



ISSUE BRIEF SERIES



Adopting a Trauma-Informed Approach for LGBTQ Youth

A Two-Part Resource for Schools and Agencies

Part 2: How Do You Implement a Trauma-Informed Approach With LGBTQ Youth?

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I. Introduction

Childhood trauma is a significant public health issue with far-reaching consequences for individuals, families, communities, and the nation. Awareness of trauma and its impact has galvanized a cross-sector call to action, extending from local to federal levels, to build “trauma-informed” service systems that understand the causes and consequences of trauma, and that promote healing and resilience for children and their families. In particular, communities across the United States, including in tribes and territories, need greater support in understanding and addressing the trauma-related needs of LGBTQ youth—a population at high risk of negative outcomes because of bias, stressors, violence, and other challenges (Fisher, Blau, & Poirier, 2012).

This brief is the second in a two-part series entitled *Adopting a Trauma-Informed Approach for LGBTQ Youth*. Part 1 (*Why Use a Trauma-Informed Approach With LGBTQ Youth?*) addresses the prevalence and impact of trauma among LGBTQ youth, what it means to adopt a trauma-informed approach, and why a trauma-informed approach is needed. Part 2 offers: (1) a framework for implementing a trauma-informed approach agencywide or schoolwide across six key domains; (2) specific strategies for adopting a trauma-informed approach for LGBTQ youth within each domain; and (3) steps that organizations and schools can take to support trauma-informed systems change that benefits all, including LGBTQ youth.

II. Framework for Implementing a Trauma-Informed Approach

Adopting a trauma-informed approach agencywide or schoolwide reflects a commitment to change culture and practice in order to ensure that all youth get the support they need to thrive in the face of adversity. Here, we outline a framework for adopting a trauma-informed approach across six core domains: (1) build trauma-informed knowledge and skills; (2) establish safe and supportive relationships and environments; (3) provide trauma-informed assessment and treatment services; (4) involve youth and families; (5) promote trauma-informed procedures and policies; and (6) collaborate across sectors. This framework reflects the common core elements of a trauma-informed approach across youth-serving settings, including community-based agencies and schools (Guarino et al., 2009; Cole et al., 2013; SAMHSA, 2014a; American Institutes for Research, 2015).

In this brief, we focus specifically on meeting the needs of LGBTQ youth. However, trauma-informed strategies within each domain can be expanded to address the needs of other groups with high rates of exposure to trauma. Many of the practices that we discuss—for example, training all staff on trauma and creating safe environments—benefit all students. Adopting a universal approach to addressing trauma ensures that these practices will be fully embedded and sustained.

Domain 1: Build Trauma-Informed Knowledge and Skills

All staff members working with LGBTQ youth in agencies or schools need to be educated on a variety of topics, including vocabulary and definitions relevant to LGBTQ youth (e.g., sexual orientation, gender identity); identity development and related stressors; myths and stereotypes regarding LGBTQ youth; types of trauma specific to LGBTQ youth, such as harassment, stigma, violence, family concern/rejection; the impact of traumatic stress on all aspects of development; the particular effects of trauma on LGBTQ youth (e.g., suicide, depression, substance abuse, HIV, homelessness); and the core principles of a trauma-informed approach. In addition to general education, staff should receive training on the unique issues and challenges experienced by particular subpopulations of LGBTQ

youth. For example, transgender youth have particular risk factors related to their sexual minority status, including even higher rates of exposure to trauma than their sexual minority peers. Staff should be trained on the particular needs and experiences of various subpopulations so that they can tailor their responses appropriately.

All staff members require training on specific skills and strategies for working with LGBTQ youth in a trauma-informed way. Some skills will be specific to particular staff, such as clinicians, while others will be applicable to all who interact with LGBTQ youth. Training topics include the following:

- Crisis intervention and prevention techniques that include LGBTQ-friendly practices, implemented by administrative, school mental health, and teaching staff.
- Safety planning for LGBTQ youth, including schoolwide anti-bullying programs that address LGBTQ issues.
- Steps for helping LGBTQ youth identify triggers (e.g., reminders of trauma that lead to trauma reactions).
- Targeted and indicated school mental health programs for youth exposed to trauma, including LGBTQ youth.
- Strengths-based approaches for working with LGBTQ youth, including setting up gay/straight alliances (GSAs) and ensuring that curricula integrate LGBTQ issues.
- Evidence-based clinical interventions for trauma conducted by LGBTQ-friendly clinicians and adapted for LGBTQ youth.
- Engagement with LGBTQ youth and their families.
- Specific strategies for working with various subgroups within the broader community of LGBTQ youth, such as transgender youth.

