Support Groups with Gay, Lesbian, Bisexual, and Transgender Youth in Schools

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Support Groups with Gay, Lesbian, Bisexual, and Transgender Youth in Schools

Submitted by Marisa A. Biolo
May 2012

MSW Clinical Research Paper

The Clinical Research Project is a graduation requirement for MSW students at St. Catherine University/University of St. Thomas School of Social Work in St. Paul, Minnesota and is conducted within a nine-month time frame to demonstrate facility with basic social research methods. Students must independently conceptualize a research problem, formulate a research design that is approved by a research committee and the university Institutional Review Board, implement the project, and publicly present their findings. This project is neither a Master’s thesis nor a dissertation.

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Abstract

Gay, lesbian, bisexual, and transgender (GLBT) youth are in need of school support groups given their higher risk for mental health issues, sexual risk taking behaviors, eating disorders, substance use, victimization, and more. The current study examined the use of school support groups with GLBT youth. The researcher gathered qualitative data about GLBT school support groups from the Twin Cities metro in the state of Minnesota. Data were collected from four school social workers and one teacher, who all have experience facilitating GLBT support groups. The major themes that emerged from this study were risk factors, group effectiveness, sense of community, sense of trust, honesty, and group safety, and personal growth and confidence. Risk factors seen in students identifying as GLBT were greatly discussed in the interviews. Overall, participants felt that support groups for GLBT youth are effective, and that trust, honesty, and group safety helps a group be effective. Additionally, being part of a GLBT support group provides students with a sense of community and helps them grow emotionally, socially, and personally. Therefore, school support professionals should consider implementing GLBT support groups in their schools, and social workers around the nation should advocate for safe school laws. Future studies should strive to examine this topic more extensively with the use of a larger sample from urban and rural communities, as well as student input.
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Support Groups with Gay, Lesbian, Bisexual, and Transgender Youth in Schools

Gay, lesbian, bisexual, and transgender (GLBT) adolescents often struggle to manage the stigma attached to their sexual and/or gender identity, which often results in social, behavioral, and health consequences. The stigma, then, may be manifested behaviorally. It may also increase high-risk behaviors (e.g. substance use) and escalate mental health distress (Ryan and Futterman, 1998). To address and comprehend how GLBT issues unfold in schools, The Gay, Lesbian, Straight Education Network (GLSEN) has been conducting National School Climate Surveys since 1999. GLSEN is the leading national organization that strives to develop safe and positive school environments for all students, particularly those who identify as GLBT.

GLSEN (2010) conducted a National School Climate Survey in 2009, comprised of 7,261 middle and high school students between the ages of 13 and 21 identifying as GLBT. According to GLSEN, since 1999, there has been a decline in the amount of incidences of students hearing homophobic remarks. However, they have also found that GLBT students’ experiences with more serious forms of bullying have remained consistent throughout the years. In their survey, GLSEN (2010) reported that nearly nine out of 10 students identifying as GLBT have endured some sort of harassment at school within the last year.

GLSEN (2010) found that almost two-thirds of students identifying as GLBT disclosed feeling unsafe at school due to their sexual orientation, and over a third felt unsafe due to their gender expression. They also found that almost 85% of GLBT students were verbally harassed, 40% were physically harassed, and nearly 19% were physically assaulted in the last year due to their sexual orientation. In terms of attendance,
29.1% of GLBT students missed a class, while 30% missed *at least* one day of school because of safety issues. Additionally, students who were more frequently harassed due to their sexual orientation and/or gender expression expressed grade point averages nearly a half grade lower compared to those who were less frequently harassed. Conversely, GLSEN also found that the existence of supportive staff was more likely to lead to fewer absences and accounts of feeling unsafe, higher academic achievement and educational goals, and a greater sense of school belonging (GLSEN).

Given the alarming statistics related to GLBT youth and the increased media attention given to anti-gay bullying and suicides, it is evident much more needs to be done locally, nationally, and globally for this population. However, the amount of research regarding social support, specifically the use of support groups for GLBT youth, is limited. Therefore, the research question that this study will address is, “Are school support groups beneficial to gay, lesbian, bisexual, and transgender youth?” The significance of this study is to recognize the overall concerns of GLBT youth risks and the supportive services that have been available in the past and present, as well as how support can be improved in the future for this population.

**Literature Review**

This literature review will examine the risk factors related to GLBT youth, in addition to the implementation of support services available to them. Today, research regarding GLBT youth and their *healthy* development is limited. Therefore, much of the scholarly research conducted on GLBT youth examines their risk factors, such as suicidality, sexual behaviors, substance use, victimization, and more. However, for this study, the strengths perspective will be used as the conceptual framework to incorporate a
more optimistic viewpoint. The strengths perspective will be discussed after the literature review.

