

Q&A

For Helping Educators & School Providers To Provide Guidance & Support For Parents & Caregivers Of LGBTQ* Students

Guidance From the Family Acceptance Project®



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Q&A

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*For this publication, we use the acronym **LGBTQ** to discuss the experiences of LGBTQ youth and adults that are grounded in multiple research studies conducted over a period of years. To be inclusive and respectful of diversity, some community groups and agencies use an acronym that covers a wide range of diverse identities including lesbian, gay, bisexual, transgender, queer, Two Spirit, intersex, asexual and others (LGBTQ2SIA+). However, the groups included in this acronym are very diverse and have very different experiences that have not been examined in the same research studies and to the same extent. As a result, we are unable to make the same statements about their shared experiences as we can for what is known about LGBTQ populations. So for accuracy, we use the acronym, LGBTQ.

Q&A

Why are LGBTQ young people at high risk for health and mental health concerns?

Lesbian, gay, bisexual, transgender and queer (LGBTQ) identities are socially stigmatized. Historically, people who were not heterosexual or who did not fit cultural expectations related to gender expression for how girls, boys, men and women are expected to look, act and behave have experienced discrimination, rejection, bullying and violence, including in their families.

Since early studies of gay and later LGBTQ adults and adolescents, LGBTQ people have reported high levels of health and mental health concerns, including depression, substance use, suicidal behavior and victimization compared with non-LGBTQ peers. However, LGBTQ people do not experience increased health risks because of who they are but rather because of how others respond to them.

Research has also shown that the social environment and the political climate, such as the current level of increased hostility towards LGBTQ people, transgender children and youth and their families, cause high levels of stress and contribute to mental health problems. In a study of risk for suicide among middle and high school students in Oregon, for example, lesbian, gay and bisexual (LGB) students in unsupportive communities in the state were 20% more likely to attempt suicide compared with non-LGB peers.

The current hostile social environment towards LGBTQ and gender diverse children, youth and families is experienced by people across the U.S. since disinformation and distortions about sexual orientation and gender identity are spread through social media which has no borders.

Experts who work with LGBTQ young people anticipate that negative coping, self-harm and mental health risks will increase along with violence against LGBTQ people as disinformation continues to escalate.



LGBTQ people do not experience increased health risks because of who they are but rather because of how others respond to them.

Q&A

Why are young people self-identifying as gay or transgender at younger ages today compared with earlier generations of LGBTQ adults?

Although parents, educators, providers, the general public and others who work with children and youth have not been aware of the increasing visibility of LGBTQ children and youth, they have been coming out at younger ages since the 1980s.

Earlier generations of LGBTQ people hid their identities to prevent rejection from family and friends, from bullying and victimization, loss of livelihood and access to higher education, job and housing discrimination and from being the target of anti-LGBTQ violence. This was the case even though many knew they were gay or gender diverse at earlier ages, including in childhood.

Services for LGBTQ Youth – Support groups and programs began to emerge for LGBTQ youth in 1979 and the first school club for LGBTQ students and allies was started in the late 1980s. The emergence of LGBTQ youth services coincided with increased availability of personal computers and the internet that provided access to peer support. At that time, however, LGBTQ youth did not disclose their identities to their family or to most people outside of LGBTQ youth support services to avoid rejection and abuse.

Historically, images of gay and gender diverse people depicted them as being rejected by family and friends, being victimized and harmed by others and living lonely, isolated lives. But increased access to accurate information began to change widespread negative stereotypes and misperceptions of LGBTQ lives and more positive images in the media and popular culture enabled more young people to self-identify in adolescence and childhood. So, by the 1990s, average ages of self-identifying as LGB had dropped from adulthood in the 1970s to ages 14-16.

As the word *transgender* began to be more widely used by the mid-2000s, increasingly, transgender people

became more visible in their families, in the media and in schools and communities, and began to be included in research. This enabled others to learn more about their lives and experiences, including resilience and strength as well as years of experiencing gender difference and the need to hide to protect themselves from ridicule, rejection and discrimination until they were older.

