

What the Research Says

Support Systems for LGBT Youth

According to Doty, Willoughby, Lindahl and Malik (2010), LGBT individuals face significant stressors as a result of their sexual identity. Their social support plays a big role in helping them cope with these sexually related stressors. In order to find out how LGBT youth perceive their support systems and in order to find out how their support systems affect them, these researchers did a study investigating which support systems the youth felt they had. The researchers found that LGBT youth perceived family members as providing less support for sexuality related problems than for other types of problems (Doty, Willoughby, Lindahl & Malik, 2010). Heterosexual friends provided higher levels of sexuality support than family members do, but they were still viewed as providing less support for sexuality related problems than for other types of problems (Doty, Willoughby, Lindahl & Malik, 2010). Sexual minority friends on the other hand, seem to have provided the highest levels of sexuality support and were equally supportive across sexuality related and non-sexuality related domains (Doty, Willoughby, Lindahl & Malik, 2010). These researchers recommend getting involved in organizations designed to promote supportive relationships among sexual minorities because it helps build their self-esteem and provides them with a valuable support system (Doty, Willoughby, Lindahl & Malik, 2010).

LGBT Youth's Emotional Distress from Perceived Discrimination Based on Sexual Identity

Almeida et al. (2009) state that suicide risk is much greater for LGBTQ individuals than heterosexual individuals because of the discrimination they face based on their perceived (or accurate) sexual orientation. This distress comes from the idea that these adolescents with a

minority sexual identity must deal with the stigmatization that comes from having that label be put on them (Almeida et al., 2009). In their study examining emotional distress for high school students based on their sexual identity, they found that LGBT youth were more likely than their heterosexual, non-transgendered peers to have emotional distress as demonstrated by higher levels of depressive symptoms, and a greater likelihood of reporting self-harm and suicidal ideation (Almeida et al., 2009). They also found that LGBT high school students reported significantly more perceived discrimination on the basis of their minority sexual orientation status (Almeida et al., 2009). These findings suggest the importance of understanding the experiences of LGBT youth, the differences for males and females and the crucial role in developing a safe and supportive environment to help with their emotional well-being (Almeida et al., 2009).

Providing a Supportive Work Environment

According to Huffman, Watrous-Rodriguez and King (2008), many LGBT individuals are isolated because they work in predominantly heterosexual environments and experience a unique form of distress because they feel as though they are not treated the same as everyone else. The aim of their study was to help researchers and human resource managers gain a better understanding of the work environment and employee diversity for these individuals. Huffman, Watrous-Rodriguez and King (2008) believe that it is crucial for human resource practitioners to ensure that LGBT employees feel supported by their supervisors, coworkers and overall organization. These researchers found that supervisor support was more strongly related to job satisfaction than either coworker or organizational support for LGBT employees (Huffman, Watrous-Rodriguez & King, 2008). Additionally, coworker support was found to be more

strongly related to life satisfaction (Huffman, Watrous-Rodriguez & King, 2008). Furthermore, organizational support for LGBT employees had a stronger impact for the individuals to be out with their sexuality identity than supervisor or coworkers did (Huffman, Watrous-Rodriguez & King, 2008). Huffman, Watrous-Rodriguez and King (2008) suggests providing an LGBT-supportive training, as well as having managers create an atmosphere of acceptance by writing a statement of affirming the organizations support of LGBT employees. They also recommend organizations creating a survey to find out how supportive the environment is and work on changing those attitudes depending on how the survey came out (Huffman, Watrous-Rodriguez & King, 2008).

Permanency for LGBTQ Foster Care Children

According to Jacobs and Freundlich (2006), during the past several years, a national movement has taken place to assure all children and youth have a permanent family connection before leaving the child welfare system; however, LGBTQ youth are not routinely included in the permanency discussions. Permanency is rarely mentioned as a need, even though LGBT issues have been addressed more and more as year goes by. In order to meet permanency needs of LGBT youth, Jacobs and Freundlich (2006) recommends starting by creating a safe environment where youth feel comfortable enough to disclose their sexual identity. Caseworkers should not make assumptions about a youth's sexual identity and should remove all judgment and biases. One way to go about doing this as Jacobs and Freundlich (2006) recommend, is by implementing these practices into their policies and organization bylaws. Jacobs and Freundlich (2006) also highlights the importance of the staff communicating to the youth that they are "LGBTQ-friendly." He also reminds us that the core of helping these individuals is believing

that there are families for them and that there are parents who want these children (Jacobs & Freundlich, 2006). Furthermore, we must remember that LGBTQ youth have the same fears and stressors as other children in the foster care system and we need to provide them with the same support and care as we would any foster care child (Jacobs & Freundlich, 2006).

