RECOMMENDATIONS FOR PRACTITIONERS WORKING WITH SEXUAL MINORITY AND GENDER DIVERSE YOUTH

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PRESENTATION OVERVIEW

- Terminology and Foundational Knowledge
- Developmental Considerations for Gender and Sexual Minority (GSM) children and youth
- Risk and Protective factors for GSM youth
- Highlights from Guidelines developed by the American Psychological Association (APA)
- 'Best Practice' Recommendations
  - Working with youth
  - Working with families/caregivers
  - Working with schools

FOUNDATIONAL KNOWLEDGE

(APA, 2012; APA, 2015; SAMHSA, 2015)

- Professional health and mental health organizations have affirmed that ***the variety of sexual orientations, gender identities, and gender expressions are reflections of human diversity*** and do not constitute a mental disorder.

- Sexuality occurs across a continuum ~ same-gender attractions and relationships are normal variations of human sexuality

- Gender is a nonbinary construct and diversity of gender identities and gender expressions are healthy and normative

FOUNDATIONAL KNOWLEDGE
(APA, 2010; APA, 2012; APA, 2015; NASP, 2010; SAMHSA, 2015)

- Ethical guidelines demand mental health professionals to treat all individuals with respect, dignity, and to advocate for fairness and justice

- Ethical expectations
  - Right to self-determination
  - Respect for privacy
  - Acting to benefit others (and avoid harming those they serve)
  - Work to promote healthy and safe school, community, and family environments

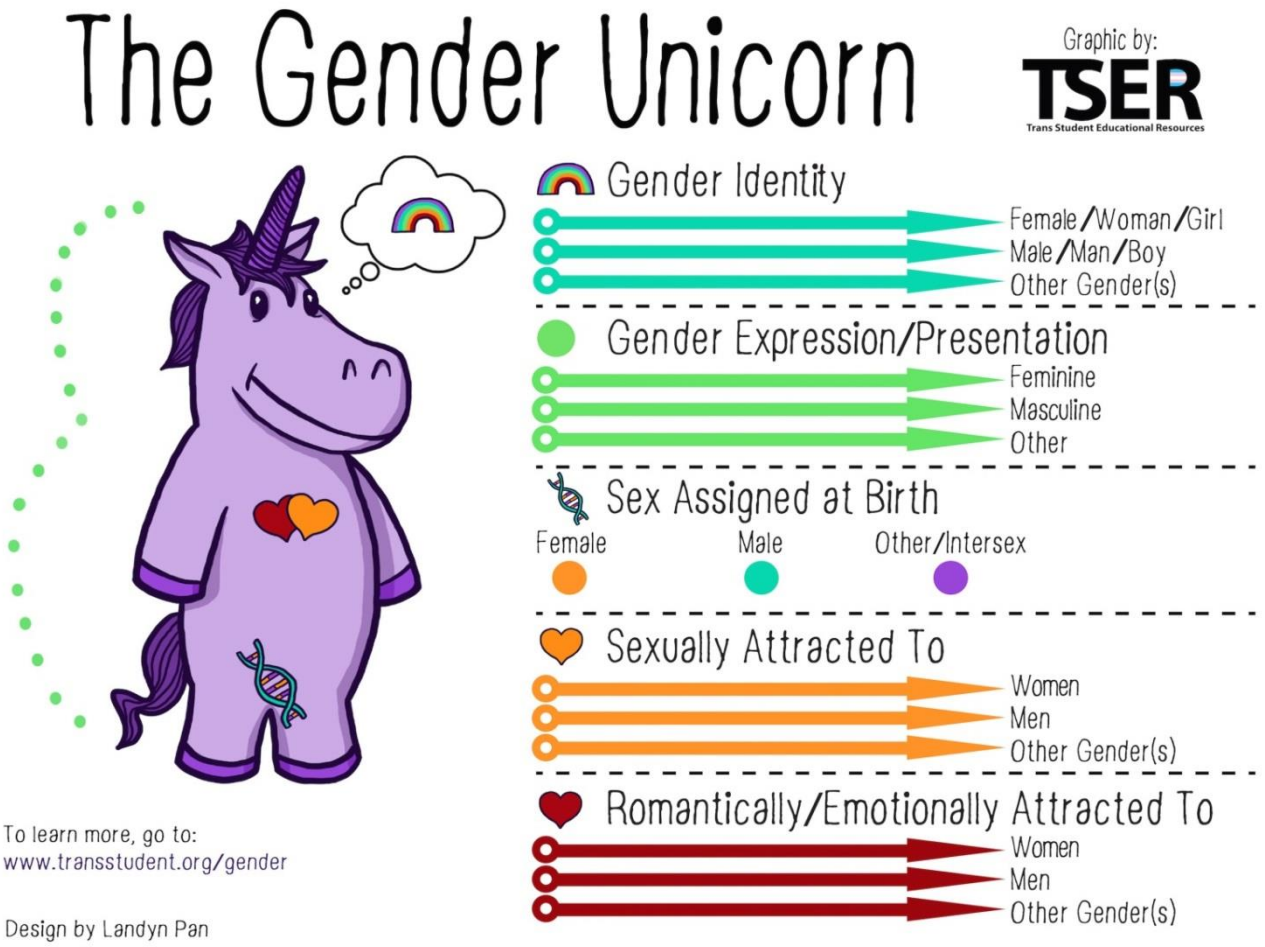
- Interventions aimed at changing sexual orientation or gender identity are ineffective, coercive, unethical, and associated with harmful outcomes. These practices have been denounced by every major medical, psychiatric, psychological, and mental health organization.

