

## Chapter 39

# Providing Primary Prevention and School Mental Health Services to LGBTQ+ Children and Youth: A Resiliency-Based Approach

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### **ABSTRACT**

*This chapter provides an overview of the difficulties facing LGBTQ+ youth in schools and their barriers to healthy psychosocial development. The risk and resiliency model is applied to these challenges, and specific risk factors and resiliency factors are explored. The focus is on means to foster healthy growth and development in sexual minority students through developing school-based programs and practices that have been proven to increase resiliency. The chapter provides specific strategies for school-based mental health professionals to use to increase resiliency in sexual minority youth through the application of school-wide policies and practices. Strategies for making such systemic changes and garnering support are also presented.*

### **INTRODUCTION**

School-based mental health professionals such as school counselors, school psychologists and social workers use their skills on a daily basis to promote healthy overall development for all students. In order to prevent the development or worsening of emotional, behavioral or academic problems, prevention and early intervention services are vital tools to accomplish this goal. Application of the risk and resiliency model can identify strategies to address areas of concern and help students to succeed despite adversity. This chapter applies this model to the experience of LGBTQ+ youth in schools and suggests

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how school mental health professionals can make schools safer and more nurturing environments for sexual minority youth.

## **BACKGROUND**

Public schools have often struggled in their attempts to meet the needs of diverse groups of learners. Issues of racial and economic segregation and means of providing appropriate services to meet the needs of students with disabilities created controversy and enormous challenges. Schools' efforts to meet the needs of sexual minority youth have followed a similar path and the difficult journey continues. The National Education Association's (NEA) status report on GLBT issues in education notes that, "Hostility and apprehension toward homosexuality and gender nonconformity—reinforced over many decades by law, medicine, religion, and other cultural and societal institutions and conventions—continue to plague GLBT youth and adults in schools in every region of the nation, even as signs of greater inclusion and acceptance appear in some areas" (Kim, Sheridan, & Holcomb, 2008, p. vii).

Healthy social and emotional development in LGBTQ+ children and youth is a relatively new concept. Only in 1973 did the American Psychiatric Association (APA) remove homosexuality as diagnostic category of mental disorder (Baughey-Gill, 2011). Gender identity disorder was not removed until 2012, although gender dysphoria remains a controversial and related diagnosis. These identities were defined as manifestations of psychological disorders until relatively recently and public opinion and understanding of sexual minority individuals is still evolving. As society's primary public institution responsible for teaching social norms and guiding the development of children and youth, schools' understanding and skills in meeting the needs of LGBTQ+ individuals continue to evolve.

School mental health professionals are in a unique position to provide both individual and systemic support for sexual minority students. The role of school support personnel (counselors, social workers, and school psychologists) in meeting the developmental and mental health needs of LGBTQ+ children and youth (setting the tone, needs assessment, developmental guidance activities, using the positive behavioral interventions and supports (PBIS) process to meet the needs of LGBTQ+ children & youth, working with parents, administrators & school personnel, training issues, providing consultation) is ideal for developing school-wide policies and practices to support these children and youth. In addition, school mental health professionals can use their clinical skills to meet the individual mental health and emotional needs of sexual minority youth. Not surprisingly, these students say they would be more comfortable discussing LGBTQ+ issues with a school-based mental health professional such as a school psychologist, counselor or social worker (52.8%) than a teacher (42.3%), school nurse (30.1%), school administrator (25.9%) or coach (18.4%) (Kosciw, Greytak, Zongrone, Clark, & Truong, 2018).

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