FOUNDATIONS OF SCHOOL COUNSELING FOR LGBTQ YOUTH: COMPREHENSIVE, EVIDENCE-BASED, AND AFFIRMATIVE APPROACHES

Jeffry Moe, PhD, LPC-S
Elsa Soto Leggett, PhD, LPC-S, CSC, RPT
 REFLECTION: SPACE SHIP EXERCISE
DISCUSSION QUESTIONS

1) Would you adopt the alien way of life?
2) Would you seek out romantic or sexual relationships?
3) How would you feel emotionally about your situation?
4) How would you protect yourself from danger?
5) How would you act in public?
6) How would you identify other Earth people?
7) If you had children, how would you raise them?
8) Assuming that Earthlings would be stuck for at least 400 years, what would your future plans be?
TERMS

- Lesbian
- Gay
- Bisexual
- Transgendered
- Questioning
- Homo-Prejudice/Homo-Negativity
- Heterosexism
- Same-Sex Sexuality
- Ally
- Gay/Straight Alliance
SCHOOL CLIMATE

- Gay, Lesbian, & Straight Education Network (GLSEN) National Survey
- Sampled 6,209 students in all 50 states, grades 6-12
- 73% report hearing Homo-negative remarks
- 90% report hearing the word ‘gay’ used in a derogatory way
- 86.2% report being verbally harassed due to sexuality
- 66.5% report being verbally harassed due to gender
- 44% report physical harassment due to sexuality
- 30.4% report physical harassment due to gender
- 22.1% report physical assault due to sexuality
- 14.2 % report physical assault due to gender
- 60.8% report not telling school staff
- 31.1% that did tell report staff took no action

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CLIMATE AND OUTCOMES (GLSEN, 2007; BUSSERI, WILLOUGHBY, CHALMERS, BOGHEART, 2008)

- LGBTQ Students report:
  - More Absenteeism
    - Missing Class or Days of Schools
  - Lower Educational Achievement Goals
    - In terms of finishing high school
    - And in terms of not planning to attend College
  - Earlier ages of sexual activity
  - More risky and unsafe sex practices
  - Earlier use of Alcohol & Other Drugs
  - More Anxiety & Depression
  - The leading cause of death for LGBTQ Youth is Suicide
EXPERIENCES

“I don’t feel safe from abuse at my high school. I am relentlessly persecuted for being gay. By the time I was in 9th grade, listening without responding to others bashing homosexuals was more painful than the harassment that I deal with now. Up to now, a person has masturbated in front of me while I was in the school lavatory, I have had cigarettes thrown at me, students have driven their car within a foot of me to drive me off the road while I was walking, and people call me vulgar names almost daily. What I am describing now is not simple child’s play and name calling. It is very specific harassment that threatens my safety at school.” (McFarland & Dupuis, 2001)
Experiences

“People kept coming up to me and making fun of me. They would call me horrible names and I would cry all the time. Letters were put in my locker saying things about AIDS and how my parents shouldn’t have had me and how I should just die. Kids would threaten me after school and follow me home yelling things at me. No one should have to go through what I went through in high school.” (McFarland & Dupuis, 2001)
Positive Outcomes of Affirmation

- Associated with increases in overall well-being and with coping mechanisms comparable or higher than non-LGBTQ people (King & Smith, 2004; Konik & Stewart, 2004; Singh, Dew, Hays, & Gailis, 2006).
- Increased Hopefulness and Optimism (Moe, Dupuy & Laux, 2008).
- Decreased Internalized Homo-Negativity/Homo-Prejudice (Szymanski & Chung, 2006).
- Reduction of engagement in risky sex practices (Mayfield, 2001).
- Promotes faith exploration and identity development (Roseborough, 2006; Tozer & Hayes, 2004).
- Promotes closeness with family and friends (Olsen & Morgan, 2005).
Conceptual Foundations

ASCA National Model

Professional Ethics

LGBTQ Competency
5 Pillars of Comprehensive LGBTQ School Counseling

- Open & Affirming Service
- Bullying & Violence Prevention
- Sexuality Education
- Addictions Education
- Crisis Response

LGBTQ Student Success

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LGBTQ Responsive School Counseling (Goodrich & Luke, 2009)

