

Promoting School Success for Lesbian, Gay, Bisexual, Transgendered, and Questioning Students: Primary, Secondary, and Tertiary Prevention and Intervention Strategies

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Lesbian, gay, bisexual, transgendered, and questioning (LGBTQ) students are likely to be in every classroom in every secondary school in the United States; yet, their needs are often overlooked. LGBTQ students are at risk for developing academic, social, and emotional problems due to harassment and bullying experienced at school. Although schools have an ethical and legal duty to provide a safe educational experience for all students, few schools implement policies and programs to support LGBTQ students. School psychologists, with training in adolescent development, counseling, consultation, and systems change, are in a unique position to help schools be more responsive to the needs of LGBTQ students. By adopting a public health framework that focuses on primary, secondary, and tertiary levels of prevention and intervention for LGBTQ students, school psychologists can implement strategies and make recommendations for school-wide changes to promote positive development for all students. This article highlights challenges faced by LGBTQ students and presents methods for responding to the needs of this minority group using the public health framework.

KEYWORDS: Lesbian, Gay, Bisexual, Transgendered, Questioning, Students, Prevention, Intervention, School, Counseling

On February 12, 2008, Lawrence King, a 15 year-old student, was shot in the head at his junior high school in Oxnard, CA (Saillant & Covarrubias, 2008). Lawrence openly identified as gay and reportedly had begun wearing make-up and clothing considered feminine. He allegedly had altercations about his sexuality with Brandon McInerney, the 14-year-old boy who was arrested for shooting Lawrence during class. Two days after the shooting, Lawrence was declared brain dead and was removed from life support machines. Brandon is currently being charged as an adult with first-degree murder with the special allegation of a hate crime.

Students who identify or are identified by others as lesbian, gay, bisexual, transgendered, and questioning (LGBTQ) often face challenges in school due to longstanding social prejudices and discrimination. These students are at greater risk for harassment, victimization, and potential development of a number of emotional and behavioral problems (Savin-Williams, 1994; Savin-Williams, 2001). School psychologists, along with teachers, administrators, and counselors, can play a key role in promoting positive emotional development and academic success for LGBTQ students.

Merrell, Ervin, and Gimpel (2006) suggest that programming to support and promote social/emotional wellbeing and resiliency should follow a public health framework, which includes providing three levels of services simultaneously. Primary prevention efforts are those that reach all students in school in order to create an environment that promotes safety, respect, and acceptance. Secondary prevention efforts target a select group of students who are most at risk for developing mental health problems, such as those experiencing harassment or family conflicts. Tertiary prevention efforts are more intensive and are directed at students who are already experiencing more serious emotional problems. By using this framework to develop prevention and intervention programming, school psychologists can help reduce the number of LGBTQ students who experience academic, emotional, and behavioral problems and promote positive development.

BACKGROUND

Questioning one's place along the sexuality spectrum typically occurs during adolescence (Williams, Connolly, & Pepler, 2005). While it is estimated that approximately 10 to 20% of adolescents have engaged in a same-gender sexual experience (Eisenberg & Resnick, 2006; McFarland & Dupuis, 2003), the exact number of students who identify as LGBTQ is difficult to determine due to the social stigma associated with revealing one's sexual identity (Rotheram-Borus & Langabeer, 2001). It is very likely, however, that there will be students in every secondary school classroom who identify as LGBTQ even if they do not do so openly.

Although students who identify as transgendered follow a different developmental trajectory than students who identify as lesbian, gay, or bisexual, as the former group is managing issues related to gender identity while the latter group is defining their sexual orientations, all LGBTQ students represent a sexual minority at school and face a social stigma that complicates their school and personal adjustment. Sexual minority students are perceived as "different" by the larger school population, and this provides the basis for harassment and victimization, including verbal and physical harassment, threats, and intimidation (Bontempo & D'Augelli, 2002; Crothers, 2007; Williams, et al., 2005). Sexual minority students report higher frequency of homophobic teasing as compared to their heterosexual counterparts, with questioning students reporting greatest victimization (Espelage, Aragon, Birkett, & Koenig, 2008). Almost 90% of sexual minority students report hearing derogatory remarks directed toward sexual minority students in the schools, and almost 40% report being physically harassed due to their sexual orientation (Gay, Lesbian, and Straight Education Network [GLSEN], 2005). Literature related to homophobia and bullying suggests that teachers often fail to intervene for a variety of reasons, such as limited knowledge of how to intervene, normalization of bullying, or homophobic attitudes (Conoley, 2008). For many sexual minority students, school is perceived as unsafe, and thus their focus turns from academic achievement to survival (Weiler, 2004).