LGBTQ Youth Legal Rights in Juvenile System and Child Welfare

Knowledge of a youth's legal rights can help providers avoid legal liability while creating a safer and healthier environment for LGBTQ youth. Estrada and Marksamer (2006) describe how a lot of abuse happens in the juvenile system and child welfare contexts for LGBTQ youth and describe what professionals working in these areas and with these populations need to know. Since many of these LGBTQ youth are sexually and verbally harassed, faced with violence and subjected to differential treatment based on their sexual identity, it is our job as professionals to make sure they are safe and treated fairly by the system. Estrada and Marksamer (2006) state that child welfare professionals must avoid contracting for services that use inappropriate or unethical practices when working with LGBTQ youth such as “conversion therapy.” They further state that LGBTQ youth should never be placed in isolation or in punishment based on their sexual orientation (Estrada & Marksamer, 2006). Other ways the Estrada and Marksamer (2006) state can be ways of violating the civil rights that LGBTQ people have are: failing to assist them in identifying community supports and resources in order to help with depression and stress, not providing appropriate medical care for transgenders and placing them in humiliating, embarrassing or dangerous situations. These researchers recommend that agencies and facilities that work with these populations must education themselves on the needs of LGBTQ individuals and must know their civil rights (Estrada & Marksamer, 2006). Additionally, they must train

providers on how to work with them in a nondiscriminant and effective way. This means addressing the proper language that should be used, the appropriate body language and should train each provider to remove all biases and stereotypes they may hold against them.

Sexual Assault Support for LGBTQ Individuals

Lesbian, gay, bisexual, transgender, and queer (LGBTQ) individuals encounter social conditions that create important considerations for LGBTQ sexual assault victims. In a study by Todahl et al. (2009), they examine the relationship between community attitudes toward LGBTQ persons and associated community responses to LGBTQ sexual assault victims. This study supports the ongoing need to understand the multiple identities held by members of the LGBTQ community and the impact of those identities on access to services, community relations, and sexual violence risk. These researchers found that a lot of the LGBTQ individuals do not feel that there is a strong support for them in the community and do not feel that there is enough awareness about sexual violence for LGBTQ individuals (Todahl et al., 2009). Survey and focus group participants in this study highlighted the importance of changing attitudes about the LGBTQ community, increasing access to LGBTQ- friendly services, and developing and implementing LGBTQ-sensitive training protocols for key social and health service delivery systems (Todahl et al., 2009).

How Clinicians Can Help Navigate the “Coming Out” Process

Hill (2009) describes how hard coming out can be since homosexual individuals must disclose their sexual orientations in a way that heterosexual individuals need not. She describes how our society has privileged those who are straight and made them the ideal, leading those

who do not fit that norm to face prejudice and discrimination (Hill, 2009). Since we are taught since childhood that we are supposed to become romantically attracted to those in the opposite-sex, those who have no or low attraction, feel confused and defective (Hill, 2009). Additionally, there are many LGBTQ individuals who do not want to use any of those labels because they may feel as though it puts them in a category they do not fit, or that category does not fully capture their true sexual identity (Hill, 2009). Furthermore, since we live in such an anti-homosexuality society, those who may finally feel ready to come out to their family and friends, may experience a significant amount of stress and anxiety from fear of how their close ones may react (Hill, 2009). Hill (2009) advises clinicians' are currently working with this population or will in their future, to help clients who are in the coming out process by focusing on their strengths, drawing principles of cultural competence, being nonjudgemental and allowing the therapeutic relationship to be a safe zone for them. She goes on in saying that many times, it may be the clinicians' job to help the individual identify their sexuality by educating them on all of the different types, as well as normalizing, validating and supporting the client with where they currently are in the process (Hill, 2009). In order to help facilitate the client in coming out to his/her friends or family, a clinician can aid in this process by discussing the pros and cons to confessing, the benefits and the risks, and provide coping strategies to deal with any pain that may come from it (Hill, 2009).

References

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