Bent but not Broken: Risk, Resiliency, and Therapeutic Interventions with LGBTQ Youth

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EON Youth Lounge
Need for youth to have a safe space that is welcoming and inclusive of sexual minority and gender variant youth

LGBTQ youth may face harassment, violence, and isolation at school and at home

Eon Youth Center is the only LGBTQ youth drop-in center in Arizona
EON Youth Lounge

- Drop-in lounge for LGBTQ and straight ally youth ages 13-23
- Activities include movie nights, monthly gender benders and dances, youth leadership activities, sexual health services, homeless youth program, weekly support group, and therapeutic services.
- Our primary program is The Prism Project
Working together to go far...
Prism: A Collaborative Project

- Eon “Lounge” Youth Center – Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) youth ages 13-23
- Collaborative model: Pima County Health Department, Wingspan, Southern Arizona AIDS Foundation (SAAF), CODAC Behavioral Services, and Southwest Institute for Research on Women (SIROW)
- Prism consists of a series of 7 workshops designed to assist sexual minority youth and their multiethnic peers with substance abuse and identity issues.
- 1 year study for qualified participants
Prism: A Collaborative Project to Empower Sexual Minority Youth of Color

Sexual Orientation

- Gay: 25.8%
- Bisexual: 11.3%
- Heterosexual: 24.5%
- Lesbian: 7.3%
- Not sure: 2.6%
- Other: 2.0%
- Decline to state: 0.0%
Risk Factors for LGBTQ Youth

- **Homophobia**
  - The Challenges faced and particular coping strategies chosen by LGBTQ youth do not always result from individual pathology or deficiency but, rather, have to do with oppressive societal conditions associated with Heterosexism and Homophobia.
  - There is a need for macro analysis of institutional and systemic prejudice toward LGBTQ persons.
  - Expressions of homophobia and heterosexism stigmatize, isolate, and thereby traumatize LGBTQ youth during critical stages of their development.
Experiences of Homophobia
Has anyone ever ......

- Harrased you verbally in school because of your sexuality or gender presentation: 36.3% Baseline, 34.3% 3-month, 33.3% 6-month, 33.3% 12-month
- Harrased you physically in school because of your sexuality or gender presentation: 18.8% Baseline, 16.9% 3-month, 16.9% 6-month, 16.9% 12-month
- Harrased you verbally outside of school because of your sexuality or gender presentation: 29.4% Baseline, 28.8% 3-month, 28.8% 6-month, 28.8% 12-month
- Harrased you physically outside of school because of your sexuality or gender presentation: 13.9% Baseline, 11.5% 3-month, 11.5% 6-month, 11.5% 12-month
Many LGBTQ youth describe their youth as a time filled with anxiety, isolation, and fear.

**Anxiety/Fear Symptom Scale**

- Feeling very anxious, nervous: 60.0% (Baseline) vs. 44.4% (12 month)
- Having to repeat an action over: 52.7% (Baseline) vs. 48.7% (12 month)
- Tumbling, feeling your heart race: 39.3% (Baseline) vs. 38.1% (12 month)
- Getting into a lot of arguments: 28.6% (Baseline) vs. 29.3% (12 month)
- Feeling very afraid of open spaces: 18.7% (Baseline) vs. 15.9% (12 month)
- Avoiding snakes, the dark, being: 48.7% (Baseline) vs. 44.4% (12 month)
- Feeling very afraid of other people: 26.7% (Baseline) vs. 20.6% (12 month)
- Seeing or hearing things: 16.7% (Baseline) vs. 11.3% (12 month)
- Thoughts that you should be...: 11.3% (Baseline) vs. 7.9% (12 month)
Risk Factors

- Experiences of homophobia and heterosexism put LGBTQ youth at risk for dropping out of school, suicide, drug and alcohol abuse, physical and verbal abuse, homelessness, and sex work.
The Gay, Lesbian, and Straight Education Network’s (GLSEN) survey of queer students across the U.S. reported that 83% had been verbally harassed and 42% had been physically harassed in school, with 84% of high school students hearing the words faggot or dyke in the classroom frequently or often, and 86% of the students reporting that school officials “rarely or never” challenged this type of harassment.

Correlated with this abuse and lack of validation from school staff, queer youth are 2 to 5 times more likely to drop out of school than their heterosexual counterparts.
Risk Factors

- National Runaway Switchboard reported that 42% of calls were from youth who identified as gay or lesbian.
- Studies in multiple cities identify 20-40% of homeless youth as LGBTQ.
- Disproportionate homelessness among LGBTQ youth due to parent/guardian rejection, change in home environment after coming out, harassment and violence in shelter settings and group homes.
Making Connections

- Prism Workshop on Homeless LGBTQ Youth
- Homeless Youth Project at Eon - 72 youth involved last year
- Support and leadership groups
- Assist with job and life skills
- Strong relationships with other youth serving agencies
LGBTQ Youth of Color

- LGBT Youth of color face additional barriers
- Youth of color are faced with racism as well as homophobia.
- According to the Gay, Lesbian, Straight Education Network (GLSEN), up to 46 percent of GLBTQ youth of color report experiencing physical violence related to their sexual orientation.
- Nearly 45 percent of youth in one GLSEN survey were verbally harassed in school regarding sexual orientation and race/ethnicity.
- Approximately 70% of the youth who are a part of the Eon “Lounge” Youth Center are people of color.
Risk Factors