**Mental Health**

Much of the research regarding GLBT identity and risk factors examine the mental health disparities within this vulnerable population. These risk factors are disproportionately high amongst those who identify (or are perceived as) GLBT. For instance, researchers have examined mental health among this particular population and have found that they are at a higher risk for depression, anxiety, hopelessness, suicidal ideation, and suicide attempts (Fergusson, Horwood, & Beautrais, 1999; van Heeringen & Vincke, 2000; Bontempo & D’Augelli, 2002; Saewyc, Skay, Hynds, Pettingell, Bearinger, Resnick, & Reis, 2007) compared to their heterosexual peers.

In a study examining suicide risk and sexual orientation in Minnesota students grades seven through 12, Remafedi, French, Story, Resnick, and Blum (1998) reported that 28.1 percent of homosexual or bisexual males attempted suicide at least once during their lives, compared to only 4.2% of heterosexual males. The researchers also found that 20.5% of homosexual or bisexual females attempted suicide at least once during their lives, compared to only 14.5% heterosexual females. More recently, *The New York Times* (2011) reported that there were eight suicides in the Anoka-Hennepin school district in Minnesota during the past two years, where four of these students identified as gay or bisexual dealing with harassment.

**Sexual Behaviors**
Adolescence is not only a critical time for physical and cognitive development due to puberty, socialization at school, growing self-awareness, and more, but also for one’s sexual development—especially for those enduring the challenges of sexual identity and gender expression that may not reflect cultural norms. Research has shown that sexual minority adolescents are more likely to engage in sexual risk taking, such as having more sexual partners, compared to heterosexual adolescents (Blake, Ledsky, Lehman, Goodenow, Sawyer, & Hack, 2001). Research also suggests that sexual minority youth engage in heterosexual experimentation behaviors in order to avoid or deny being labeled as GLBT (Saewyc, Bearinger, Blum, & Resnick, 1999). Additionally, Goodenow, Szalacha, Robin, and Westheimer (2008) found that sexual minority youth were just as likely to engage in sexual intercourse compared to heterosexual peers. Research has also shown that sexual minority youth are at a higher risk for teenage pregnancy compared to those who identify as heterosexual (Saewyc, Pettingell, & Skay, 2004; Saewyc, Poon, Homma, & Skay, 2008).

**Body Satisfaction and Eating Behaviors**

Research is growing continuously in the area of body satisfaction and eating disorders in the GLBT population, particularly with males. Body dissatisfaction and risk for eating disorders are important issues to consider because they may lead to medical and psychiatric complications (Grilo & Mitchell, 2009). In their study of 34,196 students (homosexual, bisexual, and heterosexual) aged 12-20 in Minnesota, French, Story, Remafedi, Resnick, and Blum (1996) discovered that homosexual males were more likely than heterosexual males to report a poorer body image. Additionally, homosexual and bisexual males were nearly twice as likely to report binge eating and purging behaviors.
Conversely, homosexual females were more likely to report a positive body image compared to heterosexual females. Homosexual females were also less likely to see themselves as overweight compared to heterosexual females.

**Substance Use**

GLBT individuals are also at a higher risk for substance use and abuse compared to heterosexual individuals. Through their meta-analysis of 18 studies, Marshal, Friedman, Stall, King, Miles, Gold, Bukstein, and Morse (2008) found that lesbian, gay, and bisexual youth were more likely to report higher rates of substance use (tobacco, alcohol, illicit drugs) compared to heterosexual youth. Other studies have also found higher rates of substance use among sexual minority youth (Savin-Williams, 1994; Fergusson, Horwood, & Beautrais, 1999; Bontempo & D’Augelli, 2002).

**Victimization**

Previous literature has also focused on GLBT risks in relation to their experiences at school. These risks are greatly due to social and cultural fears related to sexual and gender identity, which often leads to student bullying, teasing, and violence from non-sexual minority students. Bontempo and D’Augelli (2002) studied the relationship between victimization at school and health-risk behaviors using data comparing lesbian, gay, bisexual, and heterosexual youth. In their study of 9,188 students, 315 of these students identified as lesbian, gay, or bisexual. The authors found that victimization was disproportionately related to lesbian, gay, bisexual, or questioning (LGBQ) status. Further, they found LGBQ youth who experienced lower levels of victimization were comparable to their heterosexual peers in terms of engaging in substance use, sexual risk
behaviors, and suicidality, while LGBQ youth who experienced higher levels of victimization reported more instances of substance use, sexual risk behaviors, and suicidality compared to their heterosexual peers.