Training *all* personnel ensures a common understanding, helps staff identify potential trauma-related responses, and enhances staff capacity to respond in ways that are sensitive, respectful, and safe. Education about trauma and its impact also allows adults to step back, take behaviors less personally, and respond in more informed and empathic ways. A similar strategy can be used to better understand parent or family responses that are related to trauma. In all cases, it is important to remember that not all LGBTQ youth experience significant adversity, and that for those who are in distress, not all difficulties are related to sexual orientation or gender identity. Adopting a trauma-informed approach ensures that the potential role of trauma is *considered*, though it may not always be the underlying issue.

Domain 2: Establish Safe and Supportive Environments

“I really want to come out. Hiding feels terrible, but I’m afraid. I don’t know what to do. It would really be helpful if my school could be more supportive of LGBT students. No one at my school is out, so I feel like I’m really alone.”

—2013 National School Climate Survey (Kosciw et al., 2014)

Traumatic experiences challenge one’s belief that the world is a safe and predictable place and can leave youth feeling fearful, insecure, and distrustful of others. A foundational element of any trauma-informed environment is safety—both physical and emotional. Among LGBTQ youth, issues of safety and trust are paramount, as they often feel unsafe and unsupported across a range of settings. Many LGBTQ youth report that they do not feel safe in their schools and communities, which can lead to a sense of isolation and disconnection from others. LGBTQ youth in negative and unsupportive social environments are at increased risk for a number of adverse outcomes, such as

increased suicide attempts, school absenteeism, mental health issues, and poorer academic performance (Poirier, 2012).

Safe, positive, and accepting relationships and environments promote positive outcomes for LGBTQ youth. Creating safe and supportive environments requires that schools and agencies attend to their physical environment, culture, and quality of relationships with LGBTQ youth. Adopting universal strategies for establishing safe and supportive environments for LGBTQ youth ensures that all youth will feel supported, regardless of where they are in their identity development. Adults may not always know if a youth identifies as LGBT or is questioning their sexual orientation or gender identity. Embedding specific practices for supporting LGBTQ youth into the culture of a school or agency ensures that all feel welcomed, respected, and supported, including youth who have not come out to others or are uncertain about their identity.

Schools and agencies establish safe and supportive environments for LGBTQ youth by:

1. **Creating safe physical spaces.** Creating a safe and welcoming physical space ensures that LGBTQ youth will feel secure from the moment they enter an organization or school. Specific areas within the physical space, such as bathrooms, can be particularly triggering for those who have abuse histories. Poor lighting or security and a lack of control over personal space and belongings can also trigger feelings of fear and helplessness. Schools and agencies can begin to assess the physical environment by asking the following questions: Is it safe and secure for all (e.g., well lit, well maintained, well monitored)? Is it welcoming to all children and youth, including LGBTQ youth? Do the materials displayed represent the LGBTQ community? Have we identified areas in the physical environment where LGBTQ youth may be most at risk?

Consider these specific strategies for creating a physical environment that supports LGBTQ youth (Poirier, 2012; Poirier et al., 2008; Poirier et al., 2014; American Psychological Association, 2015a):

- Display posters and other images that positively represent the LGBTQ community and indicate a safe space (e.g., rainbow flags, GLSEN safe space sign). See <https://www.nasponline.org/resources-and-publications/resources/diversity/lgbtq-youth/lgbtq-posters-for-example-posters>.
 - Ensure that public spaces include books and magazines that affirm all.
 - In areas that are visible, include lists of supports for LGBTQ youth.
 - Identify specific safety risks for LGBTQ youth (e.g., areas of the school or program) and implement safeguards such as additional monitoring and accommodations, including individual bathrooms or changing areas. Particular considerations for transgender youth include access to safe and adequate restrooms, locker rooms, and changing facilities.
2. **Developing safe and supportive environments and relationships.** LGBTQ youth may enter a school or community agency with past experiences that include being mistreated, ignored, silenced, and rejected by others because of their sexual orientation or gender identity. These experiences negatively affect their willingness to connect with and trust adults. Emotional safety involves feeling protected, comforted, in control, heard, and reassured. Creating an emotionally supportive environment for LGBTQ youth requires strategies that demonstrate respect, reduce the potential for trauma, and build community (Helfgott & Gonsoulin, 2012; Poirier, 2012; Poirier et al., 2008; Poirier et al., 2014; McGuire, Clarke, Anderson, & Russell, 2010; National Association of School Psychologists, 2011).

