

PARTNERING WITH PARENTS OF LGBT YOUTH

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STAR-CENTER CONFERENCE

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OUTLINE

- I. MINORITY STRESS AND ADVERSE HEALTH OUTCOMES
- II. THE IMPACT OF PARENTAL REJECTION AND ACCEPTANCE
- III. NEW APPROACH OF WORKING WITH PARENTS OF LGBT YOUTH
- IV. TURNING PARENTS FROM ADVERSARY TO ADVOCATE
- V. CASE STUDIES



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MINORITY STRESS

IF YOU'RE CHILD WAS DOING SOMETHING THAT...

- PUTS THEM AT RISK FOR GETTING AN STD
- MAKES THEM SKIP CLASS
- GETS THEM EXPELLED
- LEAD TO CHRONIC UNEMPLOYMENT AND HOMELESSNESS
- ASSOCIATED WITH MENTAL HEALTH PROBLEMS
- INCREASES THE RISK FOR SUICIDE

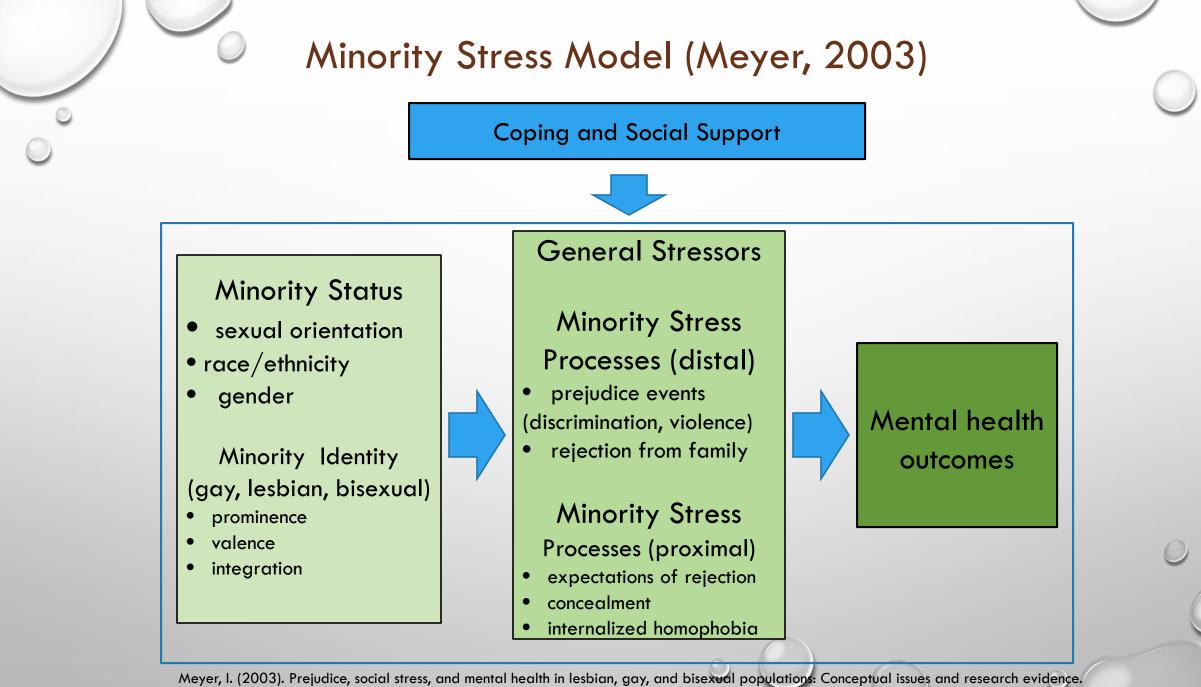
WHAT WOULD YOU DO?