Increased awareness of sexual orientation and gender identity as a normative part of child development today is helping parents, caregivers, educators, providers and others understand that these identities are experienced in childhood and early adolescence. So, support is needed to promote well-being and protect LGBTQ children and youth from rejection and victimization that contributes to health risks and self-harm.

Researchers have studied sexual orientation and gender identity for decades, including early research with gay youth in the 1970s and research from the first gender identity clinic for children and youth in the late 1980s. Unfortunately, people are not aware of decades of research and accurate information about sexual orientation and gender identity in childhood and adolescence, and disinformation has fueled a hostile social climate that is significantly increasing risk for LGBTQ young people and their families.

We are working to provide accurate information and guidance for parents and caregivers and for providers, educators and religious leaders to help diverse families to support their LGBTQ children to prevent health risks, strengthen families and promote well-being.

Q&A

Why is family support so important for LGBTQ children and youth? What happens to LGBTQ children and youth whose parents don't support them or who reject their LGBTQ children?

Extensive research shows the importance of families' affirming and nurturing roles in protecting young people from major health risks. A national study of middle and high school students over more than 20 years has shown that students who feel connected at home and school are up to 66% less likely to experience risk behaviors related to suicidal thoughts, mental health, substance use, sexual health, victimization and violence in adulthood. In addition, those with higher levels of family and school connectedness and support are much more likely to achieve higher levels of education.

For all students, increasing family and school connectedness is a critical factor in supporting overall health and positive development. This is especially important for LGBTQ children and adolescents who were at higher risk for health and mental health concerns before the current mental health emergency.

Early on, the Family Acceptance Project® Director recognized the importance of family support for LGBTQ children and youth. At that time, however, little was known about how families contribute to their LGBTQ children's risk and well-being. More than 20 years ago, the FAP Director launched the Family Acceptance Project® to conduct the first research with LGBTQ youth and families and to develop the first evidence-based family support model to help diverse families to decrease health risks and increase well-being for LGBTQ children and youth.

FAP's research – which included in-depth individual interviews with LGBTQ youth and families – identified more than 100 specific behaviors that parents and caregivers use to respond to their children's LGBTQ identity and gender diversity. Half of these behaviors are rejecting and half are accepting and supportive. FAP measured the presence and frequency of these family

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accepting and rejecting behaviors in a survey of LGBTQ adults to learn how these behaviors contribute to risk and well-being in young adulthood.

Critical Role of Family Support – FAP's research showed for the first time that families play a critical role in contributing to serious health risks & promoting well-being for LGBTQ young people. LGBTQ young people from families that were very accepting of their LGBTQ identity were 3 times less likely to think about or attempt suicide, they were far less likely to experience depression or to have substance abuse problems. They had higher levels of self-esteem, a stronger support system, better overall health and more positive family relationships.

Specific supportive and accepting family behaviors that FAP identified and measured – such as talking with your LGBTQ child to understand their lives and how they experience their identity and listening respectfully without ridiculing, interrupting or punishing them – are affirming behaviors that help to increase connectedness, strengthen the parent-child relationship and give the young person hope that their parents and caregivers will be there for them.

Q&A

Why is family support so important for LGBTQ children and youth? What happens to LGBTQ children and youth whose parents don't support them or who reject their LGBTQ children?

Family Rejection & Significant Health Risks – FAP's research also found that more than 50 family rejecting behaviors that parents, families and caregivers use to try to change, prevent, deny or minimize an LGBTQ young person's identity and gender diversity contribute to significant health and mental health risks. Family behaviors such as not letting a child learn about their identity – which may include preventing them from participating in an LGBTQ youth group or diversity club – or having an LGBTQ friend, trying to change their gender expression or blaming them when others mistreat them because of their LGBTQ identity or gender diversity contribute to suicidal behavior, depression, illegal drug use and risky sexual behavior.