Demonstrate Respect

- Ensure that youth are not treated differently because of their sexual orientation or gender, and that youth do not receive consequences for their sexual orientation or gender identity.
- Use language that acknowledges a youth's preferred identity.
- Allow transgender or gender nonconforming youth to express their gender identity through clothing and personal appearance, as applicable to the setting.
- Maintain confidentiality and privacy related to a youth's disclosure of personal information about gender identity or expression. This means ensuring that staff know when and when not to disclose a youth's gender identity or expression to others, and that they use this information for planning and decision making.
- Use gender-inclusive language in all event communications, such as for proms or other school events.
- Implement LGBTQ-inclusive curricula (e.g., curricula that include positive representations of LGBTQ people, history, and events). Research suggests that incorporating LGBTQ-inclusive curricula fosters a sense of safety and community and supports peer acceptance (GLSEN, 2011).
- Demonstrate an open, positive attitude in your interactions with LGBTQ youth.

Reduce the Potential for Trauma

- Minimize potential triggers (i.e., reminders of traumatic experiences) in the environment, including situations that reduce choice, control, and connection to adults or peers or perpetuate discrimination and victimization.
- Integrate an awareness of trauma and its impact into all crisis intervention and prevention practices.
- Intervene to stop negative comments based on gender identity or expression.
- Establish a culture where adults demonstrate the belief that bias-related harassment and slurs towards LGBTQ youth are not acceptable.

Build Community

- Provide youth with details on where to go for information and support about gender identity and expression.
- Create safe zones where youth are safe to talk about their gender identity/sexual orientation.
- Establish GSAs—student-led clubs that include all students and offer a safe space in which to access resources, receive support, and address safety issues in their schools and community by building awareness of LGBTQ-related concerns. Research suggests that the presence of GSAs is associated with safer and more positive environments for LGBTQ youth, enhanced self-esteem and pride in LGBTQ identity, and enhanced resiliency and capacity for coping (Poirier, 2012). Youth in schools with support groups for LGBTQ students reported lower rates of suicidal behaviors and victimization (Goodenow, Szalacha, & Westheimer, 2006; Kosciw & Diaz, 2006; Szalacha, 2003; Toomey, Ryan, Diaz, & Russell, 2011).

Domain 3: Provide Trauma-Informed Assessments and Services

The majority of LGBTQ youth do not struggle with significant mental health or adjustment issues. However, they are at increased risk of exposure to trauma and its effects. LGBTQ youth also face a number of barriers to accessing services, which makes the need for a trauma-informed approach all

the more important. Barriers to caring for LGBTQ youth include: (1) prejudice and discrimination at societal and familial levels; (2) providers who lack awareness about resources and LGBTQ-affirming practices and expect youth to identify as LGBTQ to access services; (3) safety issues and lack of awareness about services among LGBTQ youth; and (4) a lack of resources for LGBTQ youth (Acevedo-Polakovich, Bell, Gamache, & Christian, 2011). Considering traumatic experiences and their impact should be a routine part of assessment, service planning, and service delivery for all children and youth, particularly LGBTQ youth. Professionals must also be aware of the unique experiences of LGBTQ youth and tailor their practices accordingly.

Trauma-Informed Assessment Practices for LGBTQ Youth

In trauma-informed schools and agencies, all screening and assessments (e.g., educational assessments, functional behavioral assessments, intake assessments, and psychological assessments) include questions about different types of trauma that youth may experience, including experiences specific to LGBTQ youth. Staff conducting these assessments consider the potential impact of trauma, and all individualized plans consider ways to address trauma if applicable. To ensure quality of care for all, including LGBTQ youth, school and community providers should ensure that all intake forms and screeners include gender-neutral language and offer options for various sexual orientations and gender identity.

Assessments should be conducted in a trauma-informed manner that upholds the core principles of safety, choice, control, and cultural awareness. Strategies for conducting trauma-informed assessments include the following: protecting privacy and confidentiality related to disclosure of personal information, particularly as it relates to sexual orientation and gender identity; offering options regarding who is in the room during the assessment; offering breaks; being aware of body language that may indicate that a youth is feeling overwhelmed; and considering cultural norms and expectations when greeting, engaging, and questioning youth and their families.

Trauma and Diagnoses

Without understanding the connection between trauma and current behaviors, children and youth may be mislabeled as hyperactive, oppositional, shy, spacey, or attention seeking. Mental health providers may misdiagnose a child based on presenting behaviors, and may miss the traumatic experiences that could be the source of the symptoms and the necessary focus of treatment (Cook et al., 2005). Traumatized youth may present with symptoms that are consistent with a diagnosis of attention deficit hyperactivity disorder (ADHD), bi-polar disorder, oppositional-defiant disorder, or reactive-attachment disorder (Cook et al., 2005; D'Andrea et al., 2012).