According to GLSEN (2010), about 19% of GLBT students reported that they had been physically assaulted at school in the past year due to their sexual orientation and about 13% due to gender expression. GLSEN also found that nearly 72% of the students reported hearing homophobic statements, such as the term “faggot.” Furthermore, it was reported that higher levels of victimization were associated with higher levels of depression and anxiety, and lower levels of self-esteem (GLSEN).

Throughout this analysis of risk factors in sexual minority youth, there is no doubt that this is a population needing support services. Because the school milieu is a central point of adolescent development, examining interventions employed within schools is imperative. Therefore, the following section will review what school interventions have been put into place to help GLBT students be successful and healthy in their academic and personal lives.

Interventions

Gay/Straight alliances. One intervention employed today in schools is Gay/Straight Alliances (GSAs). GSAs are student-led clubs that provide support, education, and advocacy for students who identify as gay, lesbian, bisexual, transgender, or straight. The first GSA was formed in 1988 by a student who identified as heterosexual (GLSEN, 2011). Today, over 4,000 GSAs are registered with GLSEN (2011) and this number is continuously growing.
GLSEN (2010) found that having a GSA present in school was associated with more favorable outcomes for students. Walls, Kane, and Wisneski (2010) found that the existence of GSAs in schools has a positive effect on sexual minority individuals, whether or not the individual was a member of the club. This result was also reported in a study conducted by Heck, Flentje, and Cochran (2011), which found that GLBT students who attended a high school with a GSA reported more favorable outcomes related to school experience, use of alcohol, and psychological hardships. School-based arrangements, such as GSAs, can provide a safe space for GLBT youth to spend time with their peers as well as increase social support (Jordan, 2000).

**Support groups.** Support groups are an intervention that schools have begun to utilize for sexual minority youth. However, there is limited research concerning GLBT support groups within schools, particularly social work support. In general, research has shown the effectiveness of groups in school settings. For instance, Gerrity and Delucia-Waack (2007) reviewed current literature, including meta-analyses, related to group work in schools with topics such as eating disorders, bullying and anger management, child sexual abuse and pregnancy prevention, and social competency. Throughout their research, they found that groups, overall, were effective in schools. More specifically, prevention and early intervention were found to be most favorable. Additionally, Prout and Prout (1998) conducted a meta-analysis regarding counseling and psychotherapy in schools, with most treatments being group interventions. They found the interventions to be successful, with group interventions displaying high efficacy.

Research is limited regarding support groups with GLBT youth. Goodenow, Szalacha, and Wesheimer (2006) used data from the Massachusetts Youth Risk Behavior
Survey (MYRBS), matched with school-level information from the Massachusetts Department of Education and school principals. Comparing 202 adolescents, the researchers found that the existence of school support groups for lesbian, gay, and bisexual (LGB) students was related to greater safety in the school and lower rates of victimization and suicidality. They also discovered that peer-support groups, nonacademic counseling, anti-bullying policies, and staff trainings on sexual harassment were associated with lower victimization and suicidality.

Uribe (1994) discussed a Model School Program she started in 1984 called Project 10. Project 10 provides a focus in education, suicide prevention, a decrease in verbal and physical abuse through the use of adult-facilitated workshops and school support groups for sexual minority youth. The Project 10 support groups intend to improve self-esteem and endow affirmation to those students experiencing challenges due to their sexual identity and/or gender expression. The groups average about 10-12 students, with about 65% of the members being male and with all ethnicities reflected. The groups are voluntary and students are made aware of these groups through signs around the school, word-of-mouth, and referrals from school staff. Additionally, the groups meet about once a week at different times of the school day, and are usually co-facilitated by one female and one male. Uribe (1994) also addressed that students utilizing these groups have social, family, and/or personal problems that negatively impact their academic work. Essentially, the Project 10 groups provided a safe environment for students to openly address these barriers.

Uribe (1994) noted that despite criticism that the Project 10 groups promote homosexuality, they have been found to be helpful. Reports from the students
participating in Project 10 have indicated that the groups are beneficial and empowering. Furthermore, school success was also measured by improved attendance, grades, and relationships with family members for those students who participated in a Project 10 group (Uribe, 1994). Thus, school support groups for GLBT youth provide a more therapeutic and supportive focus, whereas GSAs tend to be more education and advocacy oriented. Nonetheless, both GSAs and school support groups have been found to be related to greater safety (Goodenow, Szalacha, & Wesheimer, 2006).