LGBTQ adolescents also experience harassment and victimization at home and in the community. While revealing one's sexual identity to a parent is considered a significant step in the development of sexual minority adolescents (Savin-Williams, 1998), this may not always be a safe thing for adolescents to do. Over 35% of sexual minority adolescents report being verbally abused by a family member because of their sexual orientation (Rivers & D'Augelli, 2001).

Sexual minority students report more emotional and behavioral adjustment difficulties than heterosexual students, including higher rates of substance abuse, prostitution, truancy, encounters with law enforcement, and running away from home (Espelage et al., 2008; Savin-Williams, 1994; Savin-Williams, 2001). Additionally, sexual minority students experience greater feelings of depression, hopelessness, helplessness, worthlessness, alienation, extreme loneliness, and suicidal ideation (Crothers, 2007; Espelage et al., 2008; Savin-Williams, 1994), and some students lose friends because of their sexual identity (Crothers, 2007). One recent study of nearly 14,000 high school students found students who are questioning their sexual orientation to be at the greatest risk, reporting higher victimization, depression, suicidal ideation, and substance abuse, poorer school climate, and lower parental support, when compared to both heterosexual students and those identified as lesbian, gay, or bisexual (Espelage et al., 2008). As a result of cumulative stresses, LGBTQ students are at a particularly high risk for suicide, which is the leading cause of death among LGBTQ adolescents (Eisenberg & Resnick, 2006; Savin-Williams, 1994). In fact, researchers have found that up to 40% of sexual minority youth have attempted suicide (Hershberger & D'Augelli, 1995).

Additionally, because LGBTQ students often experience fear, anxiety, and isolation at school, they may be unable to concentrate on academic tasks and learn effectively (Crothers, 2007). They are five times as likely as the general population of students to report skipping school because of safety concerns, and they are twice as likely to report no plans for post-secondary education (GLSEN, 2005).

CULTURAL CONSIDERATIONS

As schools become increasingly diverse, it is important that school psychologists understand the intersection of gender identity, sexual orientation and culture for students. Sexual minority students are not only dealing with stressors related to their gender identity and sexual orientation, but also those related to acculturation and adaptation to the mainstream culture (Fukuyama & Ferguson, 2000). In the United States, the LGBTQ community is predominately white and middle-class, and it reflects the values and experiences of that dominant culture (Chung & Katayama, 1998). Sexual minority students of color may face what is called “double” or “triple” minority status (sometimes called double or triple jeopardy), meaning that they may experience more harassment, discrimination, and marginalization because of their sexual minority status, ethnic minority status, and, in the case of adolescent girls, gender status (Fukuyama & Ferguson, 2000; Greene, 1994). LGBTQ students of color may struggle with balancing the norms and expectations of different communities, each of which can reject them at any moment, but from both of which they may derive valuable support (Rust, 1996).

There are cultural differences in the acceptance of LGBTQ identity. Cultures that subscribe to a collectivistic identity, one in which the family and ethnic community plays a more prominent role than the individual's desires and needs, tend to emphasize family, respect for elders, and more traditional gender roles (Fukuyama & Ferguson, 2000; Greene, 1994). This is true for Asian and Latino cultures, in which homosexuality is often seen as a direct threat to the family system and individuals are expected to relegate personal desires for family concerns (Chung & Katayama, 1998; Fukuyama & Ferguson, 2000; Rust, 1996). While Native American cultures also subscribe to a collectivistic identity which may inhibit individual expressions of sexuality or gender, as these set the individual apart from the group, they also tend to have more fluid views of sexuality and gender, allowing for the possibility of greater acceptance of sexual minority individuals (Bridges, Selvidge, & Matthews, 2003; Fukuyama & Ferguson, 2000). In the African American culture, heterosexual privilege tends to be valued, and those who openly identify as lesbian, gay, bisexual, or transgendered are often rejected and risk losing a support system that helps buffer the effects of racism (Bridges, Selvidge, & Matthews, 2003; Fukuyama & Ferguson, 2000). In fact, the literature suggests that sexual minority African Americans may identify more strongly with the African American community than with the LGBTQ community, and this impacts their decisions about revealing their gender and sexual identities (Bridges, Selvidge, & Matthews, 2003).

Culture and ethnicity are important factors to consider when working with LGBTQ students (Bridges et al., 2003; Chung & Katayama, 1998; Greene, 1994; Rust, 1996); however, it is essential to recognize individual differences that exist within cultural groups.

THE ROLE OF THE SCHOOL

Schools have a legal and moral obligation to provide a positive and safe school environment for LGBTQ students. Guidelines developed by the Office of Civil Rights of the United States Department of Education prohibit sexual harassment and the creation of a sexually hostile environment, including for those students who identify as LGBTQ (McFarland & Dupuis, 2003). In the past 10 years, courts have held that schools must provide equal access for all students and must protect them from harm and harassment (e.g., *Davis v. Monroe County Board of Education*, 1999; *Nabozny v. Podlesny*, 1996; *Wagner v. Fayetteville Public School*, 1998, as cited in McFarland & Dupuis, 2003). Despite such legal protections and precedents, bullying of sexual minority students in schools is widespread; yet educators are generally unaware of the degree of victimization and often fail to intervene when bullying occurs (Crothers, 2007; Espelage et al., 2008).