ALCOHOL ABUSE

- RAISES THE RISK FOR GETTING A STD (HUTTON ET AL, 2008)
- TRUANCY (HEMPHILL ET AL., 2014)
- EXPELLED FROM SCHOOL (HEMPHILL ET AL., 2014)
- LEADS TO CHRONIC UNEMPLOYMENT AND HOMELESSNESS (JØRGENSEN ET AL., 2017)
- ASSOCIATED WITH MENTAL HEALTH PROBLEMS (GRANT & HARFORD, 1995)
- INCREASES THE RISK FOR SUICIDE (POMPILI ET AL., 2010)

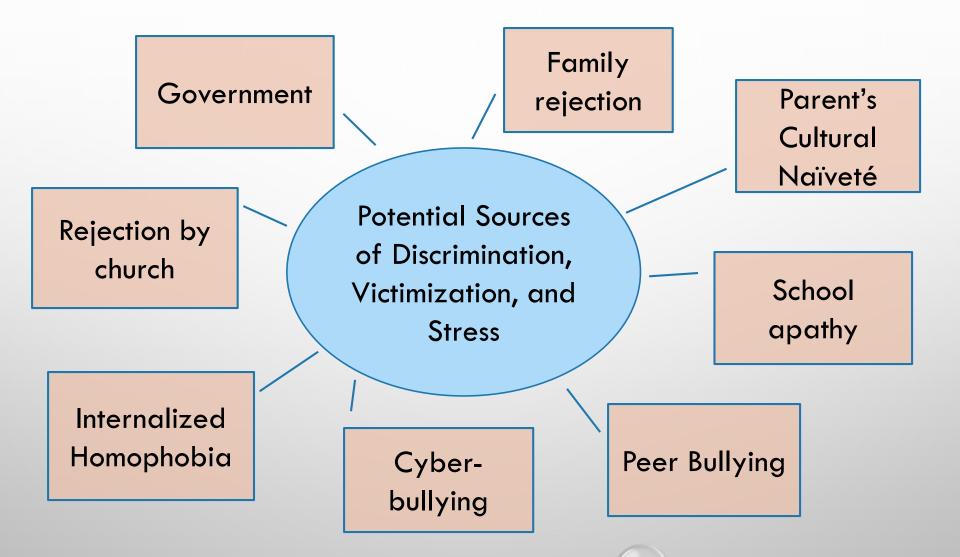
SEXUAL AND GENDER MINORITY YOUTH...

- AT HIGHER RISK FOR GETTING A STD (KANN & OLSEN, 2011)
- SKIP CLASS DUE TO VIOLENCE AND VICTIMIZATION (FRIEDMAN ET AL., 2011)
- GET EXPELLED DUE TO TEACHER BIAS (GRANT ET AL., 2011)
- BE CHRONICALLY UNEMPLOYED AND HOMELESS (GRANT ET AL., 2011)
- MAY HAVE MENTAL HEALTH PROBLEMS (MARSHAL ET AL., 2012)
- ARE AT HIGHER RISK FOR SUICIDE (MARSHAL ET AL., 2011)



Psychological Bulletin 129(5) 674-697.

SOURCES OF STRESS AMONG SMY



Meyer, I. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin* 129(5) 674-697.