Toseland and Rivas (2009) address that there are six purposes for treatment groups: support, education, growth, therapy, socialization, and self-help. Support groups are different from other treatment groups by their fundamental goals: to foster mutual aid, to help members cope with difficult life events, and to reinvigorate and increase members’ coping abilities so they can successfully adjust to and cope with future stressful life events. Support groups are characterized by a facilitative approach from the leader that encourages group members to share their experiences in coping with a stressful life event. Because of the members’ collective shared experiences, emotional ties frequently develop in support groups. However, the dynamics developed in a group depend on four aspects: communication and interaction patterns, cohesion, social integration and influence, and group culture (Toseland and Rivas).

Although there have been efforts to help make schools more supportive and safer for sexual minority youth, the research regarding these support services—specifically school support groups—is limited. Therefore, this is an area needing further research. Adolescence is a time of transformation, exploration, and the beginning of a life-long discovery of one’s unique identity in society. In order to foster a supportive and healthy
development, it is imperative to examine the support services available—as well as their effectiveness—to GLBT youth.

**Conceptual Framework**

The purpose of this section is to identify the lens through which this study has been carried out. The conceptual framework is essentially the researcher’s theoretical view of the main themes observed in the study. Additionally, it influences how the researcher views the research question, as well as the interview questions. For this study, the researcher has chosen the strengths perspective as the theoretical framework.

**Strengths Perspective**

The strengths perspective provides an alternative approach to viewing individuals, families, and communities to the traditional “pathology-oriented” approach. Its purpose is to recognize clients’ strengths, hopes, talents, possibilities, and more, rather than attending to the negative aspects of one’s life (Saleebey, 1996). While the social work field has acknowledged client strengths for some time, many social workers have the propensity to emphasize client problems and pathologies. The strengths perspective posits that all individuals have talents and skills, which, in turn, allow each individual to grow and improve (Weick, Rapp, Sullivan, & Kisthardt, 1989).

Saleebey (2006) maintained that the strengths perspective is neither a model nor a theory, but a “lens” through which we view and comprehend experiences. Additionally, he addressed six principles—though provisional and still developing—which help guide the strengths perspective. The first principle is that the all individuals, groups, families, and communities have strengths and resources that should be utilized. The second
principle is that individuals should see their hardships (e.g. illnesses, trauma, or struggles) as an opportunity. The third principle addressed is that professionals should maintain high expectations of their clients and show consideration for their goals, hopes, and values. Furthermore, the fourth principle recommends that professionals should work together with their clients. The fifth principle proposes that every environment is overflowing with resources that can provide support and possibilities, even if the environment is seen as unfavorable. The last principle states that all individuals, families, and communities should care for one another.

Utilizing the strengths perspective, however, does not disregard the challenges that clients endure. Miley, O’Melia, and DuBois (2011) addressed seven assumptions of the strengths perspective social workers agree with:

1. Acknowledge that clients have existing reservoirs of resources and competencies to draw upon
2. Recognize that each client has a distinct capacity for growth and change
3. Define problems as occurring within the transactions between systems rather than residing in deficient system functioning
4. Hold that collaboration augments existing strengths to build new resources
5. Affirm that clients know their situations best and, given options, can determine the best solutions for their challenges
6. Maintain that positive change builds on a vision of future possibilities
7. Support a process to magnify mastery and competence rather than correct deficits (p. 75)
Thus, social workers employ the resources and opportunities available within the environment to help further healthy and successful development in their clients.

The strengths perspective has influenced the researcher in believing that every client, no matter how problematic his or her experiences are, has the ability to learn about and comprehend the difficulties. This, in turn, gives clients the confidence to grow and improve from the unfavorable experiences in an optimistic manner. In this study, the strengths perspective approach will influence the researcher’s interview questions.

**Method**

**Design**

This study addresses the question, “Are school support groups beneficial to gay, lesbian, bisexual, and transgender youth?” The method that was used to analyze this question was a qualitative interview with school social workers and a teacher in the state of Minnesota. A qualitative method was chosen for this project not only because of its exploratory nature and its focus on words, images and descriptions (Berg, 2009), but also because of its emphasis to understand people, groups and organizations within the environment they inhabit (Monette, Sullivan, & DeJong, 2011).

**Sample**

Purposive sampling was used in this study. An email was sent to the president of the Minnesota School Social Workers Association (MSSWA), inviting school social workers with experience facilitating GLBT support groups to participate in an audi-taped interview with the researcher. The president then sent the email to all regional
representatives, who then sent it to all members in their region. Because only two school social workers responded, snowball sampling was also used to gather participants. The sample of this study includes four school social workers and one teacher from the Twin Cities Metro in state of Minnesota. All respondents were female, have had experience facilitating GLBT support groups, and currently facilitate groups at the high school level. The years of experience facilitating support groups ranged from 1-15 years. A limitation to using purposive and snowball sampling is that they are nonprobability samples; therefore, they are not generalizable to the whole population. Without the use of probability in selecting participants for this study, no real claim of representativeness can be established.