- Curriculum
  - Integrate LGBTQ Experiences
  - Work into lessons on Relationships, Identity, Gender

- Student Planning
  - Consider Salience, Valence, and Context of sexuality
  - Increase your visibility as an Ally

- Counseling
  - Group Counseling
  - Crisis Support
  - Family Support

- Systems Support
  - Events & Workshops
  - Policies & Data
  - Gay/Straight Alliances
BULLYING & VIOLENCE PREVENTION PROGRAMS

- Targeting school climate
- Involve Bullies, Victims, Bystanders, and Community Members
- Are based on Needs Assessment
- Establish behavioral norms based on bullying prevention
- Require leadership from administration and senior faculty/staff
- *Olweus Bullying-Prevention Program:*
  [www.clemson.edu/olweus/](http://www.clemson.edu/olweus/)
- *Steps to Respect:*
  [www.cfchildren.org](http://www.cfchildren.org)
BEST PRACTICES

- School-Based Bullying Prevention Team
- Published Discipline Policy: Code of Conduct
- Consistency of Enforcement
- Immediate Consequences
- Student involvement in rules on bullying
- In-class discussion of bullying
- Modeling of anti-bullying behaviors by personnel
- Consistent messages about bullying, inclusion, and social behavior
- Support victims, encourage reporting and involve parents
- Pro-social behavior reinforced

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SUICIDE & CRISIS RESPONSE

- 3rd leading cause of death for Youth, #1 for LGBTQ Youth
- Most recommended practices:
  - Depression screening
  - Organize School Crisis Teams
  - Develop action plan with specific responsibilities
  - In the aftermath, disseminate information in small groups and one to one
  - Memorialize via ‘living memorials’ not objects
  - Identify youth at risk for imitation and intervene

- Signs of Suicide

www.mentalhealthscreening.org/schools
COMPREHENSIVE SEXUALITY EDUCATION

- Emphasize both delayed sexual behavior and the use of protection and contraception
- Abstinence-only programs fail to delay sexual initiation and to reduce sexual behavior (Kirby, 2007)
- Comprehensive Sexuality Education programs found to:
  - delay sexual initiation,
  - increase use of protection and contraception,
  - delay and prevent pregnancy
  - Reduce incidences of risky sexual behavior
  - Reduce incidences of STD

- Making Proud Choices!
  
  [www.plannedparenthood.org/ppcw/making-proud-choices-3899.htm](http://www.plannedparenthood.org/ppcw/making-proud-choices-3899.htm)
BEST PRACTICES

- Target specific health and developmental goals (i.e., preventing/reducing pregnancy or STB infection)
- Target specific behaviors related to these goals.
- Take a multi-factor and process view: what predisposes, precipitates, maintains, and contributes to undesirable behavior
- Promote health and resiliency factors related to reduction of specific problem behaviors
- Designed with input of community
- Involve multiple activities
- Involve all stakeholders
Evidence on use of general school-wide approaches is inconclusive

Some support for targeting (but not deliberate grouping together) of specific at risk groups by:
- Age
- Gender
- Minority Group
- Substance of Abuse

Can be implemented as early as Pre-school

*Life Skills Training*
www.lifeskillstraining.com

*Skills, Opportunity, & Recognition (SOAR)*
www.channing-bete.com
BEST PRACTICES

- Based on needs of specific community
- Designed with attention to Structure: Program Delivery Type, Audience, and Setting
- Coupled with Family and other Community involvement
- In school programs focus on dissemination of information on Drug Effects and Resistance Skills
- Curricula on social and academic skills, friendship and general safety are intertwined with prevention efforts
- Should have booster sessions at transition points (e.g., middle to high school)
RESOURCES

- P-FLAG: Parents and Friends of Lesbians and Gays: [www.pflag.org](http://www.pflag.org)
- Local Community Centers
  - [www.montrosecounselingcenter.org](http://www.montrosecounselingcenter.org) (Houston)
  - [www.rcdallas.org](http://www.rcdallas.org) (Resource Center Dallas)
  - [www.outyouth.org](http://www.outyouth.org) (Austin)
- ALGBTIC: Association for Lesbian, Gay, Bisexual, & Transgender Issues in Counseling [www.algbtic.org](http://www.algbtic.org)
- Gay, Lesbian, & Straight Education Network (GLSEN) [www.glsen.org](http://www.glsen.org)
- SoulForce [www.soulforce.org](http://www.soulforce.org)
- Sexuality Information & Education Council of the United States (SIECUS) [www.siecus.org](http://www.siecus.org)
- Substance Abuse & Mental Health Services Administration (SAMHSA, [www.samhsa.gov](http://www.samhsa.gov)).
REFERENCES


REFERENCES (CONT.)