By using the public health model to develop prevention and intervention programs at the primary, secondary, and tertiary levels, schools can be more responsive to the rights and needs of LGBTQ students and can create a safe place for these students to succeed academically and socially. School psychologists, with expertise in adolescent development, counseling, consultation, and systems change, can take a leadership role in developing, implementing, and evaluating programs and practices that support LGBTQ students.

Primary Prevention and Intervention

Primary prevention refers to school practices that promote positive social/emotional development for the entire school community (Merrell et al., 2006). Such practices include developing and implementing policies and procedures to promote a positive school climate and an environment of acceptance and safety for all students, including sexual minority students. School climate is an important component in creating an environment that fosters healthy interactions between students, which are conducive to learning (Murdock & Boleh, 2005) and contribute to better adjustment overall (Espelage et al., 2008). However, researchers have shown that “many school climates foster norms, values, and belief systems that communicate rejection and intolerance to some students” (Nichols, 1999, p. 505). Additionally, research suggests that even the social support of family and friends does not adequately buffer LGBTQ students from a negative school environment (Murdock & Boleh, 2005).

One way for schools to promote a climate of acceptance for LGBTQ students is by educating students and staff about gender identity and sexual orientation and integrating accurate information about sexual minority issues into the curriculum (Weiler, 2004). As of 2005, less than 40% of school districts offered any kind of education about sexual orientation, and only 30% of schools offered staff development activities (Rienzo, Button, Sheu, & Li, 2006). It is important for school staff, including teachers, administrators, and auxiliary personnel, to support the school’s commitment to provide a positive climate for LGBTQ students (Weiler, 2003). This includes educating school personnel about institutionalized discrimination, helping them understand social and legal issues that relate to the education of LGBTQ students, developing protocols to respond to LGBTQ students who need help, and responding to students who engage in verbal or physical harassment aimed at sexual minority students or school personnel (Weiler, 2003).

Policy development. While there are few laws and policies that specifically protect the rights of LGBTQ students, several federal and state statutes make clear the need for all students to have equal access to a safe, harassment-free school environment. Schools that receive federal funds are legally mandated to address sexual discrimination and sexual harassment under Title IX of the Education Amendments of 1972, and this law requires that all school districts have policies that allow equal access for all students to all educational programs, have published guidelines on sex discrimination, and have formal procedures to address complaints (Young & Mendez, 2003). While less than a quarter of states have anti-bullying laws that specifically address harassment based on sexual orientation, there is a precedent for states to establish general anti-bullying laws that are applicable to the protection of all students (GLSEN, 2005). Moreover, courts have held that schools have a legal responsibility to protect LGBTQ students from harassment and bullying (McFarland & Dupuis, 2003).

School leaders must be aware of laws and policies that exist, and in the absence of these, school leadership teams can develop their own anti-bullying and harassment policies, which may specifically address the protection of sexual minority students. The formation of a committee devoted to coordinating policy development and implementation, including members from the LGBT community, is recommended (Felix & Furlong, 2008). It is suggested that schools take a strong stance against all discrimination and harassment, which includes taking action whenever a verbal remark or physical threat is made, including verbal comments in all languages (GLSEN, 2005). School leaders will need to determine and model appropriate disciplinary actions to be taken. Furthermore, administrators and lead teachers can model zero tolerance for bullying behaviors and not tolerate homophobic humor amongst staff in an effort to engender similar behavior in novice teachers (Conoley, 2008).

While research suggests that schools that have adopted a zero-tolerance policy for harassment against sexual minority students have had significantly fewer incidents of verbal harassment directed toward LGBTQ students (GLSEN, 2005), schools must consider the age of the students and the severity of the incident.

Young and Mendez (2003) recommend that school leaders, including school psychologists, develop protocols for responding to harassment and select “targeted, age-appropriate responses for violating the policy” (p. 17) while consistently sending the message that these types of behaviors will not be tolerated. Responses can range from education about the policy and school expectations for minor first offenses, to skills training for students who continually disregard the rights of others, to suspension and expulsion for chronic offenders or severe offenses. Along with policies related to the offenders, school personnel should establish policies to support those who are targets of harassment and bullying, such as ensuring confidentiality and having support groups and/or counseling available (Young & Mendez, 2003). It is also important that all school staff receive training in the policies, know how to respond when they hear or see an act of harassment, and understand how to respond when a student tells them about witnessing or experiencing harassment (Young & Mendez, 2003).