Terminology
(From APA 2008, APA, 2012, and GLSEN, 2016)

- General Considerations
  - Language/terminology is ***constantly evolving***
  - Individuals identify the terminology that fits them
  - Everyone can identify along dimensions of gender and sexuality ~ whether or not one is aware of this

Visual Representation of Gender and Sexuality Constructs

Retrieved from http://transstudent.org/gender



Terminology
(From APA 2008, APA, 2012, and GLSEN, 2016)

- Sexual Orientation – Pattern of emotional, romantic and/or sexual attractions to another person. Attraction could be to men, women, both, or neither. Sense of identity based on attractions.
  - Heterosexual or 'straight' – attractions to some members of the other sex
  - Gay/Lesbian – some same-gender attractions
    - Gay men/lesbian women are preferred terms over homosexual
  - Bisexual – some attractions to both men and women
  - Pansexual – attractions to some – regardless of gender identity
  - Some research suggests it's less categorical and may manifest more as a continuum. May also be more fluid for some individuals.

Terminology (cont'd)

(APA, 2012; APA, 2015; Meier & Labuski, 2013; NASP, 2014)

- Sex assigned at birth– Assigned at birth and typically categorized as male or female based on physical attributes (e.g., external and internal anatomy). *But biological sex has variations (see Intersex/DSD).*
- Gender identity. The person's *internal* sense of being male, female, both, neither, or another gender. The person's deeply felt sense of being a boy/man, girl/woman, or another gender may or may not correspond with their sex assigned at birth.
- Cisgender. Individuals whose gender identity aligns with their body and sex assigned at birth
- Transgender. An umbrella term that includes individuals whose gender identity does not match sex assigned at birth. It includes persons assigned female at birth who wish to live as men (transgender men) and those assigned male at birth who wish to live as women (transgender women). Others may not want body modifications to express their asserted gender.

Terminology (cont'd)
(APA, 2012; APA, 2015; Meier & Labuski, 2013; NASP, 2014)

- Gender diverse – Individuals whose gender identity, role, or expression may differ from what expected for that sex assigned at birth. This includes people who identify outside the prescribed gender binary. This term is preferred over the potentially stigmatizing terms 'gender nonconforming' or 'gender variant'. Other terms that can have similar meanings are gender creative and gender expansive.
- Gender expression/gender presentation. The many ways that individuals choose to communicate gender to oneself or others. This can be through clothing, voice, hairstyle, accessories and other behaviors. Usually along masculine/feminine dimensions. May or may not be consistent across time and situations. May or may not match the individual's gender identity.
- Intersex/DSD – Intersex or Differences/Disorders of Sex Development (DSD) is an umbrella term covering a wide variety of conditions in which sex traits (chromosomes, genitals, and/or reproductive organs) do not fit typical definitions of male or female sex development. Families may be aware of intersex/DSD conditions at birth or later in child's development (accordalliance.org; oii-usa.org)

Terminology (cont'd)
(APA, 2015; GLSEN, 2016; NASP, 2011; NASP, 2014)