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Foundations of School Counseling for LGBTQ Youth: Comprehensive, Evidence-Based, and Affirmative Approaches

Jeffry Moe, PhD, LPC-S
Elsa Soto Leggett, PhD, LPC-S, CSC, RPT

I. Reflection: Space Ship Exercise (Hillman & Martin, 2002)
   A. Would you adopt the alien way of life?
   B. Would you seek out romantic or sexual relationships?
   C. How would you feel emotionally about your situation?
   D. How would you protect yourself from danger?
   E. How would you act in public?
   F. How would you identify other Earth people?
   G. If you had children, how would you raise them?
   H. Assuming that Earthlings would be stuck for at least 400 years, what would your future plans be?

II. Terms
   A. Lesbian
   B. Gay
   C. Bisexual
   D. Transgendered
   E. Questioning
   F. Homo-Prejudice/Homo-Negativity
   G. Heterosexism
   H. Same-Sex Sexuality
   I. Ally
   J. Gay/Straight Alliance

III. School Climate: Gay, Lesbian, & Straight Education Network (GLSEN) National Survey
   Sampled 6,209 students in all 50 states, grades 6-12
   A. 73% report hearing Homo-negative remarks
   B. 90% report hearing the word ‘gay’ used in a derogatory way
   C. 86.2% report being verbally harassed due to sexuality
   D. 66.5% report being verbally harassed due to gender
   E. 44% report physical harassment due to sexuality
   F. 30.4% report physical harassment due to gender
   G. 22.1% report physical assault due to sexuality
   H. 14.2% report physical assault due to gender
   I. 60.8% report not telling school staff
   J. 31.1% that did tell report staff took no action

IV. LGBTQ Students report (GLSEN, 2007; Busseri, Willoughby, Chalmers, Bogheart, 2008):
   A. More Absenteeism (Missing Class or Days of Schools)

Moe & Leggett, 2012
B. Lower Educational Achievement Goals
   1. In terms of finishing high school
   2. And in terms of not planning to attend College
C. Earlier ages of sexual activity
D. More risky and unsafe sex practices
E. Earlier use of Alcohol & Other Drugs
F. More Anxiety & Depression
G. The leading cause of death for LGBTQ Youth is Suicide

V. Experiences
VI. “I don’t feel safe from abuse at my high school. I am relentlessly persecuted for being gay. By the time I was in 9th grade, listening without responding to others bashing homosexuals was more painful than the harassment that I deal with now. Up to now, a person has masturbated in front of me while I was in the school lavatory, I have had cigarettes thrown at me, students have driven their car within a foot of me to drive me off the road while I was walking, and people call me vulgar names almost daily. What I am describing now is not simple child’s play and name calling. It is very specific harassment that threatens my safety at school.” (McFarland & Dupuis, 2001)

VII. Positive Outcomes of Affirmation
A. Associated with increases in overall well-being and with coping mechanisms comparable or higher then non-LGBTQ people (King & Smith, 2004; Konik & Stewart, 2004; Singh, Dew, Hays, & Gailis, 2006).
B. Increased Hopefulness and Optimism (Moe, Dupuy & Laux, 2008).
C. Decreased Internalized Homo-Negativity/Homo-Prejudice (Szymanski & Chung, 2006).
D. Reduction of engagement in risky sex practices (Mayfield, 2001).

