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Introducing the Proud and Thriving Framework: Supporting the Wellbeing and Mental Health of LGBTQ+ High School, College and University Students

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This webinar will be recorded and made available on the JED website.

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A non-profit organization that protects emotional health and prevents suicide for our nation's teens and young adults, giving them the skills and support they need to thrive today... and tomorrow.

www.jedfoundation.org



Special Thank You!

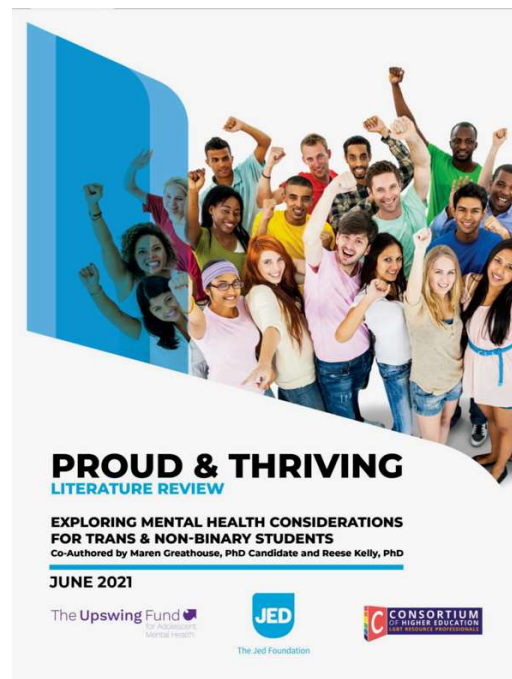
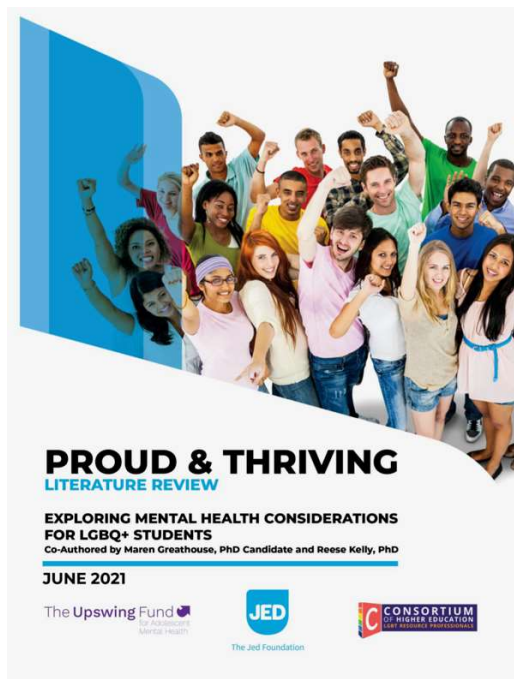
The **Upswing** Fund 
for Adolescent
Mental Health



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Proud & Thriving Framework

A framework to develop and strengthen mental health support for LGBTQ+ students across the country.



Today's Presenters



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Today's Presenters



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Learning Objectives

- Participants will learn about the **risk factors** that exist for protecting emotional health and preventing suicide for LGBTQ+ high school and college students.
- Participants will learn about **protective factors** that administrators and faculty can use to help provide services and programs that provide a safe and affirming school environments for LGBTQ+ students.
- Participants will learn about the **research findings** and **recommendations** that were generated from JED's comprehensive research.



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AGENDA

1. Proud & Thriving Project Overview
2. Framework Development Process
 - a. Overview
 - b. Research Process
 - c. Framework
3. Research Overview and Highlights
4. Recommendations for
 - Individuals
 - Mental Health Practitioners
 - Schools – High Schools and Higher Ed
5. Conclusion



Introducing the Proud and Thriving Framework



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A photograph of a Pride parade with people holding rainbow flags. A semi-transparent white box with a thin black border is centered over the image, containing the title text.

Why is supporting LGBTQ+ students important?