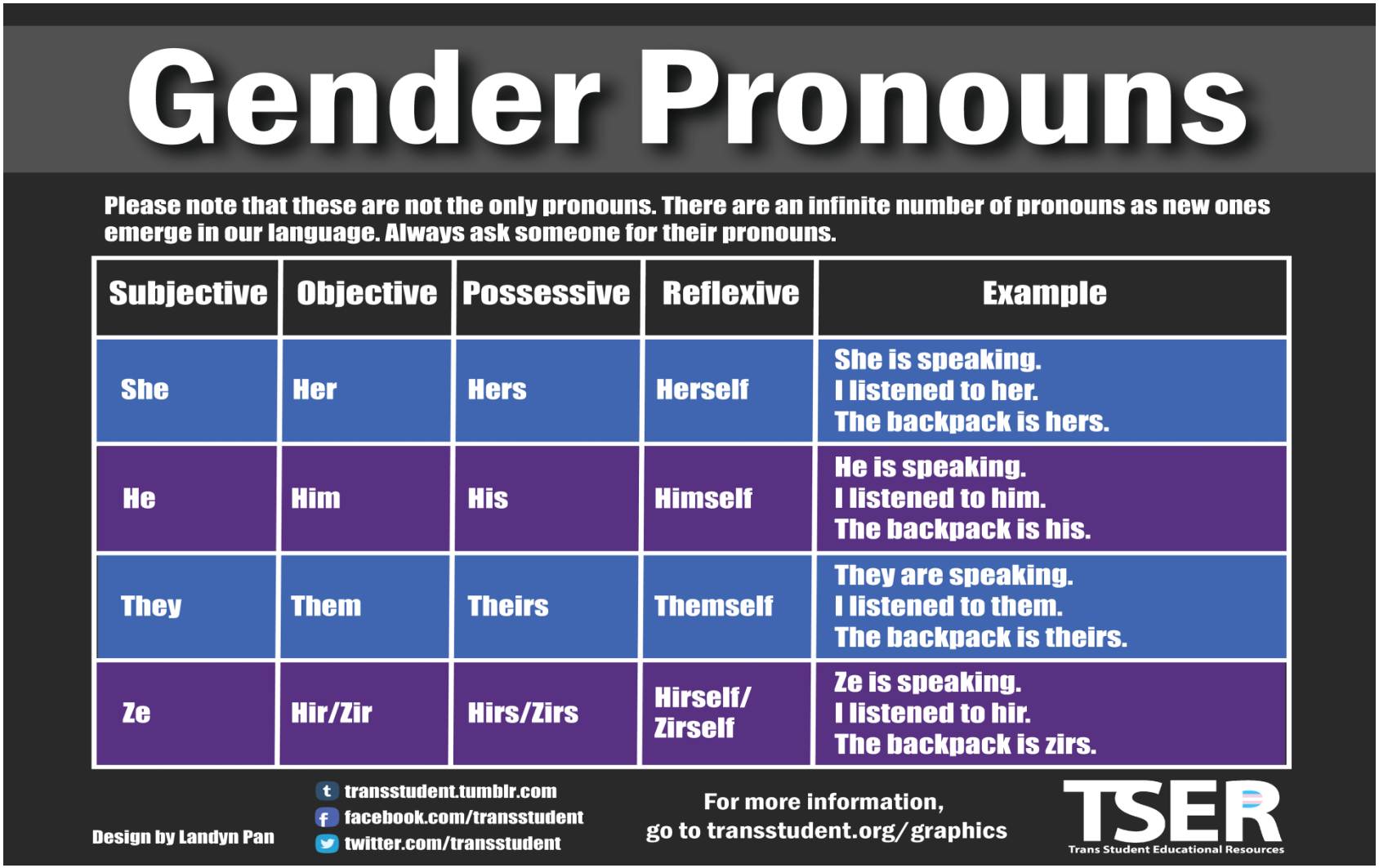
- Questioning: An individual who is exploring, defining, and/or coming to terms with their sexual orientation, gender identity, or gender expression
- Queer: An umbrella term that has been reclaimed by members of the SGM community. Historically, it has been considered a derogatory or pejorative term and the term may continue to be used by some individuals with negative intentions. Usually individuals use this term to reflect a sexual orientation, gender identity, or gender expression that does not conform to dominant societal norms. Some youth may adopt 'queer' as an identity term to avoid limiting themselves to the gender binaries of male and female or to the perceived restrictions imposed by lesbian, gay and bisexual sexual orientations

Terminology (cont'd)
(APA, 2012; APA, 2015; GLSEN, 2016; SAMHSA, 2015)

- Gender Binary: Approaching gender as consisting of rigid male and female categories and roles where other possibilities for gender (expression or identity) are not allowed. The gender binary does not consider the diversity of gender identities and gender expressions for individuals and a rigid approach is oppressive to anyone who does not conform to social norms.
- Heterosexism: A system that favors heterosexual sexual orientations and denies, stigmatizes or denigrates any non-heterosexual form of behavior, identity, or relationship. It may take the form of homophobia or biphobia through bias and discrimination toward sexual minority individuals.
- Professional health and mental health organizations have affirmed that ***the variety of sexual orientations, gender identities, and gender expressions are reflections of human diversity*** and do not constitute a mental disorder. Change efforts are coercive, unsuccessful, and associated with harmful outcomes.