Curriculum. Just like teachers are encouraged to include people of color in curriculum to promote diversity and allow students to see people like themselves in lessons, teachers can include age-appropriate information about LGBTQ individuals and issues in curriculum (McFarland & Dupuis, 2003). For example, in elementary school, discussions and activities can focus on different kinds of families. In high school, students might study the persecution of sexual minority individuals during the holocaust or study the civil rights movement for sexual minority individuals. Additionally, students might be encouraged to read works by sexual minority authors, be given the opportunities to write papers on famous or influential sexual minority individuals, or create projects representing issues of heterosexism during lessons on diversity. School psychologists might meet with grade-level or subject-specific teaching teams to develop such curriculum and projects.

Staff Development. Although teachers are often exposed to multicultural issues in their teacher preparation programs, issues related to sexual minority individuals, when addressed, are often met with resistance (Robinson & Ferfolja, 2001). This is likely because of the social taboo about and the discomfort in talking about sex in general, and homosexuality in particular. However, research suggests that teachers play a large role in the experience of sexual minority students in school, with reports of teacher supportiveness contributing significantly to sexual minority students’ positive attitudes about school and their overall sense of wellbeing at school (Murdock & Bolch, 2005). Additionally, because teachers spend large portions of the day with the students, they are often the ones who hear derogatory remarks and see the verbal and physical bullying of sexual minority students. Teachers have the opportunity to respond to this harassment in a way that supports sexual minority students, but they need training in how to recognize what is happening, to educate and discipline offenders, and to support sexual minority students and other students in the school community (McFarland & Dupuis, 2003).

Staff development should focus on educating staff about homophobia and other issues faced by LGBTQ students, informing them about school policy related to discrimination, harassment, and bullying, soliciting their buy in, and training them how to respond when incidents occur (GLSEN, 1999; Young & Mendez, 2003). Young and Mendez (2003) suggest that these trainings should be “concrete and detailed” (p. 18) and should employ the use of case-studies and role-plays so that staff can develop a comfort with the language they are expected to use and the actions they are expected to take.

One program developed to familiarize school staff with issues related to homophobia and to teach them how to respond to bullying is “Homophobia 101: Teaching respect for all” (GLSEN, 1999). This is a staff training workshop that provides basic information about sexual orientation and the stress, discrimination, and prejudice experienced by sexual minority individuals; addresses the impact this has on academic and emotional development; and provides teachers with strategies to use to reduce discrimination and to promote inclusive school environments (GLSEN, 1999). This workshop can be presented by school psychologists who have basic knowledge of LGBTQ issues and familiarity with conducting staff development activities. As outcomes of this workshop have not been documented, school psychologists might consider collecting data pre- and post-workshop to examine its impact.

School-Wide Education. Like all curriculum in schools, students’ cognitive and emotional developmental levels should be considered when developing school-wide programs to increase knowledge about discrimination, harassment, and bullying and to promote a safe, affirmative school climate (Young & Mendez, 2003). Programs

do not need to focus on LGBTQ students solely; nor should programs fail to explicitly address harassment and bullying of sexual minority students. Effective programs provide students with the opportunity to talk about the issues and reflect on what they are learning and how they feel (Young & Mendez, 2003).

One example of a school-wide education program to increase knowledge about sexual minority issues and promote acceptance can be drawn from an alternative high school in Fort Collins, Colorado. According to Bauman and Sachs-Kapp (1998), a group of student leaders at this school were selected by the school counselors to develop and facilitate school-wide workshops on a number of topics to promote diversity, including one focused on sexual orientation. The student leaders received extensive training from the school counselors, which included activities to promote self-awareness, education about diversity topics, lectures from experts, and activities to improve their skills as workshop facilitators. The students, with support from the school counselors and school administrator, led a day-long workshop that included a guest speaker talking to the whole school community, smaller group activities with panelists, and small discussion groups facilitated by student leaders and school staff (students could choose to participate in an alternative workshop that focused on intolerance in more general terms; only about 5% of students chose the alternative workshop). Students participating in the workshop rated it as 3.8 on a 5-point Likert scale (with 1 being *Not Educational at All* and 5 being *Very Educational*); however, no other outcome data were reported.

Along with education about sexual minority issues, schools should ensure that all students know the policies and procedures related to harassment and bullying. As part of this, school personnel can educate students about what they expect witnesses of harassment to do and how they will protect witnesses who come forward (e.g., ensuring confidentiality for witnesses; Young & Mendez, 2003). Bullying prevention has been most successful at the primary level for comprehensive and collaborative school-wide approaches that involve not only educating staff and students in an effort to improve school climate; but also, programs that increase adult monitoring outside of the classroom, those that have achieved teacher buy-in and commitment, and those that are aligned with the school's mission (Felix & Furlong, 2008).

