



IASW
Irish Association of
Social Workers



LGBTQ

CHILDREN, YOUTH & FAMILIES

March 22nd, 2024 - Working with LGBTQ+ Children and Adolescents in a Family and Societal Context

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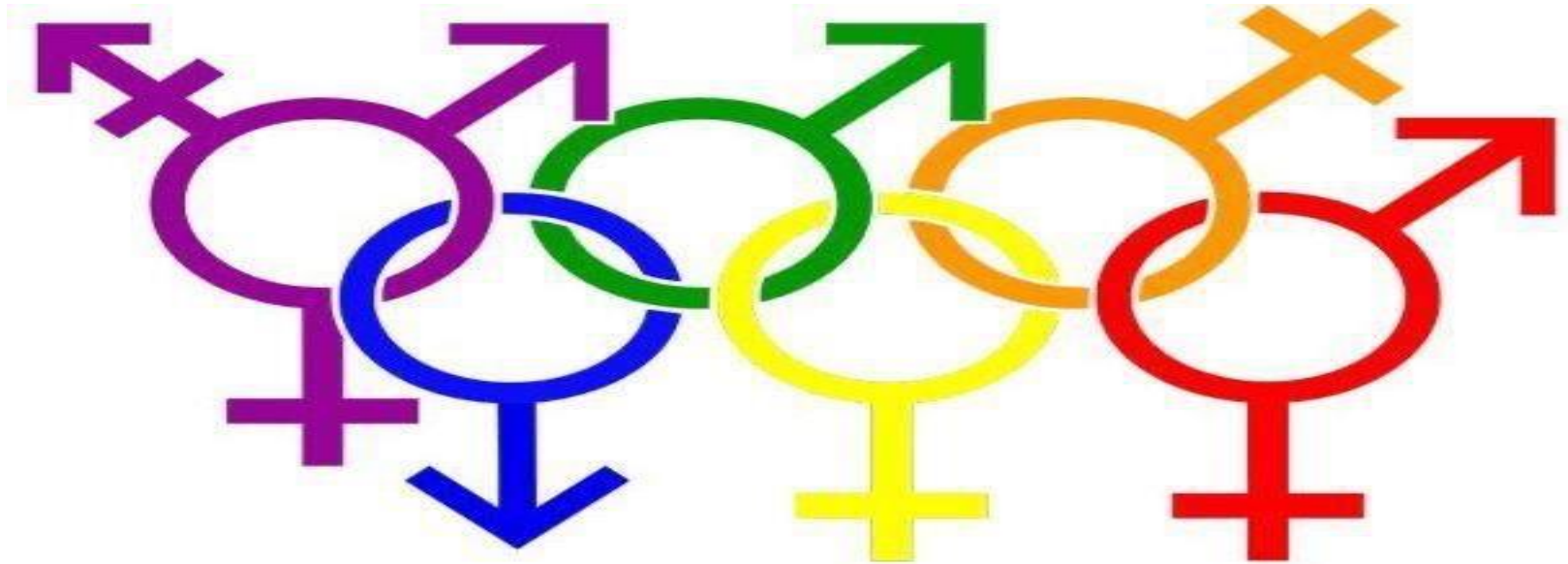
A Collaboration Between the Social Workers in Foster Care (SWIFC) and the Systemic Psychotherapy Programme in the School of Medicine, UCD.

HUNTER
The City University of New York

Agenda

- Basic Language and Background
- To explore the myths, stereotypes that surround LGBTQ+ issues
- To become familiar with the issues facing young LGBTQ+ children, young people and their families in wider society and also for young people connected with the child welfare system
- To enable professionals to avail of a reflective space to consider how their own perspectives may impact on their work in this area
- To provide clinicians with a range of interventions that can assist the group of young people.
- To help create more LGBTQ+ affirming environments

Language & Background



LGBTQ+

This acronym refers to Lesbian, Gay, Bisexual, Transgender, and Questioning/Queer

Although all of the different identities within “LGBTQ+” are often lumped together (and share sexism as a common root of oppression), there are specific needs and concerns related to each individual identity.

Sexual Orientation

Sexual orientation is how a person describes their emotional and sexual attraction to others; from a physical, fantasy, “fit” and behavioral sense.

Sexual Orientation Terms

❖ Gay

❖ Lesbian

❖ Bisexual

❖ Asexual



Gender Identity Expression

A term which refers to the ways in which we each manifest masculinity or femininity.