Trauma-Informed Mental Health Services for LGBTQ Youth

LGBTQ youth face unique and potentially traumatic experiences related to their sexual orientation or gender identity that place them at greater risk of a number of mental health issues, including depression, anxiety, and post-traumatic stress disorder, as well as substance abuse and suicide-related behaviors (Institute of Medicine, 2011; Horvath et al., 2012; Lazear & Gamache, 2012; Roberts et al., 2012). Levels of risk may vary among LGBTQ youth. For example, gender nonconforming youth (i.e., youth whose gender expression does not conform to the stereotypical norms in their culture for their assigned sex at birth) have more relationship difficulties with family members and peers, are at greater risk for physical or sexual abuse in childhood, and have higher lifetime rates of post-traumatic stress disorder (SAMHSA, 2015; Roberts et al., 2012).

Historically, LGBT individuals have reported lower satisfaction with counseling services, and research suggests that negative attitudes towards LGBT individuals among clinicians significantly affect quality of care (Lazear, Pires, Forssell, & Mallery, 2012). Additional practices within the behavioral health system that have compromised care include: (1) labeling same-gender sexual orientation and variations in gender identity and expression as a mental disorder; and (2) employing practices such as conversion therapy in an attempt to change identity or orientation. Mental health professionals should be aware of shifts in practice related to understanding and treating LGBT youth, enabling them to eliminate potentially traumatizing or re-traumatizing practices and adopt current standards of care and best practices for working with a diverse group of LGBT youth. The following links to resources identify guidelines for professional practice with LGBT youth.

Guidelines for Professional Practice With LGBT Youth

APA Guidelines for Psychological Practice With Transgender and Gender Nonconforming People
<http://www.apa.org/practice/guidelines/transgender.pdf>

APA Guidelines for Psychological Practice With Lesbian, Gay, and Bisexual Clients
<https://www.apa.org/pubs/journals/features/amp-a0024659.pdf>

APA Toolbox to Promote Health LGBT Youth <http://www.apa.org/pi/lgbt/programs/safe-supportive/training/toolbox.aspx>

SAMHSA's Ending Conversion Therapy: Supporting and Affirming LGBT Youth
<http://store.samhsa.gov/shin/content//SMA15-4928/SMA15-4928.pdf>

SAMHSA's National Child Traumatic Stress Network LGBT Issues and Child Trauma
http://www.nctsnet.org/sites/default/files/assets/pdfs/safe_spaces_safe_places_flyer_2015.pdf

Best Practices for Professional School Counselors Working With LGBT Youth
<http://dx.doi.org/10.1080/15538605.2013.839331>

Client-centered care for LGBT youth involves: (1) using the strengths of a person-centered approach to adopt the client's perspective, emphasize the notion of self-concept, support the client's ability to understand his or her potential for self-growth, respect the client-directed growth process, and validate identity; (2) working with youth through a guided risk assessment during disclosure; and (3) exposing youth to positive sexual minority communities and socialization with role models from the community (Lemoire & Chen, 2005). Best practices for mental health professionals serving LGBT youth in school or community-based settings are highlighted below (Lazear et al., 2012; SAMSHA, 2015; American Psychological Association, 2012; National Association of School Psychologists, 2011; Goodrich, Harper, Luke & Singh, 2013; American Psychological Association, 2015a, 2015b).

Build Awareness and Knowledge Specific to LGBT Youth

- Understand the factors of human growth and development that are believed to influence and contribute to diverse affectional orientations and gender identity/expression.
- Be aware of the social and cultural diversity that is important to LGBT populations, including ongoing evolution of language, history of oppression/stigma, and historical and systemic barriers faced by this population (including those within counseling settings).
- Understand the intersection of gender identity, race, and other cultural identities.
- Consult with colleagues and supervisors when attempting to create a course of counseling for LGBT youth and their families.
- Provide youth and families with accurate scientific information about sexual orientation and gender identity to make informed decisions.

- Recognize the types of care that may be needed in addition to counseling, including physical, emotional, cultural, spiritual, and financial support.

Adopt Respectful and Affirmative Practices

- Use inclusive language with all children and youth. For example, do not assume a heterosexual orientation when asking questions.
- Ensure privacy and confidentiality is respected and maintained, particularly as it relates to sexual orientation or gender identity.
- Reflect the belief that variations in sexual orientation and gender identity and expression are normal, and that changing sexual orientation or gender identity is not the goal of treatment.
- Support the development of positive helping relationships with LGBTQ youth through affirmation, acknowledgement of discrimination, and collaboration to overcome internalized homophobia and negative attitudes towards one's self.
- Use approaches that focus on developmentally appropriate identity exploration, integration, stress reduction, coping, and family connection.
- Ensure access to trauma-specific mental health interventions designed to address trauma-related responses, where appropriate.
- Incorporate interventions that have been adapted to address the specific trauma-related needs of LGBTQ youth.
- Foster a sense of community and connection among LGBTQ youth.
- Offer group counseling services where applicable to reduce isolation.
- Work to reduce negative attitudes toward LGBTQ youth among families and communities and in schools and agencies.