**Measurement**

The researcher developed the following questions; thus, no reliability and validity have been established. However, the questions are simple, unambiguous, and, at face value, appear to measure what is being asked. Additionally, the questions were read over by the professor for reliability and validity purposes. Questions are also listed in Appendix A.

1. What is your professional background?
2. What age group do you work with?
3. How long have you been facilitating GLBT groups?
4. What type of intake process do you use for the GLBT group?
5. Do you use a particular model to guide your group work with GLBT students?
6. What are the benefits to facilitating a GLBT group?
7. What helps a group be effective?
8. How do you measure if a group is beneficial?

9. Do you personally feel GLBT groups are effective? If so, why?

10. Do you think every secondary school should offer GLBT support groups?

11. What risk factors do you see in your clients identifying as GLBT?

12. In what ways have these risk factors affected their academic and personal lives?

13. For those students joining the support group, what other supports exist in their lives?

14. How have you seen your clients grow by being involved with a GLBT support group?

15. How do you foster strengths in your students identifying as GLBT?

16. Have your clients improved socially and academically by being a part of a GLBT group? If so, how?

**Human Subject Safeguards**

Before starting an interview, the researcher handed out the University of St. Thomas Institutional Review Board (IRB) consent form to the respondent (See Appendix B). The researcher also answered any questions from the respondent before he or she signed the consent form. Additionally, the researcher went over the research process with the participant before beginning the interview. The interviews were audio recorded and only the researcher has access to the recordings and notes. All data were destroyed after the data had been analyzed. Furthermore, the participants were informed that there were no risks or benefits to participating in the study, as well as that they had the right to withdraw from the study at any time.

**Data Analysis**
Questions in the interview were developed based on the strengths perspective and findings of the literature review. An interview was set up with the respondents via email or telephone after the project was approved by the IRB. The interviews took place at the respondent’s school office or over the telephone in a private room in the researcher’s home. The interviews with the respondents were audio recorded and lasted about 30 minutes, and were then transcribed onto a computer.

Open coding was used to analyze the data. All interviews were read over several times by the researcher to determine common themes. The data were read over two more times by the researcher to determine if there were any patterns, or if any of the concepts tied together.

**Findings**

As previously stated, questions in the interview were developed based on the findings from the literature review. Throughout the transcribed interview, several themes emerged: risk factors, group effectiveness, sense of community, sense of trust, honesty, and group safety, and personal growth and confidence.

**Risk Factors**

Risk factors were one of the themes identified when the data were analyzed. All participants believed that students identifying as GLBT were more likely to have risk factors and/or engage in risk taking, compared to those who identify as heterosexual. Many risk factors mentioned throughout the interviews were concerned with students’ school experiences, such as academic failure, school tardies and truancy, and bullying. Risk factors related to mental health were also mentioned, which included depression,
anxiety, low self-esteem, self-harm behavior, and suicidality. Other risk factors addressed were homelessness, drug and alcohol use, sexual risk-taking, and relationship violence. Thus, there are various risk factors related to GLBT youth, which can have detrimental effects in students’ academic, emotional, and personal lives. The following quotes from two respondents illustrate the risk factors they have seen in their students:

*I think students are kind of at risk for the obvious things. There are some mental health issues, such as depression, that they can be more at risk for. Because at some point, a lot of those kids are forced to contain a part of themselves, and that can be difficult on their mental health, so this can create the risks of self-harm or suicidal thoughts. I think because some kids don’t have a safe place to talk, it comes out in other places such as dysfunctional behavior. A lot of these kids are at risk for academic failure since they aren’t focusing in school, as this issue can get so big in their lives.*

Another participant responded with the following:

*A number of kids had attendance issues and when we boiled it down, a lot of kids didn’t feel safe at school--they had been teased and bullied. The students would avoid school, or would take unusual walking paths to get to class, so they would have a lot of tardies. I also saw that a number of kids did not have good grades because the class wasn’t inclusive about who they were, or the teachers weren’t very supportive of who they were, so the students didn’t feel really safe…I also saw sexual risk taking, some of the schools did not have comprehensive sex education, especially to GLBT youth. Some of them who did not have that*
education were having unprotected sex. They also didn’t have healthy
relationships modeled and supported.

