



Families Matter

New Research Calls for a Revolution in Public Policy for LGBT Children and Youth

Shannon Minter and Jeff Krehely February 4, 2011

Dr. Caitlin Ryan and her team at the [Family Acceptance Project](#) at San Francisco State University have generated a wealth of new data over the past decade on the impact of family acceptance and rejection on lesbian, gay, bisexual, and transgender, or LGBT, children and youth. The findings of this research are dramatic, clear, and, above all, surprisingly hopeful. They have profound implications for virtually every public policy issue affecting LGBT youth and their families, and call for a revolution in the way public and private agencies serve this population.

This issue brief provides background information on the Family Acceptance Project and outlines how the project's findings and a new family-based approach can help radically improve the way a wide range of social and public services respond to and serve LGBT youth. In particular, we discuss the project's implications for the child welfare system, family courts, schools, and the juvenile justice system.

Family Acceptance Project overview

The Family Acceptance Project is a community research, intervention, education, and policy initiative that works to decrease major health and related risks for LGBT youth such as suicide, substance abuse, HIV, and homelessness. This is all done within the context of their families. Project staff use a research-based, culturally grounded approach to help ethnically, socially, and religiously diverse families decrease rejection and increase support for their LGBT children.

There is an increasing amount of information about the risks and challenges facing LGB youth (although very little information about transgender youth), but we know little about their strengths and resiliency, including the strengths of families in supporting their children's health and well-being. There have been no previous efforts of this type to understand how family reactions affect their LGBT children's risk and resiliency, even though the family is the primary support for children and youth, and family involvement helps reduce ado-

lescent risk for a wide range of negative outcomes. Little information was available prior to the project's research to show how families respond to an adolescent's coming out and how family and caregiver reactions affect adolescent health, mental health, and development for LGBT young people.

Attention to family reactions is critical since youth are increasingly coming out at younger ages, which significantly increases risk for victimization and abuse in family, school, and community settings. But this change also provides opportunities for helping to support and strengthen families to provide a nurturing environment for their LGBT children. Family rejection and youth victimization have long-term consequences for their health and development, and affect families as well as the targeted individuals. These consequences include higher risks of dropping out of high school, abusing drugs and alcohol, or contemplating or attempting suicide. Early intervention can help families and caregivers build on strengths and use evidence-based materials to understand the impact of acceptance and rejection on their child's well-being.

Dr. Ryan's research has identified more than 100 specific accepting and rejecting behaviors that families and caregivers use to express acceptance or rejection of their LGBT children. Dr. Ryan and her team have linked each of these behaviors—such as trying to change an adolescent's gender expression or advocating for youth when they are discriminated against by others—with physical and mental health concerns in young adulthood, such as depression, illegal drug use, suicidality, access to social support, and risk for HIV. These family behaviors form the basis of the project's new behavioral approach that empowers ethnically and religiously diverse families to decrease rejecting behaviors that put their LGBT children at risk and to increase supportive behaviors that protect against risk and promote their well-being.

The project has four key components. They are:

1. Studying parents', foster parents', families', and caregivers' reactions and adjustment to an adolescent's coming out and LGBT identity; and studying the experiences of LGBT youth and young adults and how specific family accepting and rejecting reactions affect their physical and mental health and well-being.
2. Developing training and assessment materials and family intervention strategies for health, mental health, and school-based providers; child welfare, juvenile justice, and family service workers; and community service providers on working with LGBT youth and families.
3. Creating research-based resources to strengthen diverse families to support LGBT children and adolescents.
4. Developing a new evidence-based family model of wellness, prevention, and care to improve health and mental health outcomes for LGBT adolescents and to promote their well-being

The project is being carried out in collaboration with key community groups, providers, and organizations that work with youth in schools, health care settings, and families.

LGBT youth in the child welfare system

Perhaps more so than in any other area, the project's research calls for dramatic changes in how child welfare workers respond to LGBT and gender-nonconforming children and youth whose families abuse and neglect them. The high rates at which LGBT children and youth experience family rejection are well-known and are increasingly documented—as are related high rates of homelessness, attempted suicide, and other associated health risks. Both LGBT groups and child welfare agencies (public and private) have reacted to this reality by creating alternative structures of support for these youth.