It is usually an extension of our “gender identity,” our innate sense of being male, female, or some other gender

Gender Identity Terms

- ❖ Trans or Transgender
- ❖ Gender Expansive
- ❖ Cisgender
- ❖ Non-Binary



Heterosexual

Heterosexual (straight) describes women who are emotionally and sexually attracted to men, and men who are emotionally and sexually attracted to women; from a fantasy, “fit” and behavioral sense.

Homosexual

The word homosexual translates literally as “of the same sex,” being a hybrid of the Greek prefix homo- meaning “same” (as distinguished from the Latin root homo meaning human) and the Latin root sex meaning “sex.”

In 1869, the Austrian writer Karl-Maria Kertbeny coined the word “homosexual.”

Homosexual

- An outmoded term used by “others” to define the LGBT community
- The word has pathologically-based overtones and associations, prior to 1973, if you were diagnosed as “homosexual” you were considered to be mentally ill.
- Homosexuality was deleted from DSM in 1973.
- The preferred terms used by most LGBT people are *gay, lesbian, bisexual, trans* which stress cultural and social matters more than sex

Gay

Gay describes a person who is emotionally and sexually attracted to people of their own gender; from a fantasy, “fit” and behavioral sense.

It is most commonly used when talking about men. This is a term used by the LGB community to define itself after Stonewall riots of 1969

Bi or Bisexual

Bisexual describes a person who has the *capacity* to be emotionally and sexually attracted to women and to men; from a fantasy, “fit” and behavioral sense; though usually not at the same time.

OR

A transitional period which acts as a bridge from heterosexuality to a gay, lesbian, or trans identity, or vice versa.

Pansexual

Typically, people who identify as Pansexual can feel an attraction to anyone, including individuals who do not identify as a specific gender.

Pansexual people may describe their attraction as focusing on personality rather than gender.

People, NOT Parts

Lesbian

An older term derived from the Greek island of Lesbos where the poet Sappho wrote about her love for women.

Lesbian describes a woman who is emotionally and sexually attracted to other women; from a fantasy, “fit” and behavioral sense.

Questioning

1. Those who are “going through a phase,” i.e., experimentation, situational LGBT identification.
2. Those who have survived sexual abuse, without treatment, especially same-gendered abuse.
3. Those with some types of serious psychiatric illnesses.

Queer

An umbrella term sometimes used by LGBTQIA+ people to refer to the entire LGBTQIA+ community.

An alternative that some people use to "queer" the idea of the labels and categories such as LGBTQIA+ etc.

It is important to note that the word queer is an in-group term, and a word that can be considered offensive to some people, depending on their generation, geography and relationship with the word.

Sexual Fluidity

The term *sexual fluidity* is significantly promoted by Lisa M. Diamond in her 2008 book *Sexual Fluidity*.

Defined as the rigidity or lack thereof of someone's sexual orientation.



People who have high sexual fluidity don't fit into labels like "bisexual," "heterosexual," or "gay or lesbian."

Their orientation is fluid and changes often. Either that or it's impossible to pin-point with the current schemata for naming one's orientation.

Non Binary Identity

Some young people do not identify as male or female, using the term non-binary to identify.

Some young people do not identify as gay, lesbian, bi, cisgender or trans – instead they identify as non-binary – they are attracted to whom they are attracted to, regardless of sexual or gender orientation.

Trans or Transgender

An umbrella term describing people whose gender identity or expression differs from that associated with their birth sex or a binary gender system





Trans or Transgender

In DSM V, the now-defunct diagnosis of gender identity disorder (GID) receives a new name, gender dysphoria, which reflects a new emphasis.

Both Gender dysphoria describes a condition in which someone is intensely uncomfortable with their biological gender and strongly identifies with, and wants to be, in an affirmed gender that differs from the one in which they were assigned at birth.

Trans Identities



Transgender man (FTM)
describes someone assigned
female at birth who has a male
gender identity

Trans Identities

Transgender woman (MTF)

Describes someone assigned male at birth who has a female gender identity



Trans Identities

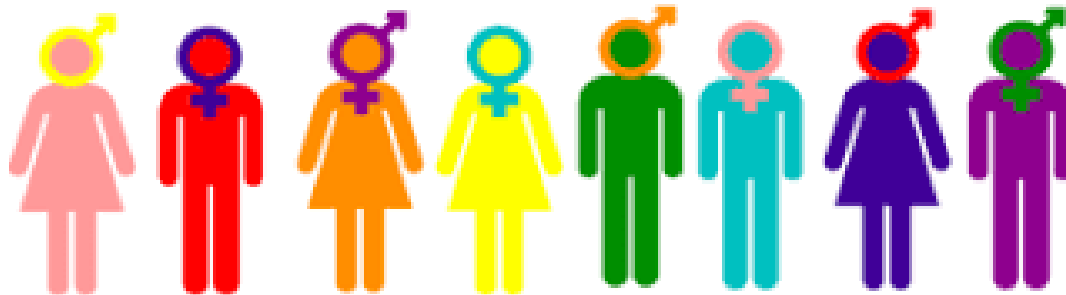
Non Binary individual describes someone who has a gender identity that is neither male nor female, or is a combination of male and female

Cisgender

A term for people whose gender identity matches the sex that they were assigned at birth. This term is often abbreviated to simply **cis**.