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A low-angle shot of two young women with long hair, wearing sunglasses and light-colored shirts, holding a large rainbow flag high above their heads. They are smiling and looking up at the flag. The background shows bare tree branches against a clear blue sky. A white rectangular box is superimposed over the center of the image, containing the text "How did we get here?".

How did we get here?



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A photograph of two young women, one of Hispanic/Latina descent and one of African descent, smiling and holding a large rainbow flag. They are outdoors in a grassy area with trees in the background. A semi-transparent white box with a thin black border is centered over the image, containing the text "Risk Factors".

Risk Factors



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Individual Risk Factors

Queer & Questioning Students:

- Internalized heterosexism and/or monosexism;
- Identity concealment, perceived
- burdensomeness, and thwarted belongingness.

Trans & Non-Binary Students:

- Internalized cissexism;
- Lack of identity pride, investment in “passing” as cisgender, social isolation, and shame.



Interpersonal Risk Factors



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All LGBTQ+ Students:

- Unsupportive social networks and rejection from peers, family and caregivers, faith communities, teacher/faculty, staff, and administrators;
- Interpersonal victimization including bullying, harassment, physical assault, and sexual violence.



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Structural Risk Factors

Queer & Questioning Students:

- Non-discrimination, anti-harassment/bullying policies do not enumerate sexual orientation.

Trans & Non-Binary Students:

- Non-discrimination, anti-harassment/bullying policies do not enumerate gender identity or expression;
- Gender-segregated facilities (e.g., restrooms, locker rooms, housing);
- Inability to put chosen names and pronouns into student information systems.



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Structural Risk Factors (Cont.)

All LGBTQ+ Students:

- Lack of clear processes for reporting, responding to, and remediating victimization;
- LGBTQ+ self-identification excluded from surveys and institutional data;
- Targeting and inequitable enforcement of disciplinary policies and practices;
- Lack of resources and student services that address their needs and experiences(e.g., LGBTQ+ office and staff, culturally competent physical health, counseling, and career services) .
- Barriers to academic engagement (e.g., excluded from curriculum, classroom bullying or invisibility)



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Protective Factors



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Individual Protective Factors Mitigating Risk

Queer & Questioning Students:

- Self-compassion, cognitive flexibility, bicultural and multicultural self-efficacy, and exercise.

Trans & Non-Binary Students:

- Self-efficacy and proactive agency, body image and congruence.

All LGBTQ+ Students:

- Positive identity development and integration, self-esteem, and identity disclosure.



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Interpersonal Protective Factors

Trans & Non-Binary Students:

- Connectedness to trans and non-binary community;
- Having trans and non-binary role models and mentors.

All LGBTQ+ Students:

- Affirming peers, family, mentors, and faith communities;
- Friendships and community connectedness.



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Structural Protective Factors

Queer & Questioning Students:

- Enumerating sexual orientation in non-discrimination, anti-harassment/bullying policies;

Trans & Non-Binary Students:

- Enumerating gender identity or expression in non-discrimination, anti-harassment/bullying policies;
- Gender-inclusive information systems, athletic teams, and facilities (e.g., restrooms, locker rooms, housing);



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Structural Protective Factors (Cont.)

All LGBTQ+ Students:

- Clear processes for reporting, responding to, and remediating victimization;
- School-wide positive and restorative discipline practices;
- Collecting chosen name, pronouns, gender identity, and sexual orientation on surveys, enrollment data, and institutional data;
- Providing LGBTQ+ focused training and education to students, teachers/faculty, staff, coaches, administration, and board members;
- LGBTQ+ focused services, academic curriculum, and residential communities;
- Culturally competent case management, mental and physical health services, career counseling services, and sexual violence prevention resources that address the needs of LGBTQ+ students.



What Does the Research Say About LGBTQ+ Mental Health?