THE IMPACT FAMILY ACCEPTANCE & REJECTION

WHY IS FAMILY ACCEPTANCE SO IMPORTANT

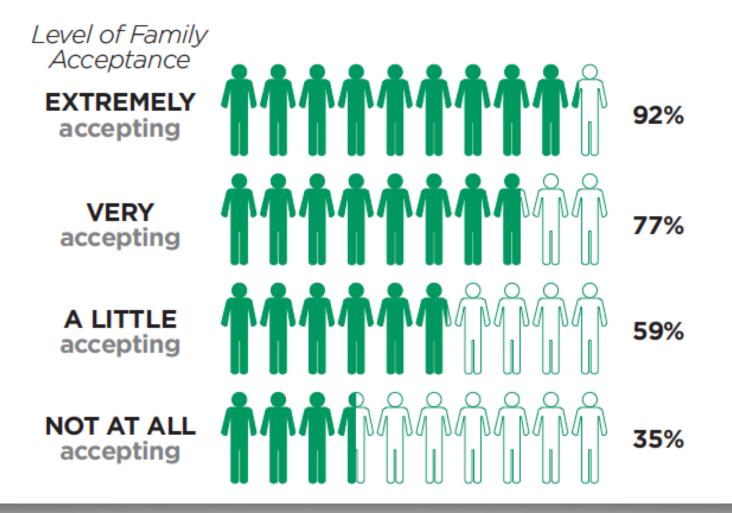
- REALIZATION OF SEXUAL ORIENTATION CAN OCCUR AT 10 YEARS-OLD, EVEN YOUNGER FOR GENDER IDENTITY (D'AUGELLI ET AL., 1998)
- IDENTIFICATION OCCURS FOUR YEARS LATER (D'AUGELLI ET AL., 1998)
- FAMILIES MISUNDERSTAND WHAT SEXUAL ORIENTATION IS ABOUT
- MISINFORMATION INFLUENCE IDEA THAT SEXUAL ORIENTATION/GENDER IDENTITY IS SOMETHING TO BE "FIXED" AND NOT SUPPORTED

LGBT YOUTH WITH REJECTING FAMILIES ARE . . .

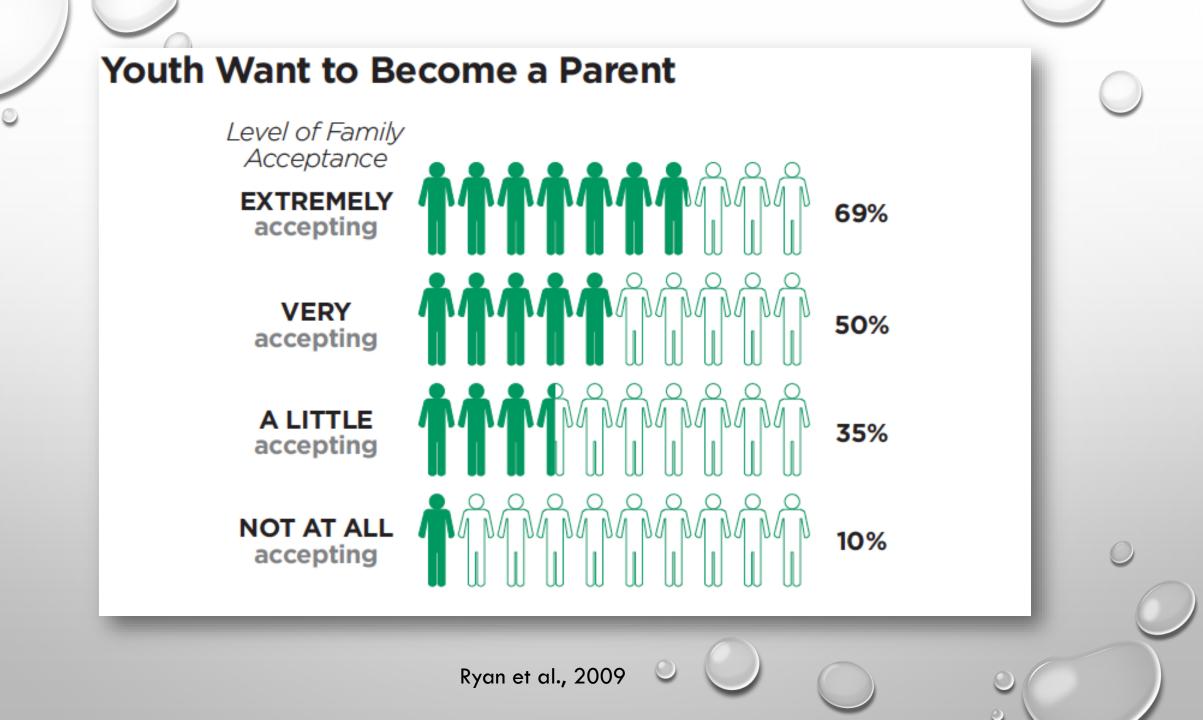
- EIGHT TIMES AS LIKELY TO BE SUICIDAL
- ALMOST 4 TIMES AS LIKELY TO USE ILLEGAL DRUGS
- ALMOST 4 TIMES AS LIKELY TO ENGAGE IN RISKY SEXUAL BEHAVIORS