VIII. Conceptual Foundations
A. Codes of Ethics & Standards of Care
B. ASCA National Model
C. LGBTQ Competency

IX. 5 Pillars of Comprehensive LGBTQ School Counseling
A. Anti-Bullying & Bullying Prevention (Including Cyberbullying)
B. Suicide Prevention & Response
C. Comprehensive Sexuality Education
D. Addictions Prevention
E. LGBTQ Affirmative Counseling

X. LGBTQ Responsive School Counseling
   (Goodrich & Luke, 2009)
   A. Curriculum
      1. Integrate LGBTQ Experiences
      2. Work into lessons on Relationships, Identity, Gender
   B. Student Planning

Moe & Leggett, 2012
1. Consider Salience, Valence, and Context of sexuality
2. Increase your visibility as an Ally

C. Counseling
   1. Group Counseling
   2. Crisis Support
   3. Family Support

D. Systems Support
   1. Events & Workshops
   2. Policies & Data
   3. Gay/Straight Alliances

XI. Bullying & Violence Prevention Programs
A. Targeting school climate
B. Involve Bullies, Victims, Bystanders, and Community Members
C. Are based on Needs Assessment
D. Establish behavioral norms based on bullying prevention
E. Require leadership from administration and senior faculty/staff
F. Olweus Bullying-Prevention Program: www.clemson.edu/olweus/
G. Steps to Respect: www.cfchildren.org
H. Best Practices
   1. School-Based Bullying Prevention Team
   2. Published Discipline Policy: Code of Conduct
   3. Consistency of Enforcement
   4. Immediate Consequences
   5. Student involvement in rules on bullying
   6. In-class discussion of bullying
   7. Modeling of anti-bullying behaviors by personnel
   8. Consistent messages about bullying, inclusion, and social behavior
   9. Support victims, encourage reporting and involve parents
   10. Pro-social behavior reinforced

XII. Suicide & Crisis Response: 3rd leading cause of death for Youth, #1 for LGBTQ Youth
A. Depression screening
B. Organize School Crisis Teams
C. Develop action plan with specific responsibilities
D. In the aftermath, disseminate information in small groups and one to one
E. Memorialize via ‘living memorials’ not objects
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G. Signs of Suicide: www.mentalhealthscreening.org/schools

XIII. Comprehensive Sexuality Education
A. Emphasize both delayed sexual behavior and the use of protection and contraception
B. Abstinence-only programs fail to delay sexual initiation and to reduce sexual behavior (Kirby, 2007)
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   2. increase use of protection and contraception,
   3. delay and prevent pregnancy
   4. Reduce incidences of risky sexual behavior
   5. Reduce incidences of STD

D. Making Proud Choices!: [www.plannedparenthood.org/ppcw/making-proud-choices-3899.htm]

E. Best Practices
   1. Target specific health and developmental goals (i.e., preventing/reducing pregnancy or STB infection)
   2. Target specific behaviors related to these goals.
   3. Take a multi-factor and process view: what predisposes, precipitates, maintains, and contributes to undesirable behavior
   4. Promote health and resiliency factors related to reduction of specific problem behaviors
   5. Designed with input of community
   6. Involve multiple activities & stakeholders

XIV. Substance Addiction Prevention
   A. Evidence on use of general school-wide approaches is inconclusive (NIDA, 2009)
   B. Some support for targeting (but not deliberate grouping together) of specific at risk groups by:
      a. Age
      b. Gender
      c. Minority Group
      d. Substance of Abuse
   C. Can be implemented as early as Pre-school
   D. Life Skills Training: [www.lifeskillstraining.com]
   O Skills, Opportunity, & Recognition (SOAR): [www.channing-bete.com]
   E. Best Practices
      1. Based on needs of specific community
      2. Designed with attention to Structure: Program Delivery Type, Audience, and Setting
      3. Coupled with Family and other Community involvement
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      5. Curricula on social and academic skills, friendship and general safety are intertwined with prevention efforts
      6. Should have booster sessions at transition points (e.g., middle to high school)

Resources
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XVI. Local Community Centers
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Moe & Leggett, 2012
www.rcdallas.org (Resource Center Dallas)
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  www.algbtic.org
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www.glens.org
  SoulForce www.soulforce.org
  Sexuality Information & Education Council of the United States (SIECUS)
  www.siecus.org
  Substance Abuse & Mental Health Services Administration

References


Moe & Leggett, 2012


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