**Group Effectiveness**

All participants answered “yes” when asked the question, “Do you personally feel GLBT groups are effective?” Group effectiveness, however, was described differently between participants. The first participant felt the groups were effective because they provided students a place to talk to others, gave them the opportunity to feel validated, and that there are people in the school that support them. The second participant felt that GLBT groups were very effective if the members could create mutual support and camaraderie. The third respondent believed the groups were effective since she was able to see the students gain more confidence, as well as earning better grades, having better attendance, and feeling more connected to the school. Furthermore, the fourth respondent stated that the groups were beneficial since it provided extra support to the students. The last participant felt that offering a support group was effective enough, as it gave extra support to the students identifying as GLBT. The following quotes demonstrate the participants’ beliefs about the effectiveness of GLBT support groups:

*Yes I think these groups are effective. For a lot of these kids, they have no one else to talk to, maybe a couple of friends...It is very important for the kids to feel validated. They need to know that there are people within the school community that support them, and have their best interests in mind when it comes to safety & education. If we have students who come into school feeling unsafe and not validated for who they are, everything suffers: their academics, their emotional well-being...and their spirit is broken.*
Another individual stated:

Yes, I have seen the students’ self confidence grow by joining the group...They also develop trust in themselves...They also have better grades, better attendance, and feel more connected to the school.

**Sense of Community**

The theme of community was addressed at different points during the interviews. All participants felt that GLBT support groups provided students a sense of community (i.e. the students were able to see that there were other students like them). Specifically, the support group provided a safe and supportive place for students to talk openly as well as be themselves. The following quotes exemplify the theme of community:

...The kids...developed a sense of camaraderie with the other GLBT kids in their school...and they also developed an ability to where they could challenge each other on things respectfully once they got to a comfortable level. I think the group helped them develop healthy dynamics in ways that could allow them to form relationships and support each other.

Another individual responded with the following:

Biggest benefit, hands down, is that kids who have explored or are exploring, have other people who are similar to them...

**Trust, Honesty, and Group Safety**

Trust, honesty, and group safety were themes that emerged at several points during the interviews, particularly when asked, “What helps a group be effective?” All participants but one mentioned that having trust, honesty, and safety helped the support
group be effective. The one participant who did not address trust, honesty, and safety stated that the support groups were most effective when students accepted responsibility in being part of the group. The participant also stated that having rules helped the group be effective. The two following quotes illustrate the themes of trust, honesty, and safety:

- Trust and safety, that’s obvious, but it’s more so important for this kind of group.
- And really making sure kids feel safe where they can be completely open and honest...

and,

- For the students, it’s a place where they can come and be free...The kids being who they are, and the fact that they can be honest helps the group be effective...because there aren’t many venues where they can be honest and feel safe. The effectiveness is knowing that group is a safe place, and trusting others in this place.

**Personal Growth and Confidence**

Students’ personal growth and confidence were also emerging themes from various parts of the interviews, but particularly when asked the question, “How have you seen your clients grow by being involved with a GLBT support group?” Every respondent felt that the students in the support groups grew—emotionally, socially, and personally. Participant one stated she sees mostly growth in the students participating in the support groups, such as gaining more confidence. Participant two also mentioned increased confidence, but also addressed that the biggest area of growth was a sense of relief that students felt knowing that they were not alone. Additionally, participant three mentioned that the students’ self confidence grew significantly, as well as their self-
SUPPORT GROUPS

esteem. Participant four also addressed that students’ self-confidence and self-esteem increased, but also stated that the students developed a better understanding of who they are as people. The last participant mentioned that she sees the students grow into themselves more, in addition to gaining more confidence and becoming more comfortable with themselves. The following quotes illustrate these two themes:

*I think that students get more comfortable with themselves. Students in the group that have identified as questioning, or aren’t sure if the group is for them, grow by seeing the modeling of their peers…and they come to understand that group is a safe place to talk. Students really use the group, especially in terms of coming out. It helps some students to talk to other members about their coming out process. It is great to see them grow into themselves and gain some confidence.*

Another participant stated:

*I think students develop a clearer understanding of who they are, and that who they are is acceptable…They understand their identity better and have a positive outlook on themselves, and making those connections with other people who are similar to them…The majority of students’ self-confidence and self-esteem grow, and their confidence and trust in others grow as well…*

**Discussion**

The purpose of this study was to examine support groups in schools with GLBT youth. To do this, the researcher conducted interviews with four school social workers and one teacher in the state of Minnesota. Throughout the transcribed interviews, various themes emerged: risk factors, group effectiveness, sense of community, sense of trust, honesty, and group safety, and personal growth and confidence.
**Risk Factors**

Research has shown several risk factors in GLBT youth, including mental health concerns, suicidality, sexual behaviors, substance use, victimization, and more. The participants in this study had reported that they see more mental health concerns in GLBT students, such as depression, anxiety, and suicidality, which is comparable to the findings of Fergusson, Horwood, and Beutrais (1999), van Heeringen and Vincke (2000), Bontempo and D’Augelli (2002) and Saewyc, Skay, Hynds, Pettingell, Bearinger, Resnick, and Reis (2007).