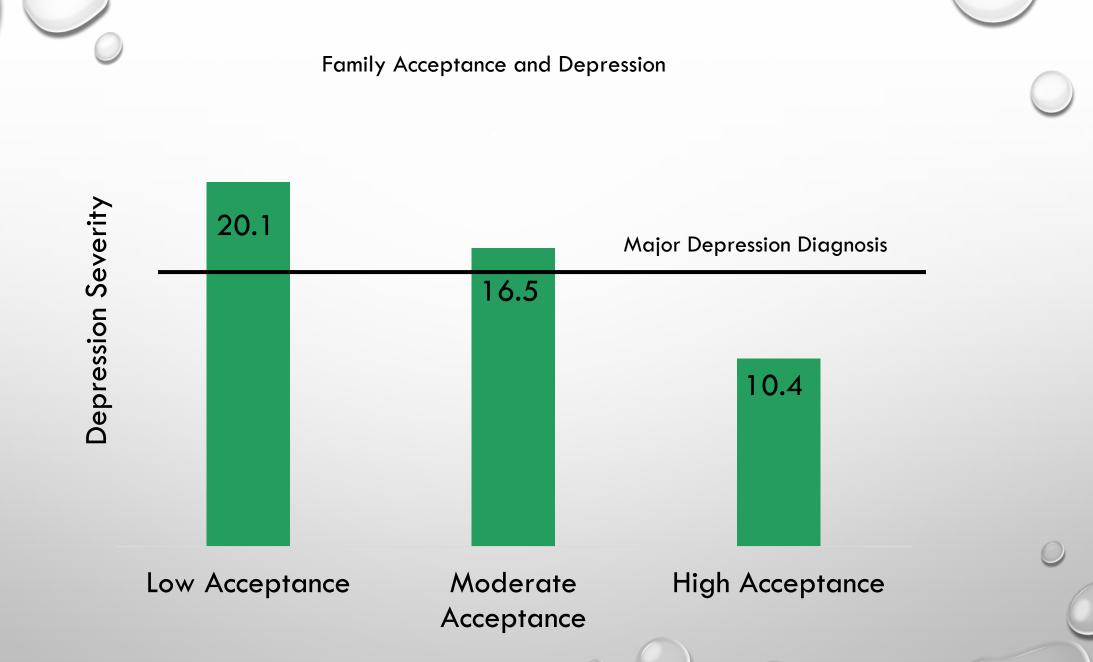
Ryan et al., 2009





Ryan et al., 2009



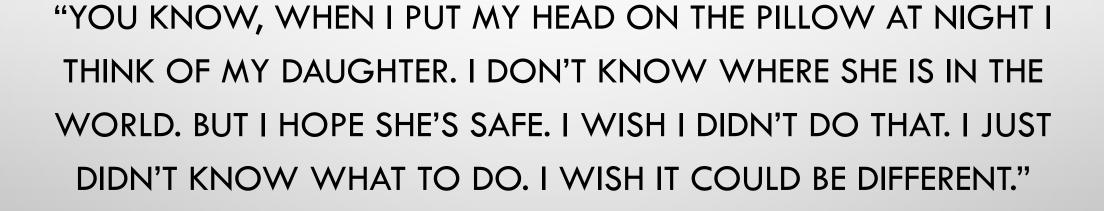


Ryan et al., 2009

TRUE OR FALSE: PARENTS MAY EXPERIENCE REGRET KICKING THEIR CHILD OUT OF THEIR HOME BECAUSE OF THE CHILD'S SEXUAL ORIENTATION OR GENDER IDENTITY

TRUE!