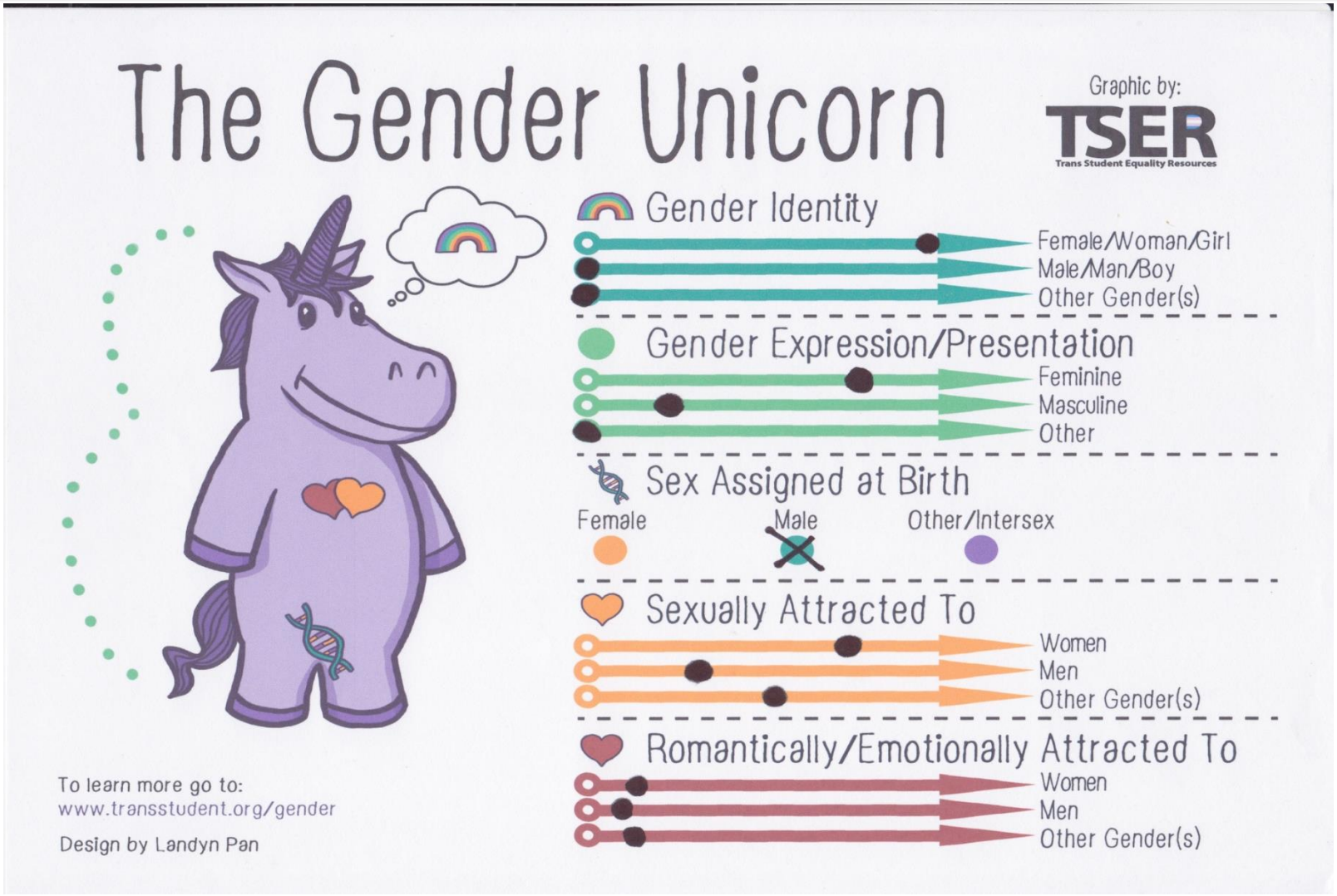
Pronouns

From: http://www.transstudent.org/pronouns101



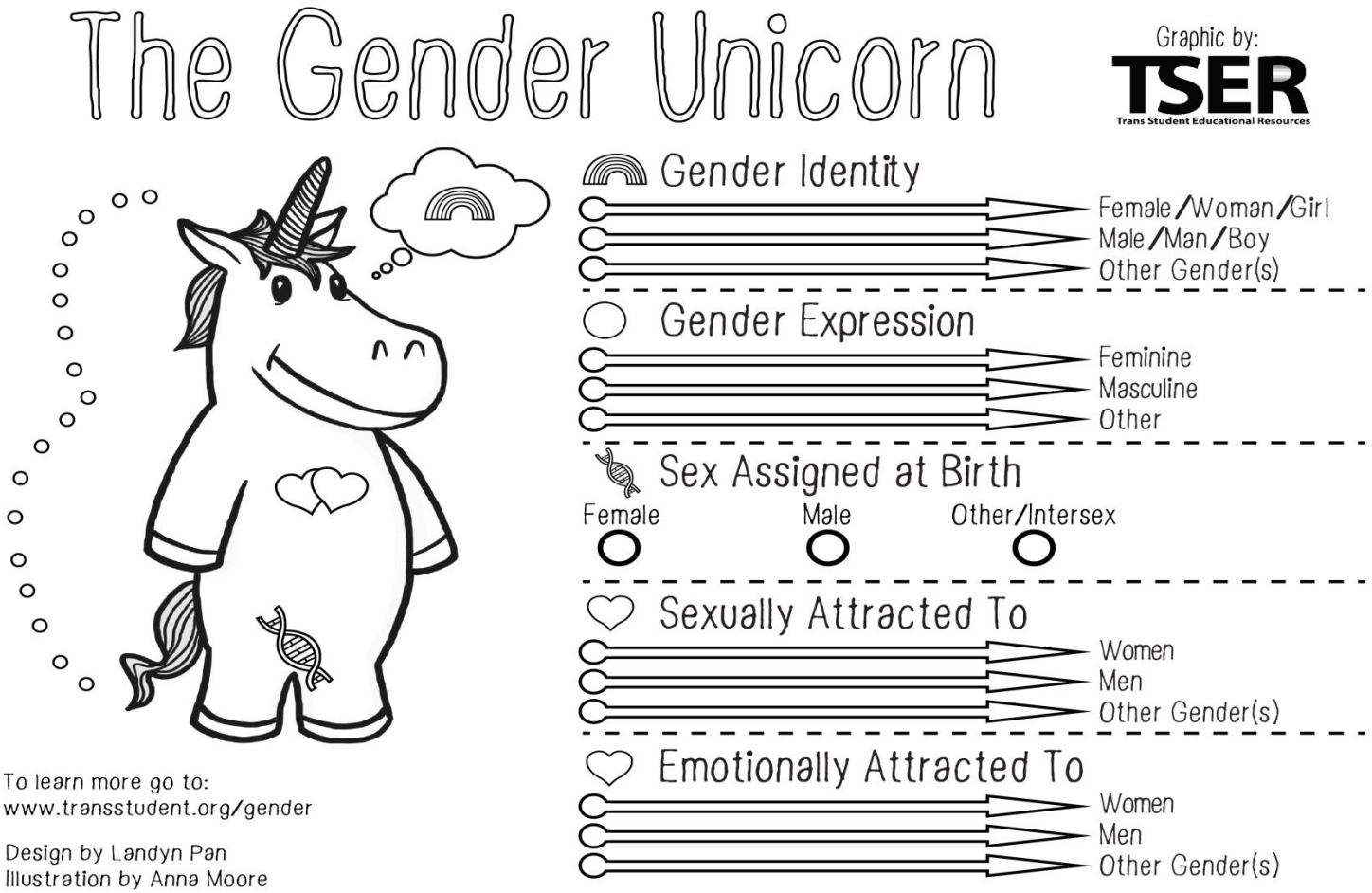
Example

http://www.transstudent.org/genderunicornexample.jpeg



Completing your own 'Gender Unicorn'