LGBTQ young people who are highly rejected by their family – who experience many family rejecting behaviors – are more than 8 times as likely to attempt suicide, nearly six times as likely to report high levels of clinical depression and more than 3 times as likely to use illegal drugs and to put themselves at high risk for HIV. Family rejection also constricts an LGBTQ youth's ability to care for themselves as a young adult. LGBTQ youth whose families try to change their sexual orientation at home and by taking them to a therapist or religious leaders to change their identity have much lower levels of educational attainment and incomes as young adults. Transgender individuals who have experienced efforts to change their gender identity also have significantly lower levels of education and income in adulthood.

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Q&A

Given the widespread level of disinformation about LGBTQ people, how can parents and caregivers get accurate information about how to care for and support their LGBTQ children?

Most adults have learned about sexual orientation and gender identity based on the experiences of other adults, not on the experiences of children and adolescents. As a result, misinformation about the experiences of LGBTQ adults is imposed on children and teens which further distorts understanding of normative child development of sexual orientation and gender identity and how LGBTQ children and youth experience and express their identity through relationships and interacting with others, like their non-LGBTQ peers.

As noted, the FAP Director and her team did the first research on LGBTQ youth and families. Before this, little was known about how parents, families and caregivers respond to their LGBTQ children and how this affects their risk and well-being. Since then, FAP's research and family support framework has been changing how families care for their LGBTQ children and how services are provided to LGBTQ young people in the context of their families, cultures and faith communities. However, services to help diverse families learn to support their LGBTQ children are very limited, and education, guidance and support have not routinely been integrated into services for children, youth and families. As a result, parents and caregivers who are struggling to understand what it means to have an LGBTQ or gender diverse child, how to nurture and support them, how to reconcile cultural and religious beliefs that may be at odds with diverse sexual orientation and gender identities are often unsure where to find accurate information that will help protect their children from harm, support positive development and keep their families together – and how to find accurate information that is culturally relevant for them.

Recently, there are a range of online sources of information about sexual orientation and gender identity. Now that more people realize that families

need information to care for their LGBTQ children, more information is being disseminated related to families. However, some of this information is incorrect and some of it is intentionally misleading. Because government agencies have not provided widespread access to accurate information for families with LGBTQ children across systems that serve children, youth and families, parents need to search for resources and school professionals can help them.

When parents, families and caregivers look for information about how to help their LGBTQ children and their families, they should seek resources that are:

- Known, recommended and respected by **mainstream** health, mental health and social service professional associations. Look for resource lists related to sexual orientation and gender identity and family support that are posted and disseminated by mainstream health and mental health professional associations, such as the American Psychological Association, that are carefully reviewed before they are disseminated.
- Based on rigorous research and programs that have been published in respected **mainstream** scientific and professional journals and publications.
- Developed in participation with LGBTQ young people and families like theirs that reflect their lives and experiences, including their culture and language.

We include some publicly-funded resources to help parents and families to find accurate information to support their LGBTQ children and to address their health and mental health needs.

Q&A

How does the Family Acceptance Project® help families to care for their LGBTQ children?

The Family Acceptance Project® is a research, intervention, education and policy initiative to prevent health and mental health risks and to promote well-being for lesbian, gay, bisexual, transgender and queer-identified (LGBTQ) children and youth, including suicide, homelessness, drug use and HIV — in the context of their families, cultures and faith communities.

Before FAP launched the first study on LGBTQ youth and families more than 20 years ago, the perception was that all families were rejecting and that parents and caregivers were unwilling and incapable of supporting their LGBTQ children. As a result, LGBTQ youth were served alone, like adults, or through peer support, and not in the context of their families. When family conflict erupted, LGBTQ youth were typically removed from their homes and placed in out-of-home settings which contributed to multiple health and social problems and constricted life chances.