Secondary Prevention and Intervention

While primary prevention and intervention efforts are aimed at the entire school community, secondary efforts target a smaller group of students who are most at-risk for developing academic or emotional problems (Merrell et al., 2006). Many LGBTQ students may benefit from secondary prevention and intervention services because of the deleterious effects of discrimination, alienation, marginalization, harassment, and bullying (Crothers, 2007; Savin-Williams, 1994; Savin-Williams, 2001). This is not to imply that all LGBTQ students will develop emotional or academic problems; rather, they are at greater risk than the general population.

Support groups. The most common type of support group for sexual minority students in schools are Gay-Straight Alliances (GSAs), which are designed to provide safe, supportive environments in which students of all sexual orientations can meet and talk about issues that affect all students, such as heterosexism, homophobia, harassment, discrimination, and prejudice (Szalacha, 2003). GSAs are generally student-led with the support of a faculty advisor, which can be the school psychologist. Research suggests that 7 to 20% of high schools have GSAs (GLSEN, 2001 as cited in Snively, 2004; Rienzo et al., 2006). In schools with GSAs, sexual minority students report feeling safer and have less absences than in schools that do not (GLSEN, 2005), report less victimization (Goodenow, Szalacha, & Westheimer, 2006), and are better able to manage the negative effects of harassment and violence (Rivers, 2004). It is important to note that the support of administrators, school staff, and non-sexual minority students for GSAs promotes an overall school climate of support and inclusivity (Goodenow et al., 2006).

In response to concerns about the increased risk for school dropout and emotional problems for sexual minority students, "Project 10" was implemented at a high school in the Los Angeles Unified School District (Henning-Stout, James, & Macintosh, 2000). A large component of this program was to provide support groups for sexual minority youth, focusing on all aspects of their lives, including substance abuse, high-risk sexual behaviors, esteem building, and career planning (Henning-Stout et al., 2000). Project 10 has demonstrated success in helping sexual minority students improve academic performance and relationships (Henning-Stout et al., 2000).

Group counseling. Group counseling is appropriate for sexual minority students who are at-risk for or are already experiencing academic, social, or emotional difficulties. This may be those students who are targets of harassment or bullying, who lack adequate familial and peer support, or who have shown a decrease in academic performance. At a very basic level, group counseling should help students talk about their experiences, thoughts, and feelings, and help them develop coping strategies and make behavior changes (Shechtman, 2007). However, research needs to be conducted to measure outcomes for LGBTQ students who have participated in group counseling.

Muller and Hartman (1998) offer an example of a counseling group for sexual minority students. The goals they identified included helping students recognize and discuss their feelings related to identifying as sexual minority individuals, develop skills to cope with social and emotional stress and bullying, and identify and build support systems. The group consisted of 25 sessions, which included topics of family relationships, the coming-out process, connecting students with community resources and adult role-models, and interpersonal issues. Outcome research was not conducted.

It is important to note that many transgendered individuals do not identify as lesbian, gay, or bisexual but rather feel as if they are the incorrect gender (Zucker, 2006). For example, an adolescent who is biologically a girl but who identifies as a boy would describe being sexually attracted to girls as heterosexual and would not identify as a lesbian. This is important when considering the composition of groups for counseling and the topics covered, as transgendered students might feel alienated by groups designated for lesbian, gay, bisexual, or questioning students. Similarly, students who are questioning their sexual orientation present with needs similar to, but distinguishable from those of students who identify as lesbian, gay, or bisexual, likely because the latter group may perceive more support due to identifying with groups or individuals who share their experiences (Espelage et al., 2008). The unique needs of questioning students should also be considered when determining group composition.

Diversity room. According to research conducted by Goodenow et al. (2006), “sexual minority youth who asserted that there was no adult in the school they could talk to about a problem were more likely than others to have been threatened at school and to have made multiple suicide attempts in the previous year” (p. 584). Schools can help these students by identifying a safe space staffed by a well-trained, caring professional to support students and to help them mediate and resolve conflicts (Nichols, 1999). This space is termed the “diversity room” as it is open to all students on campus for all issues (Nichols, 1999). This room might also serve as a resource for all students, including sexual minority students, providing them a confidential space to talk about their needs and concerns, addressing immediate problems, and connecting them with school and community resources. A diversity room can be staffed by the school psychologist and school counselor who provide office hours for students to drop in to discuss any issues.

Tertiary Prevention and Intervention

Tertiary prevention and intervention strategies target a very small group of LGBTQ students who are experiencing significant social and emotional difficulties. These students need more intensive services than can be provided within a group setting, and this most often takes the form of individual counseling. While there is a growing body of literature addressing counseling/therapy with the LGBTQ population and/or victims of bullying, there is a dearth of research examining therapeutic outcomes. Furthermore, there is a serious need for empirical studies of clinical approaches to treating LGBTQ individuals.