From: http://www.transstudent.org/unicorncoloringpage.jpg



Terms to avoid and rationale
From: https://www.glaad.org/reference

- Homosexual
- Sexual preference (use sexual orientation)
- Gay lifestyle, homosexual lifestyle, transgender lifestyle
- Gay agenda or Homosexual agenda
- Special rights
- Any defamatory language
- Associating LGBTQ individuals with pedophilia, child abuse, sexual abuse, bestiality, etc. There are no facts associated with these claims.

Developmental and Contextual Considerations
(Savin-Williams, 2005; SAMHSA, 2014)

GENDER AND SEXUAL MINORITY (GSM) YOUTH ARE SIMILAR TO OTHER YOUTH

- Also going through same developmental issues as other adolescents

INTRA-GROUP DIFFERENCES

- Heterogeneity with regard to labeling, coming out process
- Heterogeneity at all levels – race/ethnicity, socio-economic status, geographic location, religious/spiritual orientation

CONSIDER CONTEXTUAL DIFFERENCES DEPENDING ON GEOGRAPHIC LOCATION, CULTURE OF FAMILY OF ORIGIN, ETC. ~ MESSAGES ABOUT SEXUAL ORIENTATION AND GENDER IDENTITY

Developmental and Contextual Considerations
(Savin-Williams, 2005; SAMHSA, 2014)

IMPORTANCE OF SUPPORTIVE FAMILY, SCHOOL, AND COMMUNITY ENVIRONMENTS TO FACILITATE HEALTHY DEVELOPMENT IN GSM YOUTH

GSM YOUTH ARE COMING OUT TO THEMSELVES AND THEIR CONTEXT EARLIER THAN EVER BEFORE

Early years reflection from Laurin Mayeno – Out Proud Families:

http://www.outproudfamilies.com/?page_id=25

Conceptual Framework: Minority Stress and Risk and Resilience (Meyer, 2003; Meyer, 2015)

- Minority Stress in GSM individuals
  - Understanding of risk, as well as factors that may mitigate stressors, in order to facilitate well-being and promote mental health
    - Risk: Stigma, prejudice, and discrimination constitute *unique stressors* for SGM youth and may create a hostile and stressful social environment
    - External events (e.g., rejection in home and school) as well as internal events (e.g., internalization of negative societal attitudes)
    - Minority stressors associated with increased health and mental health concerns

Conceptual Framework: Minority Stress and Risk and Resilience ~ continued (Meyer, 2003; Meyer, 2015)

- Minority Stress model also considers coping and social support as buffers to negative experiences
- Resilience as ability to survive and thrive in the face of adversity
- Community resilience ~ communities furthering capacity to develop and sustain well-being

Promoting Resilience among GSM youth (Meyer, 2015)

- Community resilience ~ communities furthering capacity to develop and sustain well-being and promote health and mental health
  - Through tangible resources
    - Access to support groups, hotlines, education, affirmative laws and policies
  - Through approaches that enhance resilience
    - Working with youth, families, school staff, and community members to increase education and advocate for affirmative interactions and messages for GSM youth

Coming out as a sexual and gender minority
(From a range of sources including APA 2008, 2012, 2015)

- Coming out for sexual minority individuals: The process where individuals who do not identify as heterosexual (e.g., individuals who identify as gay, lesbian, bisexual, pansexual, etc.) realize/acknowledge/inform/affirm their sexual orientation.
- Coming out for transgender and gender diverse individuals: Process that allows individuals to affirm and actualize their gender identity.
- The process of coming out as a gender or sexual minority individual is lifelong. The process involves disclosure to oneself, and to families, friends, co-workers, etc. In each new situation an GSM individual must decide if it is safe to come out.

POTENTIAL RISK FACTORS FOR GSM CHILDREN AND YOUTH

(Anhalt & Morris, 2003; SAMHSA, 2014)

- GENERAL ANXIETY ABOUT COMING OUT
- FEAR AND NEGATIVE CONSEQUENCES OF COMING OUT TO OTHERS
  - *Coming out to self and others IS an additional stressor and could become a risk factor*
  - *In a supportive environment, coming out is associated with well-being*
- Coming out to family
  - The uncertainty of parental reactions as part of the coming out process can create distress for youth
  - Some youth who may have experienced close relationships with certain family members may lose these support sources upon disclosing their sexual orientation or gender identity
- Coming out to friends
  - Fear of rejection from peers and loss of friendships is particularly stressful for adolescents

