Psychological Association's Lesbian, Gay, Bisexual, and Transgender Concerns Office**, <http://www.apa.org/pi/lgbt/about/index.aspx>

Understanding of gender identity and sexual orientation as aspects of human diversity as a means of reducing stigma, prejudice, discrimination, and violence toward LGBT people.
- **Center of Excellence for Transgender Health**, <http://www.transhealth.ucsf.edu>

Operated out of the University of California, San Francisco to increase access to comprehensive, effective, and affirming health care services for trans and gender-variant communities.

## References

- 1 Kosciw, J., Greytak, E., Diaz, E., & Bartkiewicz, M. (2010). *The 2009 National School Climate Survey: The experiences of lesbian, gay, bisexual and transgender youth in our nation's schools*. New York: Gay, Lesbian Straight Education Network.
- 2 Wilber, S., Ryan, C., & Marksamer, J. (2006). *Best practice guidelines: Serving LGBT youth in out-of-home care*. Washington, DC: Child Welfare League of America.
- 3 Grossman, A.H., D'Augelli, A. R., & Salter, N. P. (2006). Male-to-female transgender youth: Gender expression milestones, gender atypicality, victimization, and parents' responses. *Journal of GLBT Family Studies*, 2, 71–92.
- 4 Wilber, S., Ryan, C., & Marksamer, J. (2006).
- 5 Coker, T. R., Austin, S. B., & Schuster, M. A. (2010). The health and health care of lesbian, gay, and bisexual adolescents. *Annual Review of Public Health*, 31, 457–477.
- 6 Ray, N. (2006). *Lesbian, gay, bisexual and transgender youth: An epidemic of homelessness*. New York: National Gay and Lesbian Task Force Policy Institute and the National Coalition for the Homeless.
- 7 Wilber, S., Ryan, C., & Marksamer, J. (2006).
- 8 Gilliam, J. (2004). Toward providing a welcoming home for all: Enacting a new approach to address the longstanding problems lesbian, gay, bisexual, and transgender youth face in the foster care system. *Loyola of Los Angeles Law Review*, 37, 1037–1063.
- 9 Estrada, R., & Marksamer, J. (2006). *The legal rights of LGBT youth in state custody: What child welfare and juvenile justice professionals need to know*. Washington, DC: Child Welfare League of America.



## Creating Supportive Policies for LGBT Youth

- 10 Almeida, J., Johnson, R., Corliss, H., Molnar, B., & Azrael, D. (2009). Emotional distress among LGBT youth: The influence of perceived discrimination based on sexual orientation. *Journal of Youth and Adolescence*, 38(7), 1001–1014.
- 11 Hughs, T., & Eliason, M. (2002). Substance use and abuse in lesbian, gay, bisexual, and transgender populations. *The Journal of Primary Prevention*, 22(3), 263–298.
- 12 D’Augelli, A. R. (2002). Mental health problems among lesbian, gay, and bisexual youths age 14 to 21. *Clinical Child Psychology and Psychiatry*, 7, 433–456.
- 13 Eisenberg, M. E., & Resnick, M. D. (2006). Suicidality among gay, lesbian and bisexual youth: The role of protective factors. *Journal of Adolescent Health*, 39, 662–668.
- 14 Massachusetts Department of Education. (2006). *Suicidality and self-inflicted injury*. In Massachusetts Department of Education, 2005 Massachusetts Youth Risk Behavior Survey results. Malden, MA.
- 15 Grossman, A. H., & D’Augelli, A. R. (2007). Transgender youth and life-threatening behaviors. *Suicide and Life-Threatening Behavior*, 37(5), 527–537.
- 16 Ryan, C., Huebner, D., Diaz, R. M., & Sanchez, J. (2009). Family rejection as a predictor of negative health outcomes in white and Latino lesbian, gay, and bisexual young adults. *Pediatrics*, 123, 346–352.
- 17 Kosciw, J., Greytak, E., Diaz, E., & Bartkiewicz, M. (2010).
- 18 Centers for Disease Control and Prevention. (2011). *Lesbian, gay, bisexual, and transgender health—Youth*. From <http://www.cdc.gov/lgbthealth/youth.htm> (accessed August 6, 2012).
- 19 Russell, S. (2010). Supportive social services for LGBT youth: Lessons from the safe schools movement. *The Prevention Researcher*, 17(4), 14–16.
- 20 McGuire, J., & Conover-Williams, M. (2010). Creating spaces to support transgender youth. *The Prevention Researcher*, 17(4), 17–20.
- 21 Wilber, S., Ryan, C., & Marksamer, J. (2006). *Best practice guidelines: Serving LGBT youth in out-of-home care*. Washington, DC: Child Welfare League of America.
- 22 Ray, N. (2006). *Lesbian, gay, bisexual and transgender youth: An epidemic of homelessness*. New York: National Gay and Lesbian Task Force Policy Institute and the National Coalition for the Homeless.
- 23 Russell, S. (2010). Supportive social services for LGBT youth: Lessons from the safe schools movement. *The Prevention Researcher*, 17(4), 14–16.
- 24 McGuire, J., & Conover-Williams, M. (2010). Creating spaces to support transgender youth. *The Prevention Researcher*, 17(4), 17–20.
- 25 Estrada, R., & Marksamer, J. (2006).

### About This Initiative

*This product was developed as part of the National Association of State Mental Health Program Directors’ ongoing efforts to advance positive mental, emotional, and behavioral health and to prevent mental illness and substance use among Americans across the lifespan.*

*More information and resources can be found at <http://www.NASMHPD.org>.*