- According to GLSEN, LGBTQ youth are 4 times more likely to attempt suicide than their straight peers.
- Factors including social isolation, lack of affirming and validating support services, alienation from family and friends, and society's negative attitude towards gender non-conformity have been noted as contributing to heightened suicide risk.
- Many youth use drugs and alcohol to manage stigma and as a defense against ridicule and violence.
Past 90 days, average number of days using the following:

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<th>Substance</th>
<th>Baseline</th>
<th>3-month</th>
<th>6-month</th>
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Factors to Influence Resiliency

- Protective mechanisms (conditions, circumstances, characteristics of person or environment) serve to enhance the potential for resilience
Three core protective factors include:

- Ability to have truth in being, i.e., “come out”, express themselves or tells about themselves.
- Family Characteristics, this can be family of origin or family of choice.
- Gay and Ally Community Characteristics, i.e., having a peer group or a sense of belonging.
Locating and securing the means to break social isolation, accessing the gay and ally community, and sharing identity are cornerstones in naming protective factors that contribute to resilience.
“Be free to be yourself!”

Eon works to strengthen the gay, lesbian, bisexual, two spirit, transgender, queer, questioning, intersexed, and straight ally youth communities by creating social opportunities, providing information and support on health issues, advocating for youth rights and challenging society’s perceptions of youth as they face institutionalized oppressions that target the many facets of their identities.
“Transformational Ministry”

- “Transformational ministry” is a term used to describe the use of religion to eliminate same-sex desires.
- “Transformational ministry” promotes the message that religious faith and acceptance of same-sex sexuality are incompatible.
- However, many deeply religious people and numerous religious denominations are supportive and accepting of LGBTQ people and their right to be protected from discrimination.
The term “reparative therapy” refers to psychotherapy aimed at eliminating same-sex desires.

“reparative therapy” has been rejected by all the major health and mental health professions, such as the American Academy of Pediatrics, American Counseling Association, American Psychiatric Association, American Psychological Association, National Association of School Psychologists and the National Association of Social Workers.
Psychologists understand that homosexuality is not indicative of mental illness.

Psychologists are encouraged to recognize how their attitudes and knowledge about LGBT issues may be relevant to assessment and treatment and seek consultation or make appropriate referrals when indicated.
Psychologists strive to understand the ways in which social stigmatization (i.e., prejudice, discrimination and violence) poses risks to the mental health and well being of LGBT clients.

Psychologists strive to understand how inaccurate or prejudicial views of homosexuality, bisexuality and/or gender identity may affect the client’s presentation in treatment and the therapeutic process.
Psychologists strive to be knowledgeable about and respect the importance of LGBT relationships.

Psychologists strive to understand the particular circumstances and challenges facing LGBT parents.

Psychologists recognize that the families of LGBT people may include people who are not legally or biologically related.

Psychologists strive to understand how a person’s sexual orientation and/or gender identity may have an impact on his or her family of origin and the relationship to that family of origin.
APA Guidelines

- Psychologists are encouraged to recognize the particular life issues or challenges experienced by LGBT members of racial and ethnic minorities that are related to multiple and often conflicting cultural norms, values and beliefs.

- Psychologists are encouraged to recognize the particular challenges experienced by bisexual individuals and transgender individuals.
APA Guidelines

- Psychologists strive to understand the special problems and risks that exist for LGBT youth.
- Psychologists consider generational differences within LGBT populations, and the particular challenges that may be experienced by LGBT older adults.
- Psychologists are encouraged to recognize the particular challenges experienced by LGBT individuals with physical, sensory, and/or cognitive/emotional disabilities.
Psychologists support the provision of professional education and training on LGBT issues.

Psychologists are encouraged to increase their knowledge and understanding of homosexuality, bisexuality and gender identity through continuing education, training, supervision and consultation.

Psychologists make reasonable efforts to familiarize themselves with relevant mental health, educational, and community resources for LGBT people.
What professionals can do to help nurture resilience

- Do your own work first. LGBT youth can NOT be expected to burden themselves with helping us work through our issues.
- Read about heterosexual privilege and consider its effects in your life.
- Continue to expand the space for LGBT youth to explore their sexual orientation and gender identity in affirming environments.
- Confront and challenge the homophobia and heterosexism that exist in our society, in private and public.
EON and Therapeutic Services

- We faced many barriers to therapy in the beginning, primarily transportation to an off-site office and mistrust of the behavioral health system.
- Based on the need, we shifted to having the therapist on-site full-time.
- The primary issues seen are trauma, both childhood and current, self-mutilating behaviors, substance abuse and issues around sexual and/or gender identity.
Mental Health

Traumatic Stress Scale

- None-Low: 40.0%
- Moderate: 27.0%
- High: 14.3%

Baseline: None-Low 58.7%, Moderate 9.3%, High 14.3%
12 month: None-Low 50.7%, Moderate 9.3%, High 14.3%
Prism Graduation Ceremony
Prism graduates
Prism: Empowering Youth to be Strong, Healthy, and Proud
Case Study 1

- 16 yr. Old lesbian-identified female who has recently started using cocaine and alcohol. She has a history of sexual abuse. She lives with her mom who is supportive of her lesbian identity. They recently moved to town and do not know many people or resources.
Case Study 2

- 19 yr. Old female to male transgender youth is in need of services for self-mutilating behaviors and numerous suicide attempts. He lives with his parents who are not supportive of his gender identity and have been abusive in the past.