- RYAN ET AL. (2010) CONDUCTED AN IN-DEPTH QUALITATIVE INTERVIEW WITH 54 WHITE AND LATINO LGBT ADOLESCENTS, AGES 13 – 18 YEARS-OLD
- SAMPLE WAS ETHNICALLY AND RELIGIOUSLY DIVERSE AND CAME FROM DIFFERENT BACKGROUNDS (RURAL, URBAN, IMMIGRANT, ETC)
- KEY FINDINGS: REJECTING FAMILIES TELL STORIES OF ACTING OUT OF CARE/CONCERN TO HELP THEIR CHILDREN
- REJECTING FAMILIES WHO KICKED THEIR CHILD OUT OF THEIR HOME REPORT REGRET AFTER DOING SO



PARADIGM SHIFT

- HISTORICALLY, INTERVENTIONS FOR LGBT YOUTH FOCUSED ON SCHOOLS AND PROTECTING LGBT YOUTH FROM HARM
- PARENTS/FAMILIES WERE ASSUMED TO BE ADVERSARIES
- RESEARCH SHOWS THAT PARENTS MEAN WELL, BUT THEY HAVE THE WRONG INFORMATION
- PROVIDERS' TASK: TO EDUCATE FAMILIES IN WHAT IS HELPFUL AND PROTECTIVE FOR LGBT YOUTH

TURNING PARENTS FROM ADVERSARY TO ADVOCATE

WHAT CAN PROVIDERS DO?

- LISTEN TO THE PARENTS'/FAMILY'S STORY
 - KEEP IN MIND THAT THEY WANT TO PROTECT THE CHILD
 - CONCERNED ABOUT THE CHILD'S FUTURE
 - CONCERNED ABOUT DEALING WITH OTHER FAMILY MEMBERS
 - RECKONING OVER CONFLICTING BELIEFS



• <u>HTTPS://VIDEO.UTAH.EDU/MEDIA/T/0 M8TWA0TU</u>

WHAT ARE SOME PARENTAL REACTIONS TO THEIR CHILD COMING OUT TO THEM?

- SURPRISE AND SHOCK
- FEAR OF DISCRIMINATION
- LACK OF UNDERSTANDING
- RELIEF FOR SOME / NOT SURPRISED

- DISAPPOINTMENT
- SELF-BLAME
- DENIAL
- BEREAVEMENT
- CONFUSION



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PARENTAL CONCERNS

- RELIGIOUS TEACHINGS
- BIASES AND STEREOTYPES
- IS IT A CHOICE?
- IS IT MY FAULT?
- HOW DO RECONCILE MY RELIGIOUS BELIEFS?
- IS SEXUAL ORIENTATION/GENDER IDENTITY AN ILLNESS?
- CAN IT BE "CURED?"

WHAT CAN PROVIDERS DO?

- L.E.A.D. WITH LOVE (HUEBNER ET AL., 2013)
- L: LEAVE YOUR AFFECTION SHOW
- E: EXPRESS PAIN AWAY FROM YOUR CHILD
- A: AVOID REJECTING BEHAVIORS
- D: DO GOOD BEFORE FEEL GOOD



- KIDS VALUE ATTACHMENT AND WANT APPROVAL (THAT'S WHY THEY CAME OUT TO PARENTS IN THE FIRST PLACE)
- AFFIRM LOVE ASAP
- SIGNS
 - VERBAL
 - PHYSICAL
 - PRAISE
 - DOING ACTIVITIES TOGETHER



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<u>EXPRESS</u> PAIN AWAY FROM THE CHILD