Tailor Practices to Meet Unique Needs

Client-centered care also requires professionals to tailor their practices to meet the varying needs and experiences of subpopulations of LGBTQ youth. For example, when working with transgender and gender nonconforming youth, professionals should:

- Recognize that gender is a non-binary construct that may not correspond to sex assigned at birth.
- Understand that sexual orientation is distinct from gender identity.
- Examine how attitudes toward and knowledge of gender identity/expression may affect quality of care.
- Understand the role that stigma, prejudice, discrimination, and violence may play in the health and well-being of transgender and gender nonconforming youth.
- Assist in creating affirmative care environments that reduce the influence of institutional barriers.
- Examine ways to promote social change, while helping to reduce the risks associated with stigma.
- Recognize that all youth have individual developmental needs that may or may not persist into adulthood.
- Provide trans-affirmative care.

It is important to remember that not all LGBTQ youth require more intensive mental health services, and that when services are needed, sexual orientation or gender identity is not always the central issue. The majority of LGBTQ youth do not experience negative outcomes and, in many

cases, difficulties do not arise from LGBTQ status itself, but from negative responses within families or communities that are not accepting of sexual and gender minority youth. Adopting a trauma-informed approach ensures that all LGBTQ youth feel safe and supported, and that those with more intensive needs are identified and have access to the highest quality of care.

Adapting Clinical Interventions: Gay Affirmative Cognitive Behavioral Therapy for Sexual Minority Youth

Cognitive behavioral therapy (CBT) is an effective intervention for adolescents with mental health problems. Recently, it has been adapted for sexual minority youth (SMY). Specific components include the following: (1) affirm the identities of SMY during the assessment process; (2) foster collaboration by clearly explaining the treatment process; (3) identify the SMY's personal strengths and support networks; (4) distinguish between problems that are environmental and those that stem from dysfunctional thoughts; (5) validate clients self-reported experiences of discrimination; (6) emphasize collaboration over confrontation, with attention to client-therapist differences; (7) use client-identified strengths and supports to help SMY develop a list of helpful thoughts; and (8) ensure that homework assignments are congruent with LGBTQ culture, as well as the client's stage in the coming-out process (Craig, S. L., Austin, A., & Alessi, E., 2012).

Domain 4: Involve Youth and Families

"I firmly believe that it does not just 'get better.' I am an example of someone who went out of their comfort zone to change their school environment for future LGBT students. I am graduating my high school this year and leaving it a very different place."

—2013 National School Climate Survey (Kosciw et al., 2014)

Involving Youth

Traumatic experiences leave youth feeling helpless, vulnerable, and out of control, and helping youth regain control over their lives is critical to resilience and healing. LGBTQ youth are uniquely vulnerable to experiences that include being marginalized, isolated, and silenced. Trauma-informed schools and organizations consider how to support choice, control, and empowerment in all interactions with LGBTQ youth. Maintaining a youth-driven focus includes providing formal and informal opportunities for LGBTQ youth to have a voice in their schools or service settings.

Strategies for involving LGBTQ youth include the following (Helfgott & Gonsoulin, 2012):

- Include LGBTQ youth on agency boards, advisory groups, working groups, and other decision-making bodies in agencies and schools.
- Adopt mechanisms for seeking regular input from LGBTQ youth, such as suggestion boxes and satisfaction surveys, eliciting feedback when appropriate. Mechanisms should include strategies for gathering feedback that respect issues of privacy and confidentiality.
- Encourage LGBTQ youth to offer suggestions on culturally competent policies, procedures, and practices that agencies and schools should adopt.
- Allow LGBTQ youth to express themselves in ways that best align with their sexual orientation or gender identity.
- Provide safe places and opportunities for LGBTQ youth to express themselves (e.g., support groups, group interventions, GSAs).
- Involve LGBTQ youth in the development of policies, practices, and programming.
- Offer LGBTQ youth a range of options for receiving support, so that they can select the option most suited to their experiences and needs.

- Encourage other LGBTQ youth and adults with similar life experiences to share their stories, provide support to others, and provide input into programming and practice. Examples include: (1) young adults coming to schools to talk with older youth; (2) older youth talking with younger students; and (3) LGBTQ youth or adults who have had similar experiences or challenges talking with youth currently accessing services at a community agency.