For example, someone who identifies as a woman and was assigned female at birth is a cisgender woman, correspondingly, someone who identifies as a man and was assigned male at birth is a cisgender man.

Reflection



Myths & Facts



MYTHS

MYTHS ABOUT YOUTH

Myth: Adolescents are too young to know that they are LGBTQ+.

Fact: Research has consistently shown that the average age of awareness of LGBTQ+ identity is 10 years of age; the average age of disclosure is 14.

MYTHS

Myth: LGBTQ+ youth must be separated from the general population to ensure their safety.

Fact: Isolation and separation only serve to punish LGBTQ+ youth. The safety of youth in out-of-home care is best ensured by adequate staffing, training, and meaningful programming.

MYTHS

Myth: Providing youth with information about LGBTQ+ identity, exposing youth to LGBTQ+ role models, or promoting interaction with LGBTQ+ peers might falsely convince a youth that he, she, or they are LGBTQ+.

Myth: Sexual abuse may lead to the child identifying as LGBTQ+.

MYTHS

Myth: Youth have control over their sexual identity and orientation and can choose not to be LGBTQ+

***Fact:* The American Psychological Association acknowledges that the exact cause of sexual identity and orientation has not been identified**

MYTHS

The APA concludes that most people “experience little or no sense of choice about their sexual orientation.” Knowing LGBTQ+ people, being exposed to information about LGBTQ+ issues, being sexually abused or any number of other supposedly causative factors has no basis in research.

MYTHS

MYTHS ABOUT ADULTS

Myth: Gay men molest children at higher rates than heterosexuals.

Fact: In a study by Jenny, Roesler, & Poyer (1994), researchers reviewed the medical charts of 352 children evaluated for sexual abuse in a Denver children's hospital...

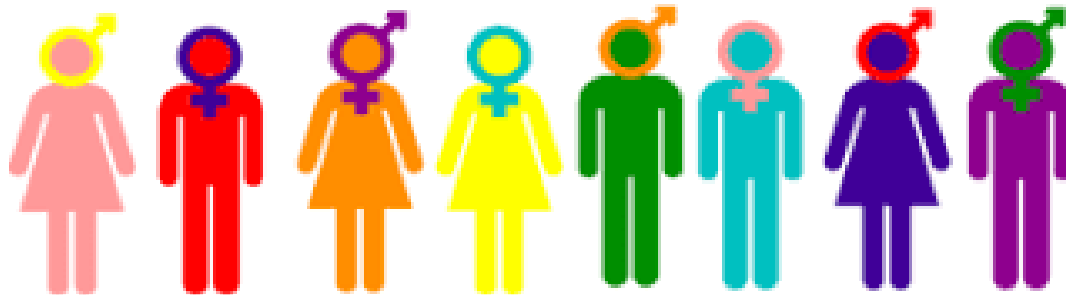
MYTHS

...In 74 cases, the abuser was another child or adolescent, none of whom were identified as lesbian or gay. In 9 cases, the abuser could not be identified (e.g., each parent accused the other). In 269 cases, the child (219 girls & 50 boys) was abused by an adult. Both girls and boys were most likely to be abused by their...

MYTHS

.. fathers, stepfathers, or other men married to female relatives. Only 2 of these 269 abusers (less than 1%) were identified as gay or lesbian. The researchers concluded that "most child abuse appears to be committed by situational child abusers who present themselves as heterosexuals" (p. 43).

Reflection



Issues facing LGBTQ+ children, young people and their families in wider society

Mental Health Issues

Being LGBTQ+ doesn't cause mental health problems. But because LGBTQ+ kids often face factors like rejection, bullying, discrimination, and violence, they are at a higher risk of challenges including depression, anxiety, and self-harming behaviors.

LGBTQ+ Youth in Foster Care

Three groups of LGBTQ+ youth in foster care:

- 1.) Youth rejected by family of origin because of their sexual orientation or gender identity – enter foster care because of this;
- 2.) Youth who leave home; experience abuse/neglect; rejected by family for reasons unrelated (or seemingly unrelated) to LGBTQ+ identity;
- 3.) Youth already in foster care who then disclose their LGBTQ+ identity.