- SHARING PAIN WITH CHILD CAN BE HARMFUL
- FRIENDS, THERAPIST, JOURNALING, OTHER ACTIVITIES

AVOID REJECTING BEHAVIORS

- HIT, SLAP, PHYSICALLY HURTING CHILD BECAUSE OF LGBT IDENTITY
- VERBAL HARASSMENT
- EXCLUDING CHILD FROM FAMILY EVENTS/ACTIVITIES
- BLOCKING CHILD FROM LGBT FRIENDS
- BLAMING THE CHILD FOR BEING BULLIED
- PRESSURING CHILD TO BE MORE MASCULINE/FEMININE
- TELLING CHILD THAT GOD WILL PUNISH THEM
- TELLING CHILD THAT YOU ARE ASHAMED OF THE CHILD

From: Supportive Families, Healthy Children: Helping Families with Lesbian, Gay, Bisexual & Transgender Children by Caitlin Ryan, 2009, Family Acceptance Project, San Francisco State University. Copyright 2009 by Caitlin Ryan.

<u>AVOID</u> (SUBTLE) REJECTING BEHAVIORS

- TELLING THEM HOW TO DRESS
- KEEPING IT A SECRET FROM OTHERS
- TELL THEM THAT IT'S A PHASE

SUPPORTIVE BEHAVIORS

- TALKING TO YOUR CHILD RE: THEIR LGBT IDENTITY
- PROVIDE SUPPORT DESPITE FEELING UNCOMFORTABLE
- REQUIRE OTHER FAMILY MEMBERS TO BE RESPECTFUL
- CONNECT CHILD WITH LGBT ROLE MODELS
- WORK WITH YOUR COMMUNITY TO BE SUPPORTIVE OF LGBT YOUTH
- WELCOME CHILD'S LGBT FRIENDS/PARTNER TO YOUR HOME AND FAMILY EVENTS/ACTIVITIES
- SUPPORT YOUR CHILD'S GENDER EXPRESSION
- BELIEVE THAT THE LGBT CHILD CAN HAVE A HAPPY FUTURE

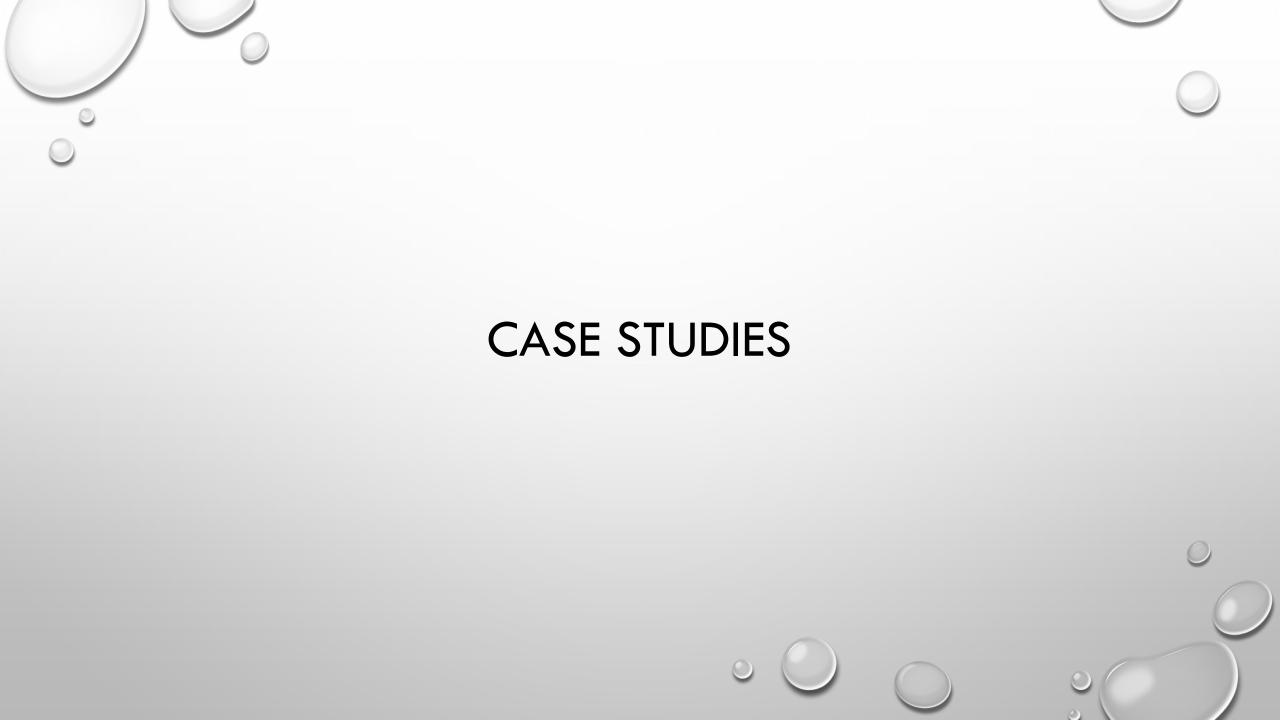
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DO GOOD BEFORE YOU FEEL GOOD