Engaging Families

Adult parents or caregivers play a critical role in mitigating the impact of adversity on their children and fostering resilience. Among LGBTQ youth, family acceptance and support helps protect children from potential stressors related to sexual orientation or gender identity. When parents are burdened with their own histories of trauma or become the source of trauma, the effects on children are particularly devastating. Parents may have their own histories of trauma that are inadvertently triggered by interactions with school or agency staff. It is also important to consider the ways in which issues related to a child’s sexual orientation or gender identity may be traumatic for parents, particularly if this goes against their cultural or religious upbringing or beliefs. Given the risk of trauma resulting from family rejection among LGBTQ youth, engaging families and helping them support their LGBTQ children is critical to success (SAMHSA, 2014b).

“My biggest worry right now is my dad. Everyone else knows I’m transgender except for him. I’m afraid he’s going to have a bad reaction. The fear is that my dad’s not going to accept me. I feel like I have to lie and I don’t like that. I’m gonna work my way up to my dad. Maybe try hinting at him.”
 —Vicente (Young, 2011)

Trauma-sensitive schools and agencies find ways to educate parents about trauma and its impact, key factors to support resilience, and the mission to create trauma-informed environments. This includes creating opportunities for parents to contribute to this mission and learn how to support their children’s academic and social-emotional development. Adopting a trauma-informed approach to working with parents who may have experienced trauma involves being flexible, maintaining a respectful and empathic tone, and ensuring that parents understand what is happening and have opportunities to give their opinions. Even how a meeting room is arranged and how people are seated can send messages about physical and emotional safety and power dynamics. Trauma-sensitive schools and agencies also consider cultural factors when engaging with youth and their families, such as how to greet families; what topics may be difficult to address; what a staff member does or does not know about a family’s cultural norms, values, or beliefs; and a particular group’s experiences with systems including education and behavioral health.

Specific strategies for engaging with families of LGBT youth, as identified by the Family Acceptance Project, include the following (Ryan, 2009a; Ryan, 2009b; SAMHSA, 2014; Ryan & Diaz, 2011):

- Meet families where they are.
- Let parents and caregivers tell their story.
- Educate parents and caregivers about the development of sexual orientation and gender identity.
- Educate families on the important role they play in protecting and supporting their LGBT child.
- Provide additional resources.
- Assess the level of family rejection.
- Help families identify supportive behaviors and language.

- Work to support even small positive changes or adjustments among families who are more ambivalent toward or are rejecting of their child's gender identity or sexual orientation.

Learn more about the Family Acceptance Project here and access resources and tools to help support LGBTQ youth and their families: <http://familyproject.sfsu.edu>.

Parents and Friends of Lesbians and Gays (PFLAG) provides resources to support families with LGBTQ children. With chapters across the country, PFLAG is a valuable resource for providers and educators looking to support youth and their families. Visit the PFLAG website to learn more: <https://www.pflag.org>.

Domain 5: Promote Trauma-Informed Procedures and Policies

"I think that they should make it a policy—intervening at least. Even though some people might not agree with being gay, it's like their words are still hurting somebody and it's putting somebody in the classroom, you don't know who it could be, in an unsafe feeling. And at school that's just not, anywhere, not okay. People are people and they deserve to feel safe and to be equal to other people."
—Amanda (Young, 2011)

Awareness of the experiences and needs of LGBTQ youth has implications for the types of policies and procedures that agencies and schools adopt. Trauma-informed schools and organizations establish policies and procedures that are aligned with the core principles of trauma-informed care, and they regularly examine existing practices in an effort to eliminate those that are re-traumatizing. Potentially re-traumatizing practices for all trauma survivors, including LGBTQ youth, include creating rigid, punishment-driven environments; employing harsh approaches to discipline or programming that mimic abusive experiences; adopting crisis intervention practices or emergency procedures that are further traumatizing; treating youth disrespectfully; and establishing policies that minimize youth voice, choice, and control.

As schools and community agencies learn more about the experiences of LGBTQ youth, policies that were once effective may no longer be as helpful or relevant. Continued review of policies and procedures is required, and it should be done with staff, student, and parent input. When reviewing individual policies and procedures, organizations and schools may begin by asking the following questions: (1) Is this policy or rule necessary? (2) What purpose does it serve? (3) Who does it help? (4) Who does it hurt? (5) Does the policy facilitate/hinder inclusion and control for LGBTQ youth? (6) Were LGBTQ youth included in its development? (7) Could this policy or rule re-traumatize LGBTQ youth or their families (e.g., limit control and choice and lead to fear and confusion)? Asking and answering these questions can allow organizations to determine whether existing policies should be changed or eliminated and if new policies should be included.