Some respondents stated that they see higher instances of chemical use and sexual risk tasking, which is similar to the findings of Marshal, Friedman, Stall, King, Miles, Gold, Bukstein, and Morse (2008), and Blake, Ledsky, Lehman, Goodenow, Sawyer, and Hack (2001), respectively. However, some risk factors examined in the literature review were not addressed throughout the interviews, such as teenage pregnancy (Saewyc, Pettingell, & Skay, 2004; Saewyc, Poon, Homma, & Skay, 2008) and body dissatisfaction (French, Story, Remafedi, Resnick, & Blum, 1996).

In terms of risk factors related to school, respondents mentioned that students identifying as GLBT were more likely to have academic failure and attendance issues. This finding is related to what GLSEN (2010) found in their 2009 National School Climate Survey, in which GLBT students skipped school due to safety concerns related to bullying and harassment, and were more likely to have lower grade point averages.

**Group Effectiveness**
Although there has been an extensive amount of research regarding the risk factors of GLBT youth, research regarding support services—specifically support groups—is limited. All participants in this study reported that they felt support groups for GLBT students are effective. The findings that support groups, overall, for GLBT youth are beneficial are similar to the research findings of Goodenow, Szalacha, and Wesheimer (2006) and Uribe (1994). Specifically, Goodenow, Szalacha, and Wesheimer found that the use of school support groups for LGB students was related to greater safety in the school, lower rates of victimization, and suicidality risks, while Uribe found that the groups were beneficial and empowering to students. However, the participants in the current study reported different aspects of the students’ lives in which they thought the groups were helpful, such as students earning better grades and feeling more connected to school.

**Sense of Community; Trust, Honesty, and Group Safety; Personal Growth and Confidence**

Three new findings emerged from this study that were not addressed in the literature review: sense of community; trust, honesty, and group safety; and personal growth and confidence. Overall, the participants found that GLBT support groups provided a sense of community and safety for the students in the group. Though safety was addressed in the study conducted by Goodenow, Szalacha, and Wesheimer (2006), a sense of community was not. None of the studies in the literature review discussed what helps a GLBT support group be effective. However, all but one participant felt that having trust, honesty, and safety helps the group’s effectiveness. Last, the participants in the current study also found that the groups helped the students develop self-acceptance
and confidence in themselves and their identity. This is a new finding that was also not found in the studies mentioned in the literature review.

A limitation should be considered with this study. Since the sample size included only five respondents, future studies should consider recruiting a larger sample as well as including student voices. Additionally, future research should recruit participants from rural areas since this study only had participants from urban and suburban schools. Future studies should also consider utilizing a probability sample in order to increase the ability to generalize findings.

Conclusion

Because GLBT youth are at a higher risk for suicidal ideation, sexual risk behaviors, victimization, mental health issues, and more, it is imperative for schools to provide social support to these individuals. Support groups for this population have been deemed beneficial by studies; therefore, more schools throughout the nation should implement them. Furthermore, it is important for social workers to be aware of the risk factors these youth face in order to effectively provide support to them to ensure school success, as well as build a safe school climate where all youth are treated respectfully, fairly, and equally. Thus, social work practice should look at providing these services to schools, as well as advocating to reduce barriers in order to uphold social work’s commitment to social justice.

Social work research should strive to examine this area more extensively through the use of a larger sample, including both urban and rural communities as well as student voices. In terms of policy, social workers should advocate for safe school laws. Currently, only 18 states and Washington D.C. have laws prohibiting discrimination
based on sexual orientation, and only 16 states and Washington D.C. have laws prohibiting discrimination based on gender identity (Movement Advancement Project, 2012). Advocating for these policies is important, as they are one of the most effective measures to improve school climate and safety (GLSEN, 2012).

Despite how far the society has progressed in terms of accepting individuals identifying as GLBT, this is still a population that is continuously disenfranchised. With the increased occurrences of anti-gay bullying and suicides, the need for support staff and services is also increasing. However, the amount of research regarding social support, specifically the use of support groups, for GLBT youth in schools is limited. Therefore, this is an area needing further exploration.
References


Appendix A

Interview Questions

1. What is your professional background?
2. What age group do you work with?
3. How long have you been facilitating GLBT groups?
4. What type of intake process do you use for the GLBT group?
5. Do you use a particular model to guide your group work with GLBT students?
6. What are the benefits to facilitating a GLBT group?
7. What helps a group be effective?
8. How do you measure if a group is beneficial?
9. Do you personally feel GLBT groups are effective? If so, why?
10. Do you think every secondary school should offer GLBT support groups?
11. What risk factors do you see in your clients identifying as GLBT?
12. In what ways have these risk factors affected their academic and personal lives?
13. For those students joining the support group, what other supports exist in their lives?
14. How have you seen your clients grow by being involved with a GLBT support group?
15. How do you foster strengths in your students identifying as GLBT?
16. Have your clients improved socially and academically by being a part of a GLBT group? If so, how?
CONSENT FORM

Please read this form and ask any questions you may have before agreeing to participate in the study. Please keep a copy of this form for your records.