LGBTQ Youth in Foster Care

- Mallon documented negative experiences of LGBTQ+ youth in foster care placements, which frequently are group care facilities where permanency is not a focus.
- Studies found: LGBTQ+ youth are often targets of discrimination, harassment, and violence from peers, group care facility staff, and other caregivers, resulting in LGBTQ+ youth running away from group homes.
- Mallon found LGBTQ+ youth experienced multiple, unstable placements; non-affirming placements that neglected needs or actively discriminated against them.

LGBTQ+ Youth in Foster Care

Frequent moves experienced by LGBTQ+ youth attributed to 4 factors:

1. Staff members do not accept youth's sexual orientation or gender identity expression
2. Youth feels unsafe
3. Youth's sexual orientation is seen as a "management problem"
4. Youth is not accepted by peers because of sexual orientation.

Issues for LGBTQ+ Youth in Care

- Trauma of separation
- Adolescent developmental tasks
- Complex family issues
- Peers/School/Community

Issues for LGBTQ+ Youth in Care

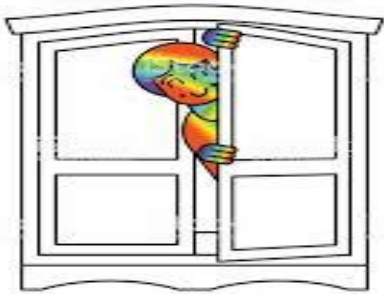
- Issues of sexual orientation and gender identity expression
- Isolation
- Safety
- Can I be out or not?
- What does it mean to live in society as a LGBTQ+ person?

Coming Out Being Found Out

Coming Out:

The process of acknowledging one's sexual orientation and/or gender identity, first to oneself and then to other people.

For most LGBTQ+ people this is a life-long process.



Disclosure

The point at which an LGBTQ+ person openly acknowledges their sexual or gender orientation first to themselves and then to others.

It is not appropriate to use terms such as- “discovered, admitted, revealed, found out, declared”, to describe this phenomena.

These are pejorative terms which suggest judgment and should be avoided by helping professionals.

Internal Stages of Coming Out

Pre-Stage One

No thought about your
Gender or sexual
orientation. Presumed
heterosexuality.

Stage One

“Could I be LGBTQ+?”
No, I am NOT!

Stage Two

“Suppose I was LGBTQ+?”

Some exploration, but tell no
one, possibly on-line
exploration

Stage Three

“ I think I might be LGBTQ+!”
Maybe I need to tell one safe
person

External Stages of Coming Out

Stage Four

“I think I am beginning to deal with the fact that I am LGBTQ+ ”

In my own time, I think I will start to share this news with other safe people

Stage Five

“I am LGBTQ+!”

I am out to safe and important people in my life

Stage Six

“I am LGBTQ+ it is an integrated part of my identity.”