Here, we offer examples of trauma-informed policies and procedures for supporting LGBTQ youth, along with processes for ensuring policies are fully adopted and adapted as needed (Helfgott & Gonsoulin, 2012; Poirier et al., 2008).

Trauma-Informed Policies and Procedures for LGBTQ Youth

- Develop a mission and vision statement committing to trauma-informed care and acknowledging the specific needs of LGBTQ youth.

- Adopt nondiscriminatory policies that explicitly include sexual orientation and gender identity/expression.
- Establish a system for reporting and responding promptly to acts of discrimination, harassment, disrespect, and bullying.
- Integrate discipline practices that involve proactive planning; understanding the reasons behind behaviors; holding students accountable but in clear, understandable, and respectful ways; minimizing isolation and disconnection from the community; implementing positive behavioral supports; and modeling respectful, nonviolent relationships and restorative practices.
- Develop policies for when and when not to disclose a youth's sexual orientation or gender identity to outside parties, organizations, family members, or other individuals.
- Specify how staff will use information on sexual orientation or gender identity for planning and decision making.

Quality Assurance and Evaluation Processes

- Develop a process for ongoing agencywide or schoolwide assessment of current practice and readiness to support LGBTQ youth. For a sample assessment for schools see: https://www.nasponline.org/assets/Documents/Resources%20and%20Publications/Resources/Diversity/LGBTQ/School_Building_Transgender_and_Gender_Diverse_Readiness%20Assessment_-_updated_District_and_School.pdf
- Develop a continuous quality-improvement loop designed to ensure adequate support for LGBTQ youth. Sample questions to guide this process include the following: (1) What has the agency/school done to promote and infuse competence in serving and supporting LGBTQ youth and their families? (2) What are the agency/school's outcomes for this population (e.g., emotional well-being, academic success, attendance)? (3) What challenges has the school/agency encountered in meeting the needs of LGBTQ youth and their families? How have these been addressed? (4) What action steps are necessary to address the issues identified through the agency/school self-assessment process?
- Track how many LGBTQ youth are served where possible.
- Monitor and assess outcomes among LGBTQ youth.
- Include LGBTQ youth in the development and review of policies and procedures to ensure they are responsive to their needs.
- Ensure that all staff enforce nondiscrimination policies.

See the Department of Education's Office of Safe and Healthy Students' *Examples of Policies and Emerging Practices for Supporting Transgender Students* to learn more about specific strategies for meeting the unique needs of transgender youth in schools (<http://www2.ed.gov/about/offices/list/oese/oshs/emergingpractices.pdf>).

Domain 6: Collaborate Across Sectors

Exposure to trauma is a common denominator across youth-serving systems such as behavioral health, education, child welfare, homelessness, and juvenile justice. LGBTQ youth exposed to trauma often have complex needs that cross multiple service sectors, and collaboration and integration of care across service systems is a key component of trauma-informed care. When one system is trauma-informed but another is not, there is likely to be a discrepancy in quality of care that can compromise success for youth. For LGBTQ youth, a negative experience in one system erodes trust and decreases the likelihood that they will seek out additional support in any service settings.

Providers looking to deliver the highest quality care for LGBTQ youth must commit to ensuring that all systems understand the unique needs of this group.

Strategies for collaborating to serve LGBTQ youth across sectors include the following (Lazear et al., 2012; Helfgott & Gonsoulin, 2012):

- Establish a shared commitment to supporting LGBTQ youth.
- Ensure consistent language and a consistent level of understanding and support for LGBTQ youth across service systems.
- Support cross-system awareness and knowledge building related to trauma and its impact on LGBTQ youth.
- Foster a shared commitment to improving outcomes for LGBTQ youth across youth-serving systems.
- Promote consistent policies and practices across youth-serving systems (e.g., nondiscrimination policies, affirmative services and supports).
- Share resources across service sectors.
- Create partnerships with providers in the community who specialize in LGBTQ youth.
- Help youth connect to and navigate various service settings.

III. Next Steps for Schools and Organizations

Understanding a Trauma-Informed Approach as Systems Change

Adopting an agencywide or schoolwide approach to addressing trauma requires changes across all levels of the system, so that everyone shares a similar vision of how to engage with youth in ways that consider the potential impact of trauma and foster resilience. This includes making changes to observable practices and policies, and, most importantly, to the underlying school or organizational culture that drives much of what happens day to day.