The near-universal underlying assumption has been that family hostility and rejection are intractable. In essence, we have treated families as the enemy of LGBT children and youth, and have assumed this will continue to be true. As a result, there are very few programs or resources focused on helping diverse families accept, support, and better understand their LGBT children and youth. And few LGBT youth organizations or services provide opportunities for youth and their families to socialize or interact. Our failure to see families as potential allies has a particularly negative impact in communities of color, where families play an especially important role.

The project's research calls for a dramatic reversal of this paradigm. For example, intervention work with diverse families indicates that even families who initially reject their children will modify their behavior when presented with objective information about the devastating effect their actions will have on their children's lives. These findings pave the way for new policies that have the potential to change the lives of future generations of LGBT youth by keeping them in their families, communities, and schools.

To put Dr. Ryan and her team's research and new family approach into practice will require a major effort to re-educate child welfare agencies and to reorient training of child welfare and early childhood professionals. Advocates and service providers need to know how to recognize and help parents decrease damaging rejecting behaviors, and how to effectively intervene with families to prevent irreparable harm to LGBT youth. They also need to learn how to help maintain LGBT children and youth in their homes by implementing family intervention strategies, rather than automatically removing these children and youth from the home when family conflict arises.

Supporting the development of this new behavior-based family approach to care should be a high priority for child welfare agencies and the public and private entities that fund them. It will require creating new programs and resources for families, including those that are culturally competent and meet the needs of specific racial and ethnic communities.

Suicide

Rates of attempted suicide and other suicidal behavior have been consistently high among a proportion of LGB youth in community-based studies and, more recently, population-based research. School-based studies have reported distressingly higher rates of attempted suicide among LGB adolescents, compared with their heterosexual peers. Recent media reports have also reported on children and adolescents who were assumed to be gay and who experienced very high levels of peer victimization and took their own lives. However, even though suicide professionals and many providers have been aware of the high rates of attempted suicide among LGB adolescents for years, suicide prevention strategies to decrease suicidal behavior and risk among LGBT youth are extremely limited and lack outcome data to show their effectiveness in reducing suicidal behavior and attempts.

At the same time, consensus has grown that social stigma, prejudice, and discrimination play an important role in increased suicide attempts among LGB populations. And systems-level problems require a systems-level intervention. Dr. Ryan's culturally grounded behavioral approach operates at the family-systems level to help families, foster families, and caregivers decrease rejecting behaviors that put LGBT youth at risk and to increase supportive behaviors that protect against risk. This approach promotes a supportive family environment to buffer LGBT youth from social prejudice and stigma and to teach parents and caregivers how to advocate for their LGBT children in families, schools, and communities.

This research shows the dramatic impact of specific family rejecting behaviors (such as preventing an adolescent from having an LGBT friend, preventing them from participating in LGBT activities, or excluding them from family events and activities because of their identity) that are associated with a nine-times-greater likelihood of attempted suicide. Moreover, family accepting behaviors (such as supporting a child's gender expression and welcoming their child's LGBT friends) help protect against suicidal behavior and other risks, and promote good self-esteem and overall health in young adulthood.

One of the most important aspects of the project's family intervention approach is that it can impact multiple negative outcomes—including suicide—with one kind of intervention at the family-systems level.

Addressing harassment and bullying of LGBT youth in schools

The national media and national LGBT organizations have focused an enormous amount of attention on the harassment and bullying of LGBT youth in schools, especially in the wake of recent news stories about young gay men taking their own lives who had suffered harassment (related to their known or perceived sexual orientation) at school. While the increased focus on this issue is a positive development, the project's work provides a context that is essential if we are to truly understand and address this issue.

It is impossible to understand school-based harassment apart from the critically important factor of whether an LGBT child has family support. Dr. Ryan and her team's research shows that children who are able to turn to their families for support in dealing with harassment at school are at less risk of suicide, depression, and other negative outcomes.

This research is clear that family support and intervention are critical—and yet existing approaches to dealing with school-based harassment generally omit families entirely.