- ACCEPTANCE V. SUPPORT
- UNDERSTANDING IS NOT NECESSARILY REQUIRED



ACTIVITY DIRECTIONS

- READ EACH CASE
- IDENTIFY THE FOLLOWING
 - PARENTAL CONCERNS
 - BEHAVIORS INDICATING AFFECTION
 - BEHAVIORS INDICATING PAIN PARENT IS SHOWING TO THE CHILD
 - BEHAVIORS THAT INDICATE REJECTION
 - RECOMMENDATIONS ON WHAT TO DO NEXT

CASE STUDY 1

TYLER IS A 15 YEAR-OLD TRANSGENDER MALE CURRENTLY TAKING TESTOSTERONE FOR THE LAST 5 MONTHS. HIS MOTHER BRINGS HIM IN TODAY BECAUSE SHE IS CONCERNED OVER HIS BEHAVIOR. HE HAS BEEN ADMITTED TO THE INPATIENT PSYCHIATRIC WARD TWICE BECAUSE HE HAD EXPRESSED SUICIDAL IDEATION: IN BOTH EPISODES, HE WAS INVOLVED IN A FIGHT WITH SOMEONE WHO WAS BULLYING HIS GIRLFRIEND; HE WAS NOT ON TESTOSTERONE DURING THE FIRST EPISODE. MOTHER HAS BEEN CONSISTENT WITH BRINGING HIM TO HIS FOLLOW-UP APPOINTMENTS. HIS MOTHER IS WONDERING IF TAKING HIM OFF HIS TESTOSTERONE WOULD HELP HIM "BEHAVE." DURING YOUR PRIVATE CONVERSATION WITH TYLER, HE TELLS YOU THAT MOM DOESN'T REALLY TALK TO HIM ABOUT HIS GENDER IDENTITY AND HASN'T BEEN WATCHING MOVIES WITH HIM LATELY, WHICH THEY OFTEN DID PRIOR TO HIM COMING OUT. SHE ALSO TELLS HIM THAT HE WOULD NOT BE INVOLVED IN THESE FIGHTS IF HE WEREN'T TELLING EVERYONE THAT HE IS TRANSGENDER

CASE STUDY 2

AUBREY IS A 14 YEAR-OLD TRANSGENDER FEMALE WHO IS IN YOUR CLINIC FOR AN EVALUATION FOR PUBERTAL BLOCKERS. WHILE TAKING HER MEDICAL HISTORY, THE MOTHER FREQUENTLY INTERRUPTS HER. THIS HAPPENS SO FREQUENTLY, THAT THEY START TO ARGUE IN FRONT OF YOU, WITH THE MOTHER STATING THAT "SHE (AUBREY) DOESN'T CARE WHAT I THINK BECAUSE ALL YOU CARE ABOUT IS BECOMING A WOMAN," WHILE AUBREY STATES THAT HER MOTHER "DOESN'T REALLY SUPPORT HER." YOU DECIDE TO SPEAK TO THEM SEPARATELY. WHILE SPEAKING TO THE MOTHER, SHE EXPRESSES CONCERN THAT AUBREY WILL BECOME AN "UGLY WOMAN," AND WILL EXPERIENCE HARDSHIP BECAUSE OF THAT. SHE SAYS THAT AUBREY REALLY DID A LOT OF RESEARCH ON PUBERTAL BLOCKERS AND KNOWS IT "INSIDE AND OUT." SHE ALSO ADMITS TO SHOUTING AT AUBREY EVERY TIME SHE FINDS AUBREY WEARING HER CLOTHES. AUBREY'S MOTHER RECOGNIZES THAT SHE IS STRUGGLING WITH AUBREY'S GENDER IDENTITY AND IS AT A LOSS OF WHAT TO DO WITH IT.