As services for LGBTQ youth emerged through support groups and school clubs in the 1980s, services focused on youth rather than families. The FAP Director recognized the need to study LGBTQ youth and families and obtained funding from the Robert Wood Johnson Foundation and other major funders to establish the field of family support for LGBTQ young people. This included carrying out a series of studies with LGBTQ youth and families, and developing the first family support model to help diverse families learn to support their LGBTQ children that could be implemented across systems of care – including in schools, school wellness centers and school-based health centers,

FAP's Research is Participatory. This means that diverse LGBTQ youth, young adults and families participate in documenting their lives and experiences as part of FAP's research and family support work. From the beginning when the Family Acceptance Project® started this work,

diverse LGBTQ young people and families have provided guidance to help us understand their experiences and to help develop FAP's family support model and educational resources

FAP's Family Support Model is grounded in the family's cultural world, meets families where they are with ways of supporting families and their LGBTQ children that were developed with guidance from families and LGBTQ young people from a wide range of ethnic, racial, cultural, religious and socioeconomic backgrounds. This includes families that were very rejecting of their children's LGBTQ identity, who have made their children leave home and whose children have been placed in foster care and juvenile justice settings.

Because diverse families and LGBTQ young people have participated with FAP in doing this work, it resonates with families from diverse backgrounds. For example, the family rejecting and accepting behaviors that the FAP research team identified and measured to show how they contribute to their LGBTQ children's risk and well-being are commonly used in families from diverse background across the U.S. and in other countries. FAP helps parents and caregivers to decrease rejecting behaviors that increase their LGBTQ child's health and mental health risks and helps them engage in behaviors such as standing up for their child when others mistreat them because of their identity which increase connectedness and help reduce health risks.

Parents and caregivers have said that learning about family rejecting and accepting behaviors from FAP's research gives them a reason to change behaviors that increase their LGBTQ children's risk and to engage in supportive behaviors that decrease mental health risks and increase self-esteem and connectedness – even when they believe that being gay or transgender is wrong.

With guidance from diverse LGBTQ young people, family members and allies, FAP developed the first *Best Practice* resource for LGBTQ youth for suicide prevention in the Best Practices Registry for Suicide Prevention; award-winning family education videos that show how diverse families learn to support their LGBTQ children; and multilingual family education resources that include FAP's [Healthy Futures poster series](#) which show the powerful impact of common family rejecting and accepting behaviors identified and measured in FAP's research. These posters are available online for free in 4 sizes in 11 language and cultural versions, including a version for Indigenous families and communities. These resources help parents and caregivers learn how to support their LGBTQ children, to increase communication and to strengthen family relationships and decrease health risks.

Q&A

How do schools identify and address all students' health and developmental needs? How do school professionals work with parents and caregivers to help them to support their children's academic, health and developmental needs?

Schools fill several essential roles in helping to socialize and prepare children and youth for the future. These include:

- Creating a school environment that supports learning, wellness and growth
- Protecting students from harm
- Supporting students with different needs and identifying and addressing health, mental health and developmental needs to enable them to succeed academically and socially
 - » This includes being aware of changing behaviors that may signal emerging and unmet needs, such as isolation, withdrawal, prolonged sadness, excessive anger, unexplained absences and failing grades
- Preparing students to contribute to society which includes developing skills to get along with others

When educators and other school personnel observe students struggling or experiencing challenges academically, socially and emotionally – and this includes becoming aware of indicators of mental health concerns – they have a responsibility to bring this to the attention of appropriate school personnel and to engage / involve parents and caregivers.

Schools have procedures to address students' academic, health and support needs. This includes identifying these needs and addressing them through several levels of support (called *multi-tiered systems of support*). For example, for a student who has repeated absences, the classroom teacher would ask the student why they are not attending school. The teacher may also

refer the student to an administrator, school counselor or social worker to further assess their needs.

If the student's needs are a cause for concern, school personnel may involve the school's multi-disciplinary team to evaluate their needs and engage parents and families to support and address them.

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Q&A

How should school professionals engage and provide guidance and access to accurate information and support for parents and caregivers of LGBTQ students in the same ways that schools identify and help parents and caregivers to address the health and developmental needs of non-LGBTQ students?

School professionals have a responsibility to identify and address the needs of all students including those who identify as LGBTQ and who are gender diverse. This is especially important for LGBTQ students who may be invisible to school personnel because they have not shared their identity with others. Students have many reasons for not disclosing their identity to others, including fear of rejection, bullying, victimization and exclusion.