This is a serious omission and one that must be addressed immediately if we are to make genuine progress on this issue. For example, the project's family approach teaches parents and other caregivers about the importance of advocating for their children in schools and shows practical ways to do so. We also need to design and implement school-driven interventions that know how to work with the families of LGBT youth.

The project also has a related body of research—the first of its kind—about the prevalence and impact of the harassment of gender-nonconforming LGBT youth in schools. The project's research found that gender-nonconforming youth are at high risk of being targeted for harassment and bullying and that the negative impact of such harassment is lasting. Gender-nonconforming youth who are targeted in school continue to suffer significant negative effects into adulthood. This research has significant implications for school-based policies. It shows in particular the urgency of including gender identity and expression in nondiscrimination policies. It also allows us to broaden the conversation beyond moral and political frames, and show that adopting and implementing effective nondiscrimination policies is essential to protect the health and well-being of all students.

LGBT youth in the juvenile justice system

Research has shown that LGBT youth are more likely to end up in the juvenile justice system and that, once there, they are likely to experience serious mistreatment by other youth and by staff. Dr. Ryan and her team's research has direct implications for every aspect of this issue. At the front end, it is critical that district attorneys, judges, and public defenders understand the negative impact of family rejection on LGBT youth. Dr. Ryan's research has shown that not only does family rejection drive many LGBT youth from their homes but it also increases negative coping behaviors including illegal drug use and other unlawful behavior. But, perhaps more importantly, her research indicates that even modest changes in family rejecting behaviors can decrease health risks even if the family is not moved to full acceptance.

Understanding this reality will enable district attorneys, judges, and public defenders to address the root cause of the factors and behaviors that cause LGBT youth to end up in the juvenile justice system. Juvenile justice officials can draw on the project's empirical evidence to recommend interventions that keep LGBT youth in their families instead of pushing for incarceration.

The project's research also provides a scientific basis for why juvenile justice facilities must adopt policies to ensure LGBT youth are supported and treated with respect. Thanks to decades of advocacy, LGBT and mainstream juvenile justice organizations largely agree on what constitute the best policies and practices in this area. And thanks to the project's work, we can now show data supports these policies since LGBT youth who experience fewer family rejecting behaviors report better physical and mental health as young adults. Moreover, by engaging in specific supportive behaviors measured by Dr. Ryan's research that help reduce risk and promote the positive development of LGBT youth in custodial care, the state can benefit from substantially reduced costs required to care for a range of serious but preventable health problems in adulthood.

This fact provides a powerful tool for advocates working to protect these youth through litigation, legislation, and general policy advocacy. A federal court already relied on the project's research in a class-action lawsuit in Hawaii that successfully challenged the mistreatment of LGBT youth in Hawaii's juvenile justice system. Advocates have also used Ryan's work to support legislation protecting LGBT youth in the juvenile justice system in California.

Recommendations and conclusion

The Family Acceptance Project's approach to improving the lives of LGBT youth and their families is data driven and is informed by the experiences of ethnically, economically, and culturally diverse LGBT young people and their families, so we believe it is a hugely important tool for anyone who cares about improving the lives and life chances of our nation's youth. As we discuss above, the project has important implications for a wide range of policies and programs that support and serve LGBT youth. Because of those implications, we urge policymakers to learn more about the project and think of ways that its approach, materials, and findings can be incorporated into existing programs, services, and systems of care.

Further, we believe there is a very compelling need to take the project to scale and greatly expand the number of families that have access to the kind of support Dr. Ryan and her colleagues have found to be so important to the well-being of LGBT youth. To date, Dr. Ryan and her team have designed, built, and implemented the project on a very limited budget. A modest investment of federal funds could have a disproportionately large impact on reducing some of our nation's most expensive and seemingly intractable problems, such as homelessness, poor mental health, suicide, and the spread of HIV. Specifically, we recommend that Congress appropriate \$3 million over three years to support the project and to help it expand its reach and impact.

Families have been left out of the care giving and support equation for LGBT children and youth for far too long. The Family Acceptance Project's work and research show why this is a costly mistake—in both human and financial terms.