POTENTIAL RISK FACTORS FOR GSM CHILDREN AND YOUTH –cont'd

(Anhalt & Morris, 2003; SAMHSA, 2014)

- VICTIMIZATION RELATED TO SEXUAL ORIENTATION
  - VICTIMIZATION IN THE HOME
    - Increased risk of verbal, physical, and sexual abuse
    - Potential expulsion from home
      - SGM youth are overrepresented among homeless youth
      - Of the estimated 1.6 million homeless American youth, between 20 and 40 percent identify as lesbian, gay, bisexual or transgender (National Gay and Lesbian Task Force, 2007)
    - Efforts to try to change sexual orientation or gender identity (and reject youth's affirmed identity)

Family context and outcomes for GSM youth (Ryan et al., 2009, 2010)

- Through the 'Family Acceptance Project', Dr. Caitlyn Ryan and colleagues have examined the impact of family rejection and family acceptance for SGM youth

- Family rejecting behaviors included:
  - Communicating that an SGM identity is wrong and efforts to try to change child's sexual orientation, gender identity, and/or gender expression
  - Name calling, verbal harassment, hitting, slapping because of LGBT identity
  - Excluding youth from family and family activities
  - Blaming child when discriminated for LGBT identity
  - Pressuring child to be more (or less) masculine or feminine

Family context and outcomes for GSM youth (Ryan et al., 2009, 2010)

- Parents viewed rejecting behaviors as efforts to help their children survive in a world that may not accept them
- Youth viewed these behaviors as rejecting of ***who they are***
- Differing perspectives result in family conflict and are associated with significant health and mental health risks for youth
- In their 2009 study, sexual minority youth who reported high levels of family rejection during adolescence were:
  - 8.4 times more likely to have attempted suicide
  - 5.9 times more likely to report high levels of depression and felt more hopeless
  - More likely to engage in health risk behaviors including drug use and unprotected sex
  - Group was compared to sexual minority youth who had not been rejected or who experienced low levels of rejection

Family context and outcomes for SGM youth ~ cont'd (Ryan et al., 2009, 2010)

- Accepting and supportive behaviors on the part of parents/caregivers
  - Talking openly about sexual orientation and gender identity
  - Appreciation of gender expression (especially when not conforming to expected gender role)
  - Taking youth to LGBT organization or event
- Compared to youth with low levels of acceptance, youth with high levels of acceptance:
  - Scored higher on measures of self-esteem, social support, and general health
  - Less likely to report suicide ideation and attempts; reported lower levels of depression
- FAMILY ACCEPTANCE PROTECTS GSM YOUTH FROM NEGATIVE OUTCOMES AND PROMOTES WELL-BEING

School Climate for LGBTQ Youth

- The 2013 National School Climate Survey found that 74.1% of LGBT students reported being verbally harassed because of their sexual orientation and 55.2% of those students reported verbal harassment due to their gender expression.

- More than a third (36.2%) of LGBT students reported physical harassment due to their sexual orientation and 22.7% experienced physical harassment due to their gender expression.

- When LGBT students experience victimization and discrimination in their school environment, they are more likely to miss school, have lower grades, and report more depression symptomatology (Kosciw et al., 2014)

School Climate for LGBTQ Youth – cont'd

- About half of the students (56.7%) who were harassed or assaulted did not report the incident to school staff because they feared the situation would escalate or no intervention would occur.
- When LGBT students did report an incident, 61.6% noted that school staff did nothing in response.
- When a Gay-Straight Alliance (GSA) or other LGBT-affirming student group is present in the school setting, LGBT students are less likely to hear negative and derogatory remarks about sexual orientation or gender identity, feel more connected to their school community, and report less depression symptoms (Kosciw et al., 2014).

School Risk Factors for Transgender and Gender Diverse Students

- Victimization, harassment, and discrimination by peers and school personnel
- Increased mental health concerns
- Poorer educational outcomes (e.g., anxiety about school, school avoidance)
- Hostile school environment; fear and isolation
- Limited intervention from school staff

(Greytak, Kosciw, & Diaz,2009; Grossman et al., 2009; McGuire, Anderson, Toomey, & Russell, 2010)

http://www.youtube.com/watch?v=qDVr7IfppAo&feature=youtu.be

Additional considerations for youth with intersex/DSD conditions
(Malouf & Baratz, 2014)

- History of silence, stigma, and shame regarding physical appearance and medical procedures imposed on individuals with intersex/DSD conditions
- Students and families may or may not disclose information about condition to mental health or school practitioners. Allow students to self-label regarding this aspect of their identity
- Individuals with some DSD conditions may have associated medical needs. Collaboration and communication with families and health care providers is necessary to facilitate the best supports in school settings
- May or may not identify with the LGBT community

https://www.youtube.com/watch?v=cAUDKEI4QKI

Mental Health Consequences of Risk Factors for GSM Youth

- Risk factors associated with prejudice, stigma, discrimination, rejection, and victimization associated with youth's sexual orientation and/or gender identity linked to:
  - Elevated rates of anxiety, depression, and low self-esteem
  - Increased suicide ideation, suicide attempts, and completed suicide
  - Increased substance use

Protective Factors for GSM Youth

- ACCEPTANCE/AFFIRMATION OF SEXUAL ORIENTATION, GENDER IDENTITY, AND GENDER EXPRESSION
  - By Self and Others
- CONTINUED SOCIAL SUPPORT FROM FAMILY AND FRIENDS
- NEW SOURCES OF SUPPORT

Protective Factors in School Settings

- Presence of a Gay-Straight Alliance (GSA) or similar student group
- Supportive School Staff
  - Associated with greater sense of belongingness and with higher educational aspirations
  - Staff who are responsive to bullying incidents are working toward safer climate for all youth
- Comprehensive bullying/Harassment Policies that are inclusive of sexual orientation, gender identity, and gender expression domains.