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Support Groups with Gay, Lesbian, Bisexual, and Transgender Youth</th>
<th>IRB Tracking Number</th>
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</table>

General Information Statement about the study:

Through an audiotaped interview, this study will examine the use of support groups with gay, lesbian, bisexual, and transgender (GLBT) youth in secondary schools.

You are invited to participate in this research.

You were selected as a possible participant for this study because:

You have identified that you are a school social worker in the state of Minnesota that has facilitated GLBT support groups in the past or currently.

Study is being conducted by: Marisa Biolo

Research Advisor (if applicable): Kendra Garrett, Ph.D

Department Affiliation: School of Social Work

Background Information

The purpose of the study is:

The purpose of this study is to examine the benefits and effectiveness of support groups with GLBT youth in secondary schools.
Procedures

If you agree to be in the study, you will be asked to do the following:

*State specifically what the subjects will be doing, including if they will be performing any tasks. Include any information about assignment to study groups, length of time for participation, frequency of procedures, audio taping, etc.*

If you agree to be in this study, you will be asked to participate in an audio taped interview with the researcher that will take approximately 30 minutes. The interviews will be recorded using a tape recorder. The interview includes 16 questions regarding your experiences facilitating GLBT support groups in schools, the effectiveness of the groups, and student experiences.

Risks and Benefits of being in the study

The risks involved for participating in the study are:

This study has no risks.

The direct benefits you will receive from participating in the study are:

The study has no benefits.

Compensation

Details of compensation (if and when disbursement will occur and conditions of compensation) include:

*Note: In the event that this research activity results in an injury, treatment will be available, including first aid, emergency treatment and follow-up care as needed. Payment for any such treatment must be provided by you or your third party payer if any (such as health insurance, Medicare, etc.).*

This study does not provide any compensation.
**Confidentiality**

The records of this study will be kept confidential. In any sort of report published, information will not be provided that will make it possible to identify you in any way. The types of records, who will have access to records and when they will be destroyed as a result of this study include:

The records include the audio taped interview and the transcribed interview. Only the researcher will have access to these records, and will be kept in a locked file at the researcher’s home. The researcher will delete any identifying information from the transcript. The audiotapes will be destroyed by May 30, 2012, and the transcripts will be kept indefinitely in a locked file.

**Voluntary Nature of the Study**

Your participation in this study is entirely voluntary. Your decision whether or not to participate will not affect your current or future relations with any cooperating agencies or institutions or the University of St. Thomas. If you decide to participate, you are free to withdraw at any time up to and until the date\time specified in the study.

You are also free to skip any questions that may be asked unless there is an exception(s) to this rule listed below with its rationale for the exception(s).

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<th>Should you decide to withdraw, data collected about you</th>
<th>will NOT be used in the study</th>
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**Contacts and Questions**

You may contact any of the resources listed below with questions or concerns about the study.

<table>
<thead>
<tr>
<th>Researcher name</th>
<th>Marisa Biolo</th>
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<tbody>
<tr>
<td>Researcher email</td>
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<td>Researcher phone</td>
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<tr>
<td>Research Advisor name</td>
<td>Kendra Garrett</td>
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<td>Research Advisor email</td>
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<td>Research Advisor phone</td>
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<td>UST IRB Office</td>
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### Statement of Consent

I have read the above information. My questions have been answered to my satisfaction and I am at least 18 years old. I consent to participate in the study. By checking the electronic signature box, I am stating that I understand what is being asked of me and I give my full consent to participate in the study.

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Print Name of Study Participant

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Print Name of Parent or Guardian

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Print Name of Researcher

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*Electronic signatures certify that:

The signatory agrees that he or she is aware of the policies on research involving participants of the University of St. Thomas and will safeguard the rights, dignity and privacy of all participants.

- The information provided in this form is true and accurate.
- The principal investigator will seek and obtain prior approval from the UST IRB office for any substantive modification in the proposal, including but not limited to changes in cooperating investigators/agencies as well as changes in procedures.
- Unexpected or otherwise significant adverse events in the course of this study which may affect the risks and benefits to participation will be reported in writing to the UST IRB office and to the subjects.
- The research will not be initiated and subjects cannot be recruited until final approval is granted.