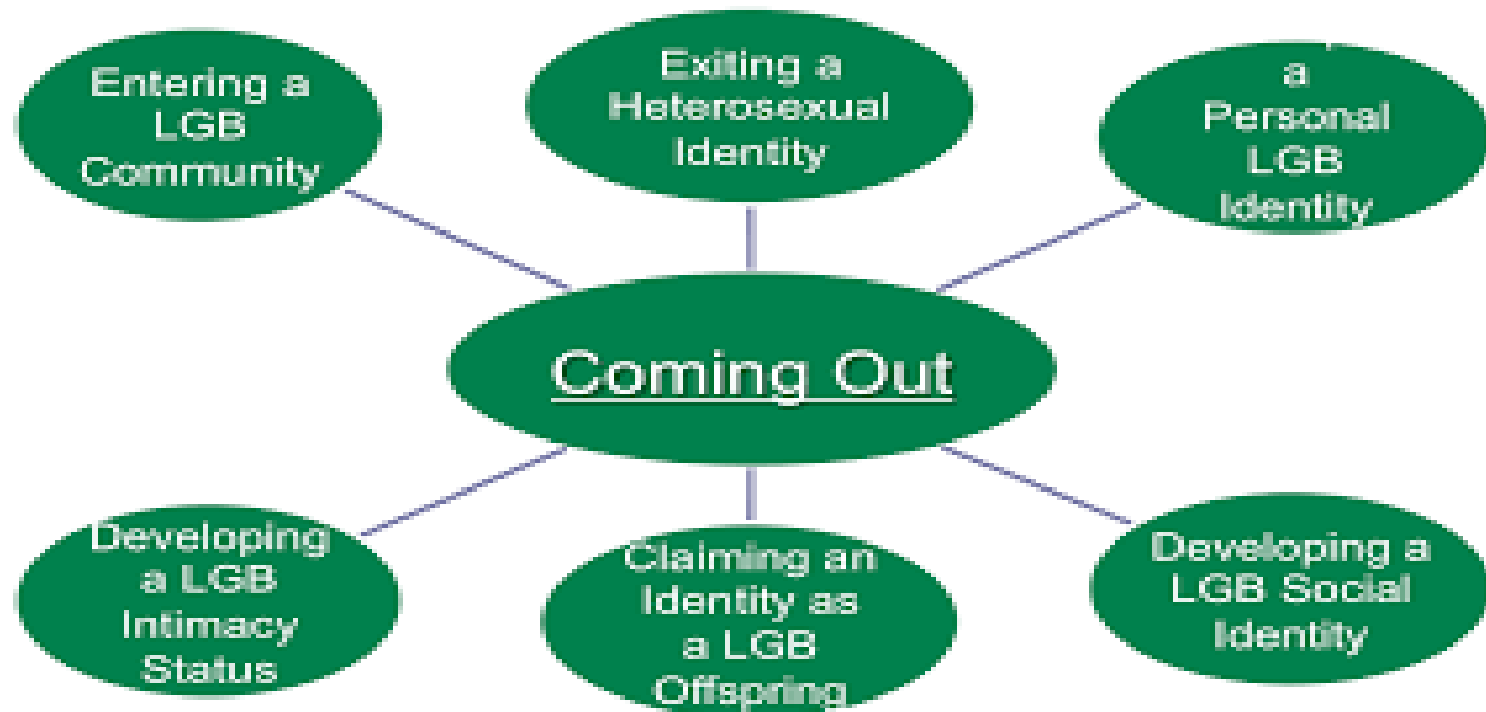
I am out in environments where I feel safe, and to people with whom I feel safe

Reasons for Coming Out as LGBT

Coming out (particularly at earlier ages) allows the person to develop as a whole individual, and is empowering by promoting self-esteem and decreasing negative health outcomes.



Coming Out Development



A Process of Being Found Out

- When a person is not prepared to come out
- A surprise/unplanned disclosure
- This can occur via phone calls, emails, texts, letters, LGBT related materials – i.e., a card from a LGBTQIA+ youth group
- This is a family system in crisis
- Do professionals know how to preserve this type of family?

Tips for Child Welfare Professionals

- The goal is not necessarily to identify LGBTQ+ youth, but to create a safe and affirming environment. Create opportunities for the youth to share this information or talk about gender identity or sexual orientation, if they choose.
- Any steps you take to make the agency and foster homes/group homes welcoming to LGBTQ+ youth will benefit all children/youth— both by giving all youth, including LGBTQ+ youth, the freedom to express themselves and by helping them learn to respect and embrace diversity.
- Accept that no matter what you do, some LGBTQ+ youth may choose not to disclose to you.

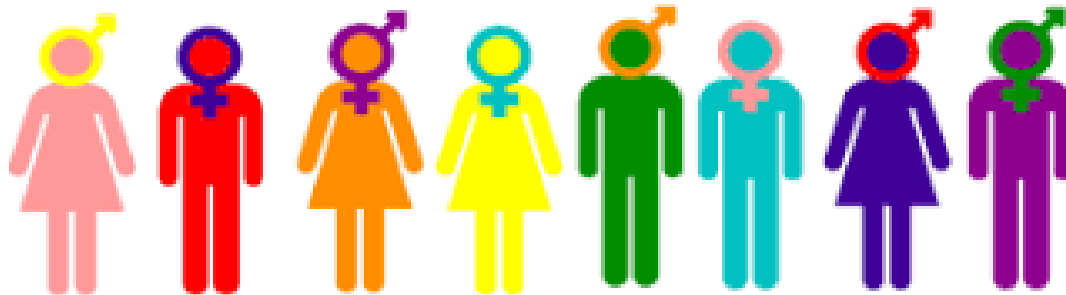
If a youth comes out to you...

- You have done good work! The youth trusts you and feels you will be supportive. (They have probably given this a lot of thought.)
- Thank them for sharing that information/trusting you. Be supportive and non-judgmental in your response.
- Talk about it! Don't just move on. Talk about what it means to them to be an LGBTQ+ person, feelings, concerns, needs... whatever they want to talk about!
- Conduct conversations with LGBTQ+ youth about relationships and sexuality the same way you would with non-LGBTQ+ youth (with appropriate information).
- Respect confidentiality to the greatest extent possible.