Research Conducted for this Framework





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Mental Health Overview

- LGBTQ+ students self-reported lower levels of **happiness, confidence, self-worth, and optimism** than their cisgender and/or heterosexual peers. (P& T Survey)
- LGBTQ+ students were more likely than cisgender and heterosexual peers to **experience or be diagnosed with anxiety, depression, ADHD, an eating disorder, PTSD, a personality disorder, autism spectrum disorder, and/or a substance use disorder**. (P&T Survey)
- LGBTQ+ students also reported a greater incidence of **negative experiences** compared to non-LGBTQ+ students, including **pressure to conform to gender norms and pressure to be someone they are not**. (P& T Survey)

**41% LGBTQ+ vs.
16% Non-LGBTQ+**

LGBT+ students report higher rates of maladaptive behaviors, with the largest differences across self-reported thoughts of harm (cutting or burning).



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Coping & Maladaptive Behaviors: Drugs and Alcohol

Coping and maladaptive behaviors over past six months	LGBTQ+	Non-LGBTQ+
Used alcohol, pills, or drugs as a way to cope (Net)*	35%	27%
Used alcohol as a way to cope	26%	21%
Binge-drank alcohol until you vomited or blacked out*	11%	8%
Drove under the influence of drugs or alcohol	6%	5%
Used pills or drugs as a way to cope*	20%	12%
Overdosed on pills or drugs	2%%	1%

***Indicates statistically significant difference between LGBTQ+ and Non-LGBTQ+ at the 95% or greater confidence level to the group indicated.**



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Coping & Maladaptive Behaviors: Self-Harming

Coping and maladaptive behaviors over past six months	LGBTQ+	Non-LGBTQ+
Thought about hurting yourself, such as cutting or burning yourself*	41%	16%
Done something to purposefully hurt yourself, such as cutting or burning yourself (not trying to die)*	24%	7%
Wished you were dead or could go to sleep and never wake up*	48%	23%
Seriously considered attempting suicide*	18%	7%
Made a plan about how you would attempt suicide*	13%	4%
Attempted suicide*	5%	1%

*Indicates statistically significant difference between LGBTQ+ and Non-LGBTQ+ at the 95% or greater confidence level to the group indicated.



Survey Data Highlights: Top Concerns Among LGBTQ+ Students



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Anxiety (86%)

Depression (84%)

Family Concerns (75%)

Difficulty Coping with Stress (75%)

Academic Performance Difficulties (71%)

Social Isolation & Loneliness (65%)

Navigating Multiple Marginalized Identities (52%)



Help Seeking Behaviors



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- Nearly three in four LGBTQ+ students reported having a desire for professional counseling in the past 6 months.
- Over **90% of LGBTQ+ college students said that they would seek help from a clinician or informal resource (e.g., roommate, friend, support group)**, should they need it.
- 67% of LGBTQ+ college students had **used therapy before**, nearly twice the rate of their cisgender and/or heterosexual peers. (HMS)



Resource Use



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- **School/Campus resources that were most frequently listed by students included (P&T Survey):**
 - ✓ A school counselor
 - ✓ Teacher/faculty, or staff member they can open up to
 - ✓ Chosen name identification
 - ✓ Gender-inclusive restrooms
 - ✓ Safer sex resources
 - ✓ LGBTQ+ support groups and/or student organizations
 - ✓ Programs to help them cope
 - ✓ Social events for LGBTQ+ students
 - ✓ An LGBTQ+ resource center
 - ✓ A reporting system for hate/bias incidents.
- BIPOC LGBTQ+ students reported higher rates of **participating in programs where they were mentored by other LGBTQ+ students** and of using an LGBTQ+-centered library than white LGBTQ+ students. (P&T Survey)

While the vast majority of students who used these resources found them helpful, **less than half of the LGBTQ+ students surveyed felt their school provided sufficient support for LGBTQ+ students.**



Barriers to Treatment



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Biggest Barriers to Proper Mental Health Support

- ✓ Expense/Financial Barriers (P&T Survey and HMS)
- ✓ Time (HMS)
- ✓ Not knowing where to go for treatment (HMS)
- ✓ Difficulty finding an appointment (HMS)
- ✓ Fear of talking about mental health concerns with someone (P&T Survey)
- ✓ Fear that counseling would not work (P&T Survey)
- ✓ Not wishing to seek parental/caregiver permission* (P&T Survey)
- ✓ Not wanting virtual mental health care when at home* (P&T Survey)
- ✓ Fear of being outed as LGBTQ+ (P&T Survey)
- ✓ Stigma to receiving mental health treatment* (HMS)
- ✓ Do not perceive the need* (HMS)
- ✓ Health Insurance* (HMS)

*BIPOC students were less likely than White students to seek counseling due to these barriers.