The Positive Impact of Inclusive Anti-Bullying Policies

- A recent GLSEN report on anti-bullying policies in U.S. school districts found that 70.5% of districts have such policies
- Only a minority of those districts (i.e., 14.1%) enumerated protections based on gender identity and/or gender expression
- LGBT students who were in schools that included protections based on sexual orientation, gender identity, and/or gender expression reported a more positive school climate and better school experiences.
- These students reported lower rates of victimization and harassment, more effective and supportive staff, and greater feelings of safety and belongingness in schools

(Kull, Kosciw, & Greytak, 2015)

Protective Factors (cont'd)

- Presence of Allies across context – home, school, community
- Ally: An ally is an individual who advocates on behalf of a person or group that at-risk of being targeted or discriminated. In this context, it would be an individual who works toward combatting homophobia, transphobia, biphobia, heterosexism and other devaluing and discriminatory experiences for GSM individuals.

Highlights from APA Guidelines for working with LGB Clients (APA, 2012)

- Guideline 13 – Psychologists strive to recognize cohort and age differences among LGB individuals
  - Time period can shape developmental tasks. There are generational differences.
- Guideline 14 – Psychologists strive to understand the unique problems and risks that exist for LGB youths
  - Consider psychological impact of current social and political events and media portrayals of sexual minorities on LGB youths
  - Psychologists are aware of risk and protective factors for LGB youth and strive to build contextual strengths (e.g., supportive and positive home, school, and community settings)

Highlights from APA Guidelines for working with LGB Clients ~ cont'd (APA, 2012)

- Guideline 3 – Same-sex attractions, feelings, and behaviors are part of typical variation of human sexuality. Efforts to change sexual orientation are not effective or safe.
  - 'Interventions' that aim to change gender identity, gender expression, or sexual orientation in children and youth are coercive, harmful, and inappropriate (SAMHSA, 2015)

Highlights from APA Guidelines for working with LGB Clients – cont'd (APA, 2012)

- Guideline 4 – "Psychologists are encouraged to recognize how their attitudes and knowledge about LGB issues may be relevant to assessment and treatment and seek consultation…when needed"
  - Adopting a 'sexual orientation blind' perspective is ineffective (similar to a 'color blind' approach). This invalidates unique needs of LGB individuals
  - Psychologists are encouraged to be aware of explicit and implicit biases they may have…how their own background may influence perspectives on LGB clients

Best Practices working with Youth: Counseling (Fisher, 2014)

- GSM children and youth may be referred for counseling for issues related to sexual orientation or gender identity or their concerns may be unrelated to these aspects of identity
- Openness about discussion of these topics is important, but may not be the source of concern
- Confidentiality is key

Best Practices working with Youth: Counseling (Fisher, 2014)

- Exploration of identity may be an aspect youth want to address in counseling
- Coming out to others may be a topic youth want to discuss
  - Working with youth so they understand 'pros' and 'cons' and unpredictability of reactions and adjustment to process
- Reducing risk and increasing buffers/protective factors to promote resilience

Best Practices Working with Families (APA, 2012)

- Guideline 10 – Mental health professionals encouraged to understand how identity may impact youth's family and the relationship with the family
  - Some families may be unprepared to accept youth's identity due to familial or cultural norms, religious beliefs, or negative stereotypes
  - Family crisis may ensue following youth's coming out

Best Practices Working with Families (APA, 2012)

- Guideline 10 (cont'd)-
  - In some families, acceptance may be unconditional and no crisis will occur
  - Family may need support in acquiring knowledge of identity constructs – sexual orientation, gender identity, gender expression
    - Including confrontation of negative societal or cultural attitudes
  - Mental health professionals encouraged to promote support

Best Practices Working with Families (Ryan et al., 2009; Ryan et al., 2010; SAMHSA, 2014)

- Family reactions to GSM youth coming out range from highly rejecting to highly accepting ~ many may be ambivalent
- Recommended goal: helping families learn to support their children while understanding the family's struggles
- Providing accurate information on sexual orientation, gender identity, and gender expression is key to family's adjustment process and may help lessen rejection

Best Practices Working with Families (cont'd)
(Ryan et al., 2009; Ryan et al., 2010; SAMHSA, 2014)

- Important to connect parents to sources of support (online or community), so parents can learn from other parents and observe supportive relationships
- Important to help families understand that rejection (or lack of acceptance or support) can contribute to negative health outcomes, including suicidality

From Ryan (2013) – FAP: https://vimeo.com/74871461

Best Practices Working with Families (cont'd)
(Ryan et al., 2009; Ryan et al., 2010; SAMHSA, 2014)

- Family behaviors that reduce risk for health and mental health problems and promote well-being:
  - Talking with youth about LGBT identity
  - Supporting identity even if uncomfortable as a parent
  - Advocating for child when mistreated by others
  - Welcoming child's LGBT friends and partners to family events
  - Supporting child's gender expression
  - Maintain confidentiality