Role Play

With a partner – one as LGBTQ+ youth, one as child welfare professional. Youth comes out and child welfare professional responds in a supportive and affirming way. Youth might express particular needs or concerns.

Reflection



Interventions



Major Clinical Issues for Many (not all) LGBTQ+ Young People

- **Anxiety**
- **Isolation/Socialized to Hide**
- **Depression**
- **Issues Around Coming Out**
- **School Problems**
- **Family Problems**

Intake

- Why is the person referred?
- Based on intake questions could sexual orientation or gender identity expression be an issue?
- How do you explore if sexual orientation and/or gender identity expression is an issue?
- What can you do to suggest it is safe for you to talk about these issues?

Formulating the Assessment

- Use of language
- Don't look for cues from them – send cues from yourself
- Creating an LGBTQ+ affirming environment

Formulating the Assessment

- What is your level of comfort with LGBTQ+ individuals
- Make sure you have a good working knowledge of the issues – do your homework do not expect the client to train you
- Use a cultural guide if necessary

Formulating the Assessment

- Where is the individual at in their own process of sexual orientation or gender identity formation?
- What are the cultural, religious, racial, class, age, ability, geography issues?
- Is the individual at risk for violence at school, in the community, or at home?

Formulating the Assessment con't

- What are the salient family issues?
- Can you assume a neutral stance?
- How can you facilitate/impede this process?

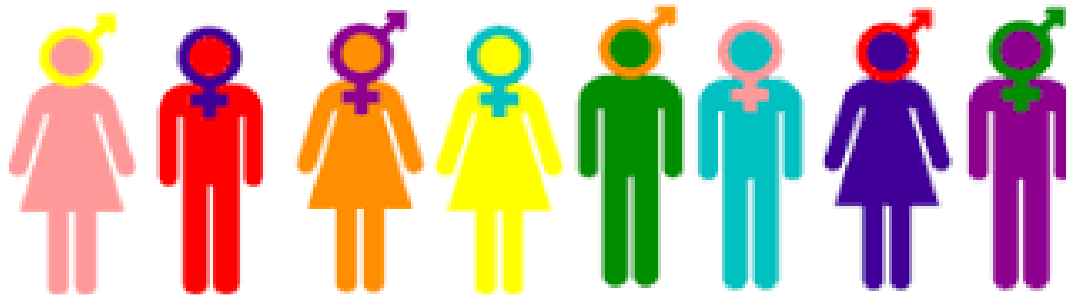
Intervention

- It is not your role to get them to come out to you
- If the individual feels safe and ready they will; and if they don't, despite what you have done, they won't – role play coming out with the client
- Allow for ambiguity - be where the client is
- Assure confidentiality

Intervention con't

- Individual and group interventions are both effective strategies
- Use bibliotherapy (in office)
- It is essential to work with families

Reflection



Creating LGBTQ+ Affirming Environments



Providing Competency-Based Social Work Services for the LGBTQIA+ Community

1. Acknowledge that LGBTQ+ people are your clients.
2. Educate yourself and your co-workers about the reality of LGBTQ+ people
3. Use gender neutral language
4. Use the words “gay,” “lesbian,” “bi,” “trans,” “non-binary,” “questioning,” “queer,” “intersex,” or “asexual” in an appropriate context when talking with clients about diversity

Providing Competency-Based Social Work Services for the LGBTQ Community

5. Have literature and other visible signs in the waiting room or in your office that speaks to creating an LGBTQ+ affirming environment
6. If a client discloses to you that they are gay or lesbian or bisexual or transgender or questioning - Talk about it!
7. Not all LGBTQ+ persons need to be referred to counseling immediately
8. If you are a LGBTQ+ professional and feel that it is safe to come out, come out

Providing Competency-Based Social Work Services for the LGBTQ Community

9. If you are a cisgender oriented professional, be a professional ally for LGBTQ+ persons
10. Do not confuse transgender identity, and gay/lesbian/bisexual identity
11. Research resources in the LGBTQ+ community and escort clients to them, if they need your support

Internet Resources

LGBTQ+ Resources in Ireland

- These organizations support LGBTQ+ people in Ireland in a variety of fields.
- [BelongTo](#) is an organisation for Lesbian, Gay, Bisexual and Transgendered (LGBT) young people, aged between 14 and 23.
- [TENI](#) is the Transgender Equality Network Ireland, which works for transgender people in Ireland by providing Support, Advocacy, Education and Capacity Building of other organisations to support trans* people in Ireland.
- [ShoutOut](#) provides informational services and workshops to students, teachers, youth workers, social workers and parents & guardians to help improve the lives of LGBTQ+ young people
- [ReachOut](#) and [SpunOut](#) both contain libraries of general and specific information, personal stories and advice for LGBT people and their families