It is critical to note that while there are unique challenges and stressors experienced by students who identify as LGBTQ, the emotional distress experienced by LGBTQ students may be directly, indirectly, or altogether unrelated to gender identity and sexual orientation (Hershberger & D’Augelli, 2000; Ryan, 2001). When providing individual counseling for sexual minority students, not only should school psychologists understand issues impacting sexual minority students, but they must also have an awareness of their ability to provide culturally competent services, have the capacity to develop appropriate treatment plans to support development and build coping strategies, and have the ability to attend to therapeutic processes directly related to the unique needs of sexual minority students (Barber & Mobley, 1999; Hershberger & D’Augelli, 2000).

Culturally competent practice. First and foremost, school psychologists need to examine their knowledge of the LGBTQ community and issues that impact LGBTQ students (Sobocinski, 1990). According to the findings of one study, mental health practitioners perceived as most helpful by their sexual minority clients were those who had educated themselves about issues of concern for sexual minority individuals (Liddle, 1996). School psychologists who acknowledge the limitations of their training and their capacity to serve LGBTQ students are in a position to seek accurate knowledge to fill any gaps (Matteson, 1996; Ryan, 2001), such as the use of appropriate terminology, a clear understanding of homophobia, historical forces that impact LGBTQ individuals, and sensitivity to issues surrounding marginalization and oppression (Dworkin, 2000). It is important for school psychologists to recognize that, historically, homosexuality has been treated as pathological, but that this view is considered unethical by most professional organizations today (Haldeman, 1994; Sobocinski, 1990). Similarly, transgendered adolescents often continue to be pathologized and are given the diagnosis of Gender Identity Disorder, which is characterized by feelings of being the wrong sex and a strong desire to have the biological and social characteristics of the other sex according to the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV-TR; American Psychiatric Association [APA], 2000). Additionally, there is a need for school psychologists to be mindful not to pathologize nonnormative or nonconforming gender-type behaviors such as in the case of effeminate males or masculinized females (Dworkin, 2000).

A second important part of providing culturally competent services is for school psychologists to examine their own gender and sexual identity along with their attitudes, beliefs, and values about gender identity, sexual identity, sexual orientation, and sexual experiences (Dworkin, 2000; Matteson, 1996). Research suggests that positive outcomes from counseling can occur for sexual minority students regardless of the psychologist's sexual orientation, but that it is important to recognize heterosexual privilege within the counseling relationship (Liddle, 1996; Matteson, 1996). Along with this notion, it is critical that school psychologists avoid heterosexist attitudes, wherein heterosexuality is presumed (Hershberger & D'Augelli, 2000). This speaks to the need to be familiar with LGBTQ and sexual identity terminology so as to provide services with nonbiased language.

Finally, it is critical for school psychologists to develop an awareness of their own biases that may impair their effectiveness (Browning, Reynolds, & Dworkin, 1998) and work through any biases, homophobia or biphobia, myths, stereotypes, and prejudices, while continually educating themselves to be affirming mental health practitioners (Shannon & Woods, 1998; Sobocinski, 1990). Matteson (1996) suggests avoiding judging a student and his/her experiences against one's own sexual orientation and sexuality standards. Furthermore, in order to be effective, school psychologists should avoid imposing their own political views. School psychologists should also avoid misconceptions about LGBTQ relationships, such as assuming that any same-sex experience denotes that a client is gay or lesbian (which negates the possibility of bisexuality or questioning), assuming that monogamy is necessary for healthy relationships, or assuming that LGBTQ students who do not want to reveal their sexual identity are in denial or feel shameful (Dworkin, 2000).

Treatment planning. LGBTQ students seek counseling for a variety of concerns, which may include issues related to gender identity or sexual orientation (e.g., confusion, isolation, distress); general problems related to or exacerbated by gender identity or sexual orientation; or issues completely unrelated to gender identity or sexual orientation (Ryan, 2001). Thus, as with all multicultural or intercultural counseling, school psychologists need to listen to the student's voice in order to clearly identify the presenting problem and inform diagnosis and treatment, which involves assessing the role (if any) that gender identity or sexual orientation will have within counseling/treatment (Dworkin, 2000; Ryan, 2001). Additionally, the school psychologist needs to be informed about the impact of any other identities (e.g., ethnic minority status) and contextual factors at play, including family dynamics and any experienced or anticipated negative responses from family, school, and/or the community to the student's expressions of gender identity or sexual orientation (Dworkin, 2000; Hershberger & D'Augelli, 2000). Moreover, "it is important not to under- or overemphasize" (Dworkin, 2000, p. 175) the student's sexual minority status; rather, it is necessary to strike a balance between being sensitive to cultural differences and challenges based on LGBTQ status and treating the student the same as any other adolescent with similar adjustment or developmental issues or presenting concerns (Browning et al., 1998; Hershberger & D'Augelli, 2000).