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Cultural Competency and Bias

- 40% of counselors and administrators believed that they had not been adequately trained to support the needs of LGBTQ+ students (P&T Survey)
- Nearly half of all administrators and 14% of counselors rated their staff as *not at all* skilled to work with LGBTQ+ students (P&T Survey)
- 6% of counselors and 3% of administrators admitted to harboring negative biases towards LGBTQ+ people (P&T Survey)
- Less than half of all administrators (vs. 74% of counselors) said their school provides good or excellent services to their LGBTQ+ students. (P&T Survey)
- Competency Gaps were indicated by the following (P&T Focus Groups):
 - Inadequate mental health services
 - Mental health treatment that exacerbated LGBTQ+ students' mental health concerns
 - Heterosexist, monosexist, and cissexist classroom instruction
 - Scarcity of curricular representation of LGBTQ+ scholarship and topics relevant to the lives of LGBTQ+ students
 - Microaggressions and a negative classroom environment
 - Absent, unclear, or inadequate policies and protocols that protected the rights of LGBTQ+ students.



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High School vs. College Experiences

- LGBTQ+ high school students have more emotional risk factors, less resilience, and greater concerns regarding difficulty with schoolwork, feeling unsafe, deadnaming, religious/spiritual tension, and sexual assault than their college/university counterparts. (P&T Survey)
- Although LGBTQ+ high school students were perceived by counselors and administrators to have better family support and positive adult role models in their lives, LGBTQ+ high school students were less receptive to seeking help due to fear of being outed, seeking parental permission, and the lack of comfort opening up to a counselor. (P&T Survey)
- Correspondingly, more LGBTQ+ high school students reported thoughts of self-harm, actual self-harm, thoughts of suicide, suicide planning, and suicide attempts than LGBTQ+ college students. (P&T Survey)
- Nearly all mental health and support services for LGBTQ+ students were more commonly found at colleges than in high schools. (P&T Survey)



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A diverse group of young people, including students of various ethnicities and ages, are shown from the chest up. Many of them have their right fists raised in a gesture of solidarity or protest. They are wearing casual clothing like t-shirts, button-down shirts, and suspenders. The background is slightly blurred, showing what appears to be a school building with windows.

The Proud & Thriving Framework **RECOMMENDATIONS**



Recommendations for Individuals



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- Keep Learning about LGBTQ+ Needs, Experiences, and Intersections
- Role model inclusive language and affirmative behaviors
- Show up for LGBTQ+ Events
- Advocate for policies, programs, and resources that promote LGBTQ+ equity and inclusion.



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Recommendations for Mental Health Practitioners

- Keep Learning about LGBTQ+ Identities, language, and experiences
- Foster an institutional cultural for shared accountability for LGBTQ+ students mental health
- Implement LGBTQ+ Inclusive Practices, from intake forms to names/pronouns
- Community expectations of mental health provisions: privacy, referrals, availability of appts, LGBTQ+ expertise, and/or services
- Partner with colleges/resource providers to create more entry points for students to seek services.
- Be flexible and created in offering services to LGBTQ+ students: informal chats, sessions outside of regular school hours, telehealth, health promotion education, etc.



Recommendations for High Schools, Colleges, & Universities

- Keep learning about LGBTQ+ identities, language, and experiences
- Use chosen names and pronouns
- Revisit programmatic and educational curriculum for LGBTQ+ influences
- Support openly LGBTQ+ teachers, faculty, staff, and administrative peers.
- Attend cultural and social events, learning opportunities, and mentoring programs to better connect with LGBTQ+ students.