For these and other reasons, many LGBTQ students have not shared their identity with their parents and caregivers and fear doing so because they are unsure how their families will respond. As a result, many school professionals are unsure how to approach and engage parents of LGBTQ students so they are reluctant to address these issues with their families.

Schools are a primary source of support for LGBTQ students. However, there is a lack of training for school professionals on engaging and supporting parents with LGBTQ students and lack of services for parents of LGBTQ students to enable them to address health and development needs that impact the student's ability to learn and thrive.

For these reasons, we believe that **schools** should:

- Provide training on engaging and helping diverse families to increase support for their LGBTQ students
- Provide access to evidence-based family guidance resources to help parents and caregivers learn how to support their LGBTQ children

- Provide opportunities for parents of LGBTQ and gender diverse students to come together to share information and resources, provide mutual support and participate in family social events and activities.

Further, **school personnel** should:

- Be open to discuss the parent's concerns about their LGBTQ child's needs.
- Self-educate on the evolving needs of LGBTQ and gender diverse students and their families.
- Be more aware of the stressors on LGBTQ students that contribute to health and developmental needs and respond to address these needs at individual and institutional levels.

Understand that some LGBTQ students are at greater risk for serious health and mental health concerns and our actions as school professionals can make a profound difference to help decrease risk. This includes being more proactive to collaborate with parents and caregivers to support the student and help them identify appropriate services and external supports.

School professionals have a responsibility to identify and address the needs of all students including those who identify as LGBTQ and who are gender diverse.

Family Behaviors that Increase Your LGBTQ Child's Health & Well-Being

Research from the Family Acceptance Project® found more than 50 family accepting behaviors that help protect your lesbian, gay, bisexual, transgender and queer-identified (LGBTQ) child against health risks like depression, suicide and illegal drug use and help to increase your LGBTQ child's self-esteem, health and well-being. A little change makes a difference in decreasing your child's isolation and risk and giving them hope that their family will be there for them.

Family support saves lives!

BEHAVIORS THAT HELP...

Tell your LGBTQ / gender diverse child that you love them	Support your child's gender expression	Talk with your child or foster child about their LGBTQ identity and listen respectfully – even when you feel uncomfortable or think that being gay or transgender is wrong	Require other family members to treat your child with respect	Show affection when your child tells you or when you learn that your child is LGBTQ
Ask your child if – and how - you can help them tell other people about their LGBTQ identity	Welcome your child's LGBTQ friends to your home	Use your child's chosen name and the pronoun that matches their gender identity	Bring your child to LGBTQ groups and events	Get accurate information to educate yourself about your child's sexual orientation, gender identity and expression
Find a congregation that welcomes your LGBTQ / gender diverse child and family	Participate in family support groups and activities for families with LGBTQ and gender diverse children to get support for yourself and your family and guidance for supporting your LGBTQ child	Talk with your religious leaders to help your congregation become supportive of LGBTQ people	Tell your LGBTQ / gender diverse child that you're proud of them	Speak openly about your child's LGBTQ identity
Tell your LGBTQ / gender diverse child that you will be there for them – even if you don't fully understand	Connect your child with LGBTQ adult role models	Volunteer with organizations that support LGBTQ people	Stand up for your child when others mistreat them because of their LGBTQ identity or gender expression – at home, at school, in your congregation and in the community	Believe that your child can be a happy LGBTQ adult – and tell them they will have a good life

The more of these behaviors that parents and families do, the better your LGBTQ child's health & well-being



- Better health
- Higher self-esteem
- Stronger social support
- Better family relationships
- Less likely to be depressed
- 3 times less likely to attempt suicide
- 3 times less likely to think about suicide
- Less likely to have substance abuse problems

Q&A

What kinds of resources are available to help diverse parents, caregivers and school professionals to support LGBTQ children, youth and families?