Internet Resources



LGBT
IRELAND

LGBT.ie
LGBT Support Line
1800 929 539

Find Support in Your Area

<https://lgbt.ie/find-support-in-your-area/>

Internet Resources

BeLonG

- BeLonG To is an organisation for Lesbian, Gay, Bisexual and Transgendered (LGBT) young people, aged between 14 and 23.
- Weekly groups are held for 14-23 year olds in Outhouse (Dublin's LGBT community centre), at 105 Capel St, Dublin 1, every Sunday at 3.30.
- BeLonG To grew out of a youth group called OutYouth, which had been running on and off, on a voluntary basis for years
- Since then, the project has been working with LGBT young people, providing them with a safe, relaxed, comfortable environment, where they can make friends with other young people in similar situations and find support, inclusion, acceptance and social justice. They also have the option of one-to-one support and access to information on education, health and legal services.

E: info@belongto.org

W: www.belongto.org

- BeLonG To Youth Service
Parliament House
13 Parliament Street
Dublin 2

Internet Resources



- **NATIONAL LGBT+ HELPLINE**
- **freephone 1800 929 539**
- **Monday to Thursday: 6:30pm to 10:00pm,**
- **Fridays: 4:00pm to 10:00pm,**
- **Weekends: 4:00pm to 6:00pm**
- **Out of Hours:**
- **Freephone the Samaritans on 116-123
24/7 and 365 days a year.**

Internet Resources



- **TRANSGENDER FAMILY SUPPORT LINE**
- **01 907 3707**
- **Sundays, 6pm to 9pm and**
- **Tuesdays, 10am to 12pm**
- **Out-Of-Hours:**
- **Freephone the Samaritans on 116-123 24/7 and 365 days a year.**

Internet Resources



Parents, Families & Friends of Lesbians & Gays (PFLAG)

- <http://www.pflag.org>
- PFLAG is a national organization dedicated to providing information, education, and support for the parents, families, and friends of lesbians and gays. You will find a list of local chapters, their mission statement, and general information about sexual orientation at the PFLAG site.

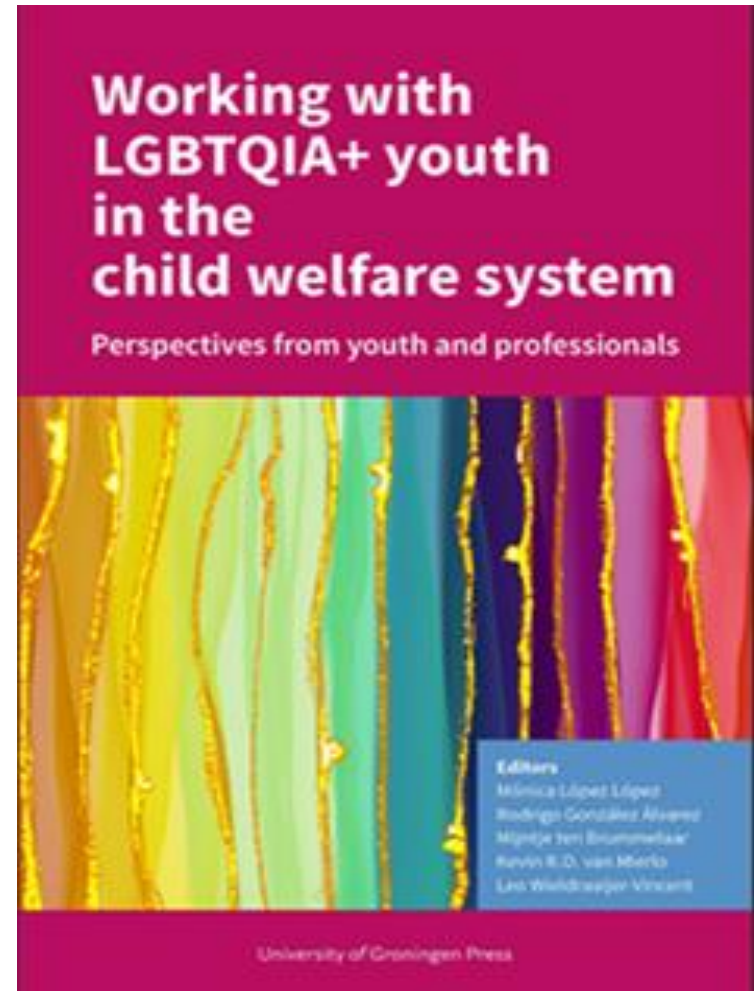
Internet Resources

Family Acceptance Project (San Francisco State University)