In keeping with the notion of individualized experiences, it is important that school psychologists recognize the student's unique strengths and build on these as part of treatment. Despite experiences ranging from a lack of affirmation or acceptance to outright condemnation and abuse, the majority of LGBTQ students lead happy and productive lives (Barber & Mobley, 1999), and such signs of resiliency can be attributed to positive identity development and a strong sense of self worth (Barber & Mobley, 1999; Shannon & Woods, 1998). In fact, self-acceptance has been found to be the single best predictor of positive mental health outcomes for sexual minority adolescents and young adults (Hershberger & D'Augelli, 1995). A primary goal of counseling for sexual minority students who are experiencing emotional distress because of their gender identity or sexual orientation should be to build positive identities and self worth, which will help diminish their feelings of vulnerability and build greater resiliency, resulting in less shame and fewer risk behaviors (Ryan, 2001).

Given the critical need for developing a positive identity, it is helpful to take a developmental approach to understanding the needs of sexual minority students. Identity formation is a major developmental task of adolescence (Barber & Mobley, 1999; Ryan, 2001), which can best be understood for sexual minority individuals by applying a model, such as Cass' Gay Identity Model. Barber and Mobley (1999) suggest the need to recognize the stage of identity development in order to assess the student's needs and intervene appropriately. According to Cass' model, an individual progresses through stages that are not necessarily fixed, which interact with racial identity, and impact how the individual responds to the world (Barber & Mobley, 1999). Cass' model suggests stages of confusion, comparison, tolerance, acceptance, pride, and synthesis, with the earlier stages being associated with feelings of loneliness, frustration, isolation, and depression and the later stages being associated with contentment and connectedness (Barber & Mobley, 1999).

Part of identity development for sexual minority students involves a process of defining and redefining what it means to be LGBTQ and developing a new self-concept amidst cultural stigmatization and discrimination (Browning et al., 1998; Hershberger & D'Augelli, 2000). Thus, the process of identity development may be disrupted by challenges posed by having a stigmatized identity, which can then lead to risk behaviors, adjustment problems, anxiety, depression, suicide risk (Ryan, 2001) or risk of homelessness (Barber & Mobley, 1999). LGBTQ students may feel a pull between what they think of themselves or their identity and what society thinks and expects of them (Barber & Mobley, 1999; Dworkin, 2000). Furthermore, a process of reciprocal interaction takes place between internal and external forces (e.g., societal norms), which contributes to the individual's identity development (Barber & Mobley, 1999). It is important for school psychologists to recognize that there are many developmental pathways to gender identity and sexual orientation development (Dworkin, 2000; Hershberger & D'Augelli, 2000), but what is critical in counseling is to help the students explore and discover their beliefs about themselves and how they can cope most effectively with societal expectations (Barber & Mobley, 1999; Dworkin, 2000).

Therapeutic process. As with any counseling, it is imperative that the school psychologist provide the LGBTQ student with a safe and supportive environment (Barber & Mobley, 1999; Browning et al., 1998; Ryan, 2001; Sobocinski, 1990); move at a pace consistent with the student's internal and external supports (Matteson, 1996); and consider ethical and professional obligations (Hershberger & D'Augelli, 2000). Most fundamentally, the school psychologist needs to convey a sense of affirmation, acceptance, and respect for both the student and his/her identity and experiences (Browning et al., 1998; Hershberger & D'Augelli, 2000; Matteson, 1996). An LGBTQ student is unlikely to disclose his/her identity due to distrust and suspicion until it is perceived safe to do so (Barber & Mobley, 1999; Dworkin, 2000; Ryan, 2001). Safety is contingent on the psychologist's ability to establish credibility and rapport, which are related to the psychologist appearing informed and knowledgeable and conveying a genuine sense of acceptance, sensitivity, and support (Barber & Mobley, 1999; Dworkin, 2000; Ryan, 2001).

Adequately addressing the needs of sexual minority students requires a heightened awareness of the challenges and resources of the student, both as an individual and as a member of a marginalized group (Ryan, 2001). Challenges related to gender and sexual identity that may contribute to mental health concerns include: invisibility; others' assumptions of defectiveness or deviance; stigma and oppression; assumptions that all sexual minority individuals are alike; lack of positive role models; negative self-concept resulting from a heterosexist and homophobic society; experiences of hatred, harassment, ridicule, or victimization; fear of

being judged, rejected, or alienated; fear of being “outed” or coming out; and lack of support and affirmation (Hershberger & D’Augelli, 2000). School psychologists must also keep in mind that pre-existing and/or unrelated vulnerabilities may predispose LGBTQ students to be less able to cope, placing them at greater risk due to a multiplicity of stressors (Ryan, 2001). Therefore, a focus on developing effective coping mechanisms is undoubtedly necessary, creating the need for a psycho-educational approach to share information about self-care strategies and help-seeking behaviors, to dispel myths, and to aid in understanding and managing stigma (Ryan, 2001).