In addition to our previous suggestions on how parents and caregivers should approach trying to find accurate information from mainstream sources about sexual orientation, gender identity and expression to support their LGBTQ children, we suggest the following resources. These resources can help diverse families understand the needs of their LGBTQ children, access culturally relevant services and help school professionals to increase family engagement and support:

[LGBTQ Youth & Family Resource Site](#) – National online resource for diverse LGBTQ youth and families to find information, services and evidence-based resources to help decrease mental health risks and increase support. Developed by the **[Family Acceptance Project](#)**[®] and the **[Innovations Institute](#)**, this site provides the broadest range of information, services and evidence-based resources to help parents, families, LGBTQ youth, providers and religious leaders to increase support for LGBTQ youth. This online site includes: crisis services and access to immediate online crisis intervention and suicide prevention support; a national searchable map of non-commercial LGBTQ community services, gender clinics, LGBTQ youth services, parent and family support services, including for racially and linguistically diverse families; multilingual evidence-based resources to decrease risk and increase family support; national resources, including for student and school support; and affirming culture-based and multi-denominational faith-based resources for LGBTQ young people and families.



Family Acceptance Project[®]
<https://familyproject.sfsu.edu>



LGBTQ Youth & Family Resources
<https://lgbtqfamilyacceptance.org>

[Center of Excellence on LGBTQ+ Behavioral Health Equity](#) - National online resource that provides education, training, best practices, technical assistance and access to resources on behavioral health issues to support the well-being of people who identify as LGBTQ, Two Spirit, intersex and who have gender diverse identities.



Center of Excellence on LGBTQ+ Behavioral Health Equity
<https://lgbtqequality.org>

[National Child Traumatic Stress Network LGBTQ Resources](#) - Resources related to LGBTQ youth and families; information on LGBTQ youth and trauma; guidelines on the care of LGBTQ young people who are at risk for and experiencing trauma and guidance on creating safe spaces and environments for LGBTQ youth.



National Child Traumatic Stress Network LGBTQ Resources
<https://www.nctsn.org/what-is-child-trauma/populations-at-risk/lgbtq-youth/nctsn-resources>

Q&A

What kinds of resources are available to help diverse parents, caregivers and school professionals to support LGBTQ children, youth and families?



SCHOOL PROFESSIONAL RESOURCES

Position Statements on Supporting LGBTQ Students & Families

[American Association of School Counselors](#)

Position Statement on The School Counselor and LGBTQ+ Youth

Excerpt: Directs school counselors to: Know the impact of family acceptance on student well-being and ability to thrive; support families whose children are coming out by helping them navigate these important developmental milestones in ways that protect LGBTQ+ students from harm and helps families stay together; identify LGBTQ+ community resources for students and families and assess the quality and inclusiveness of these resources before referring to these resources; advocate for the rights of families to access and participate in their student's education and school activities without discrimination.

[National Association of School Psychologists](#)

Position Statement on Safe and Supportive Schools for LGBTQ+ Youth

Excerpt: School psychologists are ethically obligated to ensure all youth with diverse sexual orientations, gender identities, and/or gender expressions, are able to develop and express their personal identities in a school climate that is safe, accepting, and respectful of all persons and free from discrimination, harassment, violence, and abuse. They should collaborate with families. Provide families with accurate information about sexual orientation, gender identity, and gender expression. Support families by helping them learn how to talk with their children about these topics, by encouraging them to support their child's identity, and by assisting them in developing the skills needed to advocate for their child.

[National Association of School Nurses](#)

Position Statement on LGBTQ+ Students

Excerpt: School nurses work with school staff, students, and families, when appropriate, to create a clear policy and plan for any students experiencing suicidal ideation with a focus on at-risk student populations, including LGBTQ students.

[School Social Work Association of America](#)

Resolution Statement on Gay, Lesbian, Transgender, Bisexual, and Questioning Youth

Excerpt: LGBTQ+ youth are some of our most vulnerable individuals who are at increased risk for health and mental health concerns, bullying, and suicide. One of the best ways to help youth overcome these challenges is to ensure they are welcomed and supported by their families, schools, and communities.

Funded by the Oregon Department of Education, LGBTQ2SIA+ Student Success Grant Program