- Supportive Families, Healthy Children booklet

- <http://familyproject.sfsu.edu/>

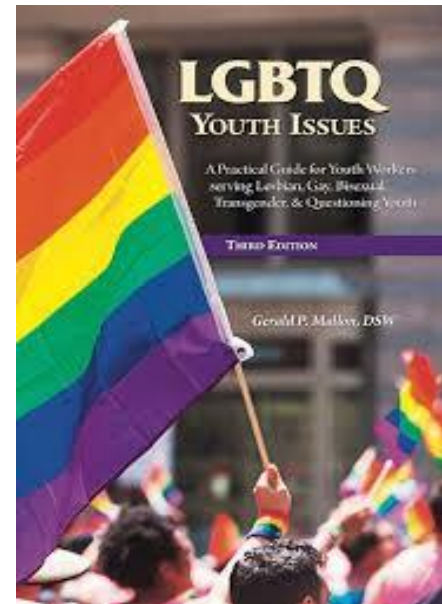
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Social Work Practice with
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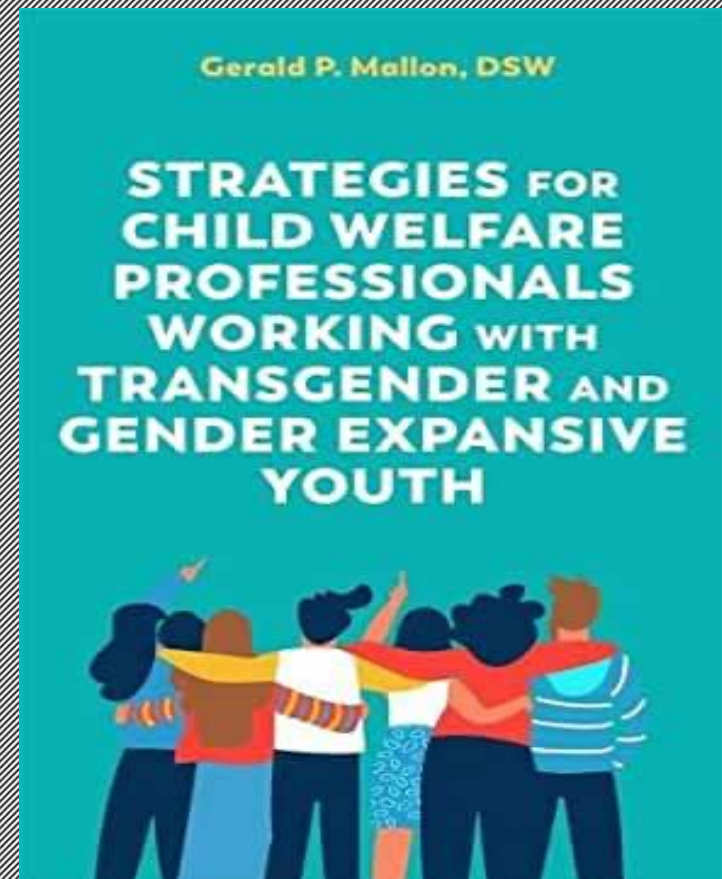
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**SOCIAL WORK PRACTICE
WITH TRANSGENDER AND
GENDER EXPANSIVE YOUTH**

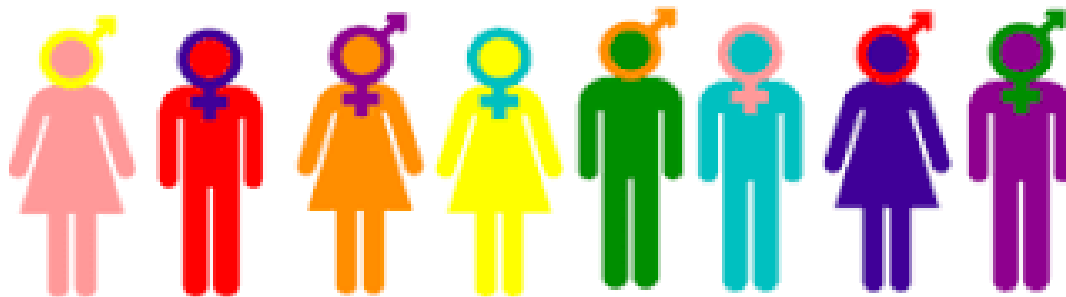
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JAMA SHELTON AND
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Final Thoughts

Questions, Comments



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