CASE STUDY 3

DANA IS A 15 YEAR OLD TRANSGENDER FEMALE COMING TO SEE YOU FOR AN EVALUATION FOR GENDER DYSPHORIA. DURING YOUR FIRST VISIT, THE PARENTS KEEP ASKING HER IF "SHE'S SURE" AND "HOW CAN YOU KNOW SINCE YOU'RE SO YOUNG?" WHEN YOU SPEAK WITH THE PARENTS ALONE, THEY'RE AFRAID THAT SHE WILL CHANGE HER MIND WHEN SHE GROWS OLDER, ALTHOUGH THEY NOTE THAT SHE IS A "STRAIGHT A" STUDENT. THEY ALSO EXPRESS CONCERNS WITH THE SIDE EFFECTS OF THE MEDICATIONS. THEY ALSO TELL YOU THAT THIS WOULD BE EASIER IF DANA "WAS GAY," BECAUSE THEY HAVE MANY GAY FRIENDS. THE MOTHER STARTS TO CRY BECAUSE SHE IS DISAPPOINTED THAT SHE WON'T HAVE ANY GRANDCHILDREN SINCE DANA IS THEIR ONLY CHILD.

CASE STUDY 4

JAKE IS A 17 YO TRANSGENDER MALE COMING TO YOUR CLINIC FOR COUNSELING ON CROSS-SEX HORMONES. AS YOU TAKE THE MEDICAL HISTORY, JAKE'S MOTHER KEEPS USING "SHE/HER" PRONOUNS WHEN REFERRING TO JAKE AND OCCASIONALLY USES JAKE'S INSURANCE NAME "JEANINE," EVEN THOUGH SHE IS HOLDING JAKE'S HAND DURING THE INTERVIEW. WHEN JAKE TRIES TO CORRECT HER, THE MOTHER SAYS "GIVE ME A BREAK, YOU HAVE BEEN A GIRL TO ME ALL MY LIFE, SO THIS IS NEW TO ME!" SHE TELLS YOU THAT SINCE JAKE'S 18th Birthday IS IN 4 MONTHS, HE SHOULD WAIT UNTIL THEN TO START TESTOSTERONE. WHEN YOU SPEAK WITH THE MOTHER PRIVATELY, SHE SAYS THAT SHE IS REALLY TRYING HARD TO USE THE RIGHT PRONOUNS, BUT IS NOT USED TO IT YET. SHE THINKS THAT HE SHOULD FINISH SCHOOL FIRST BEFORE MAKING A "LIFE CHANGING" DECISION.





- FAMILY ACCEPTANCE PROJECT: <u>HTTPS://FAMILYPROJECT.SFSU.EDU</u>
- PFLAG PITTSBURGH: <u>HTTP://WWW.PFLAGPGH.ORG</u>
- THE PERSAD CENTER: <u>HTTPS://PERSADCENTER.ORG</u>
- LEADING WITH LOVE FILM: <u>HTTP://WWW.LEADWITHLOVEFILM.COM</u>
- GENDER AND SEXUAL DEVELOPMENT PROGRAM AT CHP: <u>HTTP://WWW.CHP.EDU/OUR-</u> <u>SERVICES/AYA-MEDICINE/GENDER-DEVELOPMENT</u>

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