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Recommendations for High Schools, Colleges, & Universities



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- Collect and Examine Data
- Update Policies and Procedures
- Resource programs, centers, offices, departments, and roles that provide protective factors and/or reduce risk factors for LGBTQ+ students.
- Prioritize LGBTQ+ Cultural Competence for all faculty, staff, and administrators.
- Remove/reduce barriers to seeking and accessing, mental health, academic, and support resources.
- For High Schools: Consider offering a training series to family members, guardians, and supporters to help them better understand and support LGBTQ+ students.

Questions?



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Conclusion



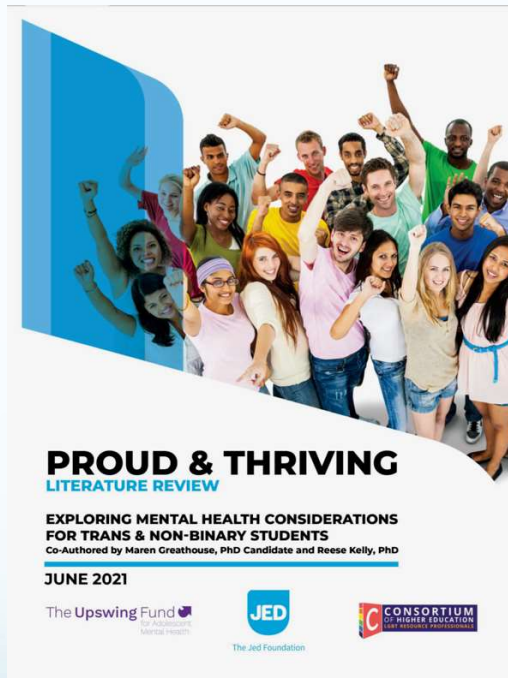
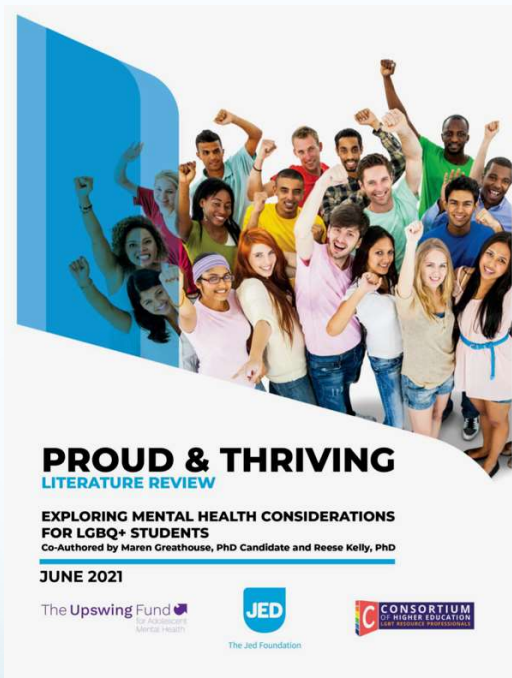
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Thank You for joining us!



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Online Resources



National Suicide Prevention Lifeline
[800-273 -TALK \(8255\)](tel:800-273-8255)

The Trevor Project
<https://www.thetrevorproject.org/get-help-now/>

Crisis Text Line
<https://www.crisistextline.org/>

The Steve Fund
<https://www.stevelfund.org/knowledgecenter/>

The Hope Center
https://hope4college.com/wp-content/uploads/2020/03/BTFP_SupportingStudentsDuringCOVID19_v2_Final.pdf

Online Resources



The Jed Foundation Covid-19 Mental Health Resources

<https://www.jedfoundation.org/covid-19-and-managing-mental-health/>

The Child Mind Institute

<https://childmind.org/coping-during-covid-19-resources-for-parents/>

National Association of School Psychologists (NASP)

<https://www.nasponline.org/resources-and-publications/resources-and-podcasts/covid-19-resource-center>

National Center for School Mental Health

<http://www.schoolmentalhealth.org/COVID-19-Resources/>

National Institute of Mental Health

<https://www.nimh.nih.gov/health/topics/child-and-adolescent-mental-health/index.shtml>