Best Practices working with Families ~

- Access PFLAG Resources available for free:
- https://www.pflag.org/publications
- Sample publications
  - Our Children: Questions and Answers for families of LGBT, gender-expansive, and queer youth and adults
  - Faith in our Families: Parents, families and friends talk about faith, sexual orientation, and gender identity
  - Our Trans Loved Ones

Recommendations for Practitioners Working with GSM Youth in Schools (APA & NASP, 2015)

- For ALL sexual minority and gender diverse students:
  - Affirmation of all sexual orientations, gender identities, and gender expressions as positive and normal variations of the human experience
  - Respect right to privacy - Highlights from NASP (2010) Ethics:
    - *Standard I.2.6:* School psychologists respect the right of privacy of students, parents, and colleagues with regard to sexual orientation, gender identity, or transgender status. They do not share information about the sexual orientation, gender identity, or transgender status of a student (including minors), parent, or school employee with anyone without that individual's permission.
  - Use appropriate gender pronouns
  - Advocate for access to sex-segregated activities in a manner that is consistent with the youth's gender identity
  - Promote safe and positive school environments free of bullying and harassment

Best Practices for GSM Youth in Schools

- From NASP's (2011) Position Statement on GLBTQ Youth
  - BE AN ALLY
  - Establish and enforce nondiscrimination policies
  - Educate students and staff
  - Intervene when there is discrimination/harassment
  - Provide support for students exploring their sexuality and gender identity
  - Promote attitudes and behaviors that affirm LGBTQ+ youth and families
  - Recognize Strengths and Resilience

Best practices for supporting transgender, gender diverse, and intersex youth in schools (APA & NASP, 2015)

- Allow access to activities and facilities consistent with gender identity
- Avoiding use of gender segregation in school uniforms, dances, and extracurricular activities
- Providing gender neutral bathrooms for individuals who prefer to use them
- Use pronouns that students identify as best for them
- Respect right to privacy and decisions of students and families
- Support affirming interventions, exploration and acceptance of gender identity and expression
- Promote cross-agency collaboration

NASP 2014 – Position Statement – Recommendations for School Psychologists

- Safe and welcoming school environments for all students
  - Safe zones for transgender students
  - Supporting formation of support or social groups for gender diverse and transgender students
  - Working with school staff to provide mentorship for these students
- Professional development on these issues and provision of training to school staff
- Providing counseling and gathering community support resources

Student rights protected by federal law (NCTE, 2014)

Guidance from NCTE:

- Title IX has been interpreted as including transgender and gender diverse students
- Unlawful to bully, harass, and discriminate on the basis of gender identity
- Students have right to equal access to all educational activities, including athletic and extra-curricular opportunities and school events. Exclusion based on gender expression or gender identity violates rights.
- Right to wear clothing and present oneself in a way consistent with gender identity
- Right to privacy: Transgender status and any transition information should be treated as confidential and not disclosed without consent.

GLSEN and NCTE Model District Policy

Additional recommendations from policy:

- School district should not require proof of medical treatment to respect a student's asserted gender identity
- Students have right to be addressed by names and pronouns of their choosing
- Student's gender identity and preferred name should be respected regardless of issued state and federal documents
- If dress codes exist, allow students to dress consistent with gender identity

GLSEN & NCTE, 2014

"Promoting Resiliency for Gender Diverse and Sexual Minority Students in Schools" Series –

- Available at:

  http://www.apa.org/pi/lgbt/programs/safe-supportive/lgbt/resilience.aspx
- Series Includes:
  - Pamphlet 1: How educators can support families with gender diverse and sexual minority youth.
  - Pamphlet 2: Supporting transgender and gender diverse students in schools: Key recommendations for school health personnel.
  - Pamphlet 3: Supporting transgender and gender diverse students in schools: Key recommendations for school administrators.
  - Pamphlet 4: School-based risk and protective factors for gender diverse and sexual minority children and youth: Improving school climate.
  - Pamphlet 5: Key terms and concepts in understanding gender diversity and sexual orientation among students.

NATIONAL RESOURCES

- PFLAG – Nation's largest family and parent support organization https://www.pflag.org/
- Trevor Project: http://www.thetrevorproject.org/
- NASP - http://www.nasponline.org/resources-and-publications/resources/diversity/lgbtq-youth
- APA - http://www.apa.org/pi/lgbt/index.aspx
- GLSEN - http://www.glsen.org/
- Gender Spectrum - https://www.genderspectrum.org/
- Resources specific to individuals with intersex/DSD conditions:
  - AIS-DSD Support group: http://aisdsd.org
  - Inter/Act Youth: http://interactyouth.org

SOUTH CAROLINA RESOURCES

- Gender Benders - http://genderbenders.org/
  - Grassroots organization for GSM youth ~ provides resources, support, trans-inclusive community
- SC Equality: http://www.scequality.org/
  - Non-partisan coalition to secure civil and human rights
- Harriet Hancock Center – Columbia, SC
  - http://harriethancockcenter.org/
  - 'Safe and welcoming space for South Carolina's LGBT community'
  - Many resources and youth programs (e.g., Youth OUTLOUD, Queer Prom)