School or organizational culture encompasses (1) beliefs about what it means to support youth and which practices are most effective; (2) beliefs about youth and the mission of the school or agency; (3) the degree of understanding of the youth served, such as cultural background and life experiences, including exposure to trauma; (4) the quality of relationships and communication among staff; (5) the degree of trust within the school or agency; (6) flexibility and openness to change; and (7) the value placed on staff development. Underlying assumptions about “the way we do things here” will affect the success of any new effort, including adopting a trauma-informed approach. In Part 1 of this two-part series, we outlined the core principles of a trauma-informed approach. These principles include the following:

1. Understand trauma and its impact.
2. Believe that healing happens in relationships.
3. Ensure physical and emotional safety.
4. Support choice, control, and empowerment.
5. Strive for cultural competence.
6. View youth holistically.
7. Use a collaborative approach.

In some settings, these principles align with existing culture, but for many others this represents a significant shift from a more punitive, one-size-fits-all, staff-driven approach to a model that is flexible, individualized, and youth- and family-driven. It is important to acknowledge this shift at the

beginning of the change process. A trauma-informed approach can be unsettling and even threatening for some staff, and the changes require a level of communication and trust that may not exist in some settings. When the core beliefs of the staff do not align with the core values of a particular intervention, buy-in and successful adoption and sustainability is jeopardized. Systems change is unlikely to take hold without addressing fundamental assumptions and beliefs, and acknowledging these unspoken dynamics can move the system toward deeper levels of shared vision and commitment, setting the foundation for long-term systems change.

Steps for Integrating and Sustaining a Trauma-Informed Approach

Youth-serving settings interested in adopting a trauma-informed approach in general, and for LGBTQ youth in particular, can take the following steps to support systems change:

1. **Educate leadership and staff.** Staff training builds a common awareness and understanding of trauma and trauma-informed care, with the goal of increasing buy-in to the change process. Training *all* staff and volunteers in a school or agency ensures a common understanding and consistent responses. This includes training on the particular experiences of LGBTQ youth.
2. **Establish a trauma work group.** Work group members should represent staff in different roles across a school or agency who commit to championing this process. Establishing a multidisciplinary work group enhances staff buy-in and ensures all voices and perspectives are represented throughout the change process. The work group should be representative of the larger school community or agency and should include youth and family voices.
3. **Assess current practice and identify goals.** Organizations and schools should assess current practice related to trauma-informed care and identify short and long-term goals for embedding this approach schoolwide or organization-wide. This includes identifying goals for supporting the unique needs of particular groups, such as LGBTQ youth.
4. **Adopt and sustain trauma-informed practices.** Schools and organizations should adopt trauma-informed practices across the core domains of daily practice. Processes for sustaining change include developing a training that is used as a yearly refresher for all and for every new hire; integrating trauma language and applying concepts in some way at all department meetings, all staff meetings, and during individual supervision sessions; and adopting trauma-informed policies and procedures that reinforce culture change.
5. **Address unique accessibility issues for LGBTQ youth.** Schools and organizations should address the societal, provider-level, youth-level and resource-related barriers that may prevent LGBTQ youth from accessing and leveraging support from youth-serving organizations. Such barriers may include a lack of affirming practices, youth fears regarding safety, transportation and financial access issues, and issues related to societal stigma and discrimination (Acevedo-Polakovich et al., 2011). Providers and educators must be aware that due to previous victimization, experiences with rejection, or fear of rejection, LGBTQ youth may have anxiety around social interactions that could limit their ability to form the close and trusting relationships needed within a therapeutic or educational milieu (Safren & Pantalone, 2006)
6. **Evaluate impact.** Schools and agencies should clearly document changes and evaluate the impact of adopting trauma-informed care, including the impact on particular groups, such as LGBTQ youth. Specific methods of data collection should be formally identified as part of the strategic plan. Quantitative data may be collected through methods such as surveys, record reviews, and analysis of existing program data, or through proxy organizational

climate scales. Qualitative information can be collected through focus groups and interviews with consumers and staff, observations, and case studies.

Additional resources for supporting trauma-informed systems change in a range of youth-serving settings are included here.

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Conclusion

All youth-serving systems share a common mission to support positive youth development and future success. This mission is achieved in many different ways, including fostering academic achievement, providing quality health care, ensuring access to behavioral health services, and supporting family safety and stability. As health and social service systems and schools learn more about the negative consequences of childhood trauma for individuals, communities, and society as a whole, the need to address this public health issue is growing. Trauma-informed youth-serving systems seek to remove trauma as a barrier to success by cultivating environments where youth can be most fully and authentically themselves. This mission is vital for supporting LGBTQ youth, who so often experience additional trauma within their schools and communities. Adopting a universal approach to preventing and addressing trauma is a critical step on the journey toward a fully integrated system of care that supports all youth to lead their healthiest, happiest, most fulfilled lives.

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