Ryan (2001) suggests an anticipatory guidance approach, whereby the school psychologist provides information about anticipated challenges, typical life events, and changes expected. Such an approach can aid in normalizing the student’s experiences, which may contribute to the development of a positive self-image (Matteson, 1996). Additional therapeutic approaches may involve reframing irrational beliefs, role-playing or rehearsal of behavioral responses to potential problems, and developing effective coping skills, including assertiveness training and the development of conflict resolution and/or decision-making skills (Browning et al., 1998; Ryan, 2001).

One topic that often arises in the course of counseling an LGBTQ student is the coming out process. The school psychologist can assist in helping the student examine meaning, motivations, goals, risks, potential costs and benefits, and alternative methods or strategies for disclosure (Browning et al., 1998; Hershberger & D’Augelli, 2000; Matteson, 1996; Shannon & Woods, 1998). While coming out is viewed as an important step in identity development, it involves a certain level of risk (Hershberger & D’Augelli, 2000; Shannon & Woods, 1998), and it is particularly risky for students given their dependence on parents (Barber & Mobley, 1999). Hershberger and D’Augelli (2000) note that a student may experience stress related to both concealing his/her identity and disclosing his/her identity, which further contributes to a sense of isolation and difference. The potential risks and costs of coming out involve rejection, isolation, discrimination, harassment, and violence (Hershberger & D’Augelli, 2000; Shannon & Woods, 1998), while the benefits include a deepening of relationships, less isolation, availability of supports, and a more integrated identity and life (Shannon & Woods, 1998). During the process of departing from a heterosexual identity and its corresponding expectations, individuals may attempt to pass as heterosexual by modifying their behaviors or exhibiting anti-gay attitudes as a result of internal conflicts and social pressures to conform to heterosexuality, internalized homophobia, or due to implicit or explicit barriers to expressing non-heterosexual attitudes and behaviors (Hershberger & D’Augelli, 2000; Ryan, 2001).

Being aware of the range of behaviors and attitudes that students may demonstrate is critical in order to adequately assess their needs and respond appropriately. Ultimately, however, school psychologists will need to deem whether it is necessary to refer a student to another professional for treatment, in which case, it should be made clear to the student that the referral is due to the psychologist’s inability to be objective or effectively meet the student’s needs (Matteson, 1996). When making referrals to outside therapists and/or community support groups, it is recommended that the school psychologist be aware of the agency’s or professional’s capacity to serve LGBTQ adolescents (Dworkin, 2000; Ryan, 2001).

CONCLUSION

All students have the greatest chance of academic and social success in safe, supportive school environments. While many students who identify as LGBTQ will not experience the deleterious effects of harassment and bullying, they are at greater risk than the general population for a number of emotional and behavioral problems, including depression, suicide, truancy, and academic failure (Crothers, 2007; Espelage et al., 2008; Murdock & Bolch, 2005; Savin-Williams, 1994). Thus, focusing some school resources on fostering resiliency in LGBTQ students is a priority.

The public health framework outlined by Merrell et al. (2006) provides a structure for school psychologists to work with school leaders, teachers, and other school personnel to develop prevention and intervention programming to address the needs of a diverse school community. Primary efforts focus on the entire school community and include policy development, educating teachers and students about diversity (including gender and sexual diversity), and integrating diversity into the curriculum. Secondary efforts provide

ongoing support for students who are at risk of experiencing problems and can take the form of a diversity room that serves all students, groups to support LGBTQ students and allies, and group counseling to promote identity development and coping skills. Tertiary efforts focus on those students who are already experiencing problems and include individual counseling services.

The most effective schools will incorporate primary, secondary, and tertiary prevention and intervention strategies to provide support for sexual minority students. One such example is The Safe Schools Program for Gay and Lesbian Students (SPP) developed in 1993 by the Massachusetts Board of Education to develop school policies to protect sexual minority students from harassment and bullying (primary), to train school staff in crisis management (primary/secondary), to establish Gay-Straight Alliances (secondary), and to provide counseling for sexual minority students and family members of sexual minority students (tertiary; Szalacha, 2003). Szalacha (2003) found that all students, including sexual minority students, perceived a positive impact on the school climate when any of the efforts were made, with a combination of all three leading to the largest impact on perceptions of climate.

School psychologists are in a position to begin the process of helping schools become more responsive to LGBTQ students. Drawing on their knowledge of adolescent development, diversity, and systems change and their skills in consultation, collaboration, and counseling, school psychologists can educate administrators about relevant laws and policies, conduct staff development activities, facilitate school-wide diversity trainings, serve as the advisor of a gay-straight alliance, conduct group and individual counseling, and evaluate outcomes.

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