Building Resilience, Reducing Risk: Four Pillars to Creating Safer, More Supportive Schools for LGBTQ+ Youth

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Abstract

In 2017 Delaware, LGBTQ+ Youth reported that almost 1 out of 3 were bullied on school grounds. Additionally, over 50% reported feeling sad/hopeless; and almost as many seriously considered suicide as an option, while 32% planned for suicide with almost 1 in 4 reporting having acted on their suicide plan at least once. Of all the students who reported a suicide attempt, 10% required medical treatment as a result of their attempt. The Delaware Department of Education does not have comprehensive statewide protections in place to support some of our most vulnerable youth, yet school districts can make a positive difference in implementing policy/practices to build resilience and reduce risk.

This article will focus on four key areas where schools and school districts may implement changes toward creating safer, more supportive schools: (1) policy/procedures that protect LGBTQ+ students at the administrative level; (2) comprehensive cultural sensitivity training for serving LGBTQ+ students and their families; (3) incorporating inclusive curriculum on LGBTQ+ history into the classroom; (4) and creating, supporting, and sustaining gender sexuality alliances in both the middle and high schools.

Background

Every day in our schools, LGBTQ+ youth experience unkind words, hurtful actions, and harmful policies that put their lives at risk, yet it doesn’t have to be that way.

What Do Delaware LGBTQ+ Youth Say?

The Delaware Youth Risk Behavior Survey (DEYRBS) is conducted every other year in select classes within Delaware public high schools. The most recent data is from 2017, and for the first-time included questions asking about gender identity and gender expression (See Table 1).

| Table 1. Delaware 2017 Youth Risk Behavior Survey Questions |
|------------------------------------------------------------|
| On Gender Identity                                         |
**On Gender Expression**

Question: A person's appearance, style, dress, or the way they walk or talk may affect how people describe them. How do you think other people at school would describe you?

| Response Options                              | Male | Female |
|-----------------------------------------------|------|--------|
| Very Feminine                                 | 1.1  | 25.6   |
| Mostly Feminine                               | 1.3  | 38     |
| Somewhat Feminine                             | 2.3  | 16.2   |
| Equally Feminine & Masculine                  | 10.6 | 16.7   |
| Somewhat Masculine                            | 12.4 | 2.4    |
| Mostly Masculine                              | 37.9 | .6     |
| Very Masculine                                | 34.3 | .5     |

Youth today identify across a much broader spectrum of options including pansexual, asexual, bisexual, agender, non-binary, as well as transgender. The option “unsure” may be interpreted two different ways: (1) the young person completing the survey is still engaged in age appropriate identity formation and is, therefore, unsure of their own identity at time of completing the survey; or (2) the youth does not see an option that represents how they self-identify and so choose “unsure” as the closest option to their self-identity.

By accessing KidsCount.Org figures for 2017 in conjunction with DEYRBS 2017, we can calculate that there are approximately 986 (2.4%) Transgender/Non-Binary Youth and 4,824 (13.7%) Gay, Lesbian, Bisexual, Pansexual Youth in our High Schools. These same youth responded to the following questions on school safety (see Table 2).²

Table 2. Delaware 2017 Youth Risk Behavior Survey Question on Sexual Orientation

| Choices                | Total |
|------------------------|-------|
| Heterosexual           | 86.3  |
| Gay or Lesbian         | 3.3   |
| Bisexual               | 7.5   |
| Not Sure               | 2.9   |

We find that Delaware LGBTQ+ Youth are twice as likely to be threatened or injured with a weapon on school property, bullied on school property, or felt so unsafe they didn’t go to school at least once in the last 30 days compared to heterosexual youth (See Table 3). This unsafe environment leads to an accumulation of stressors over time creating a stress proliferation in LGBTQ+ youth that can exacerbate mental health problems and decrease an ability to cope.³

Table 3. School Safety Delaware High Schools
The Human Rights Campaign Report *Growing UP LGBTQ in America* surveyed over 10,000 students age 13-17 and national trends substantiate and affirm the challenges of Delaware LGBTQ+ Youth. Twice as likely as their peers to say they have been physically assaulted, kicked or shoved, 92% of LGBTQ+ youth also report they hear negative messages about being LGBTQ+. The top sources of this negative messaging are the school, their peers, and social media. The biggest problems our LGBTQ+ youth face in Middle School and High School is parents/family are not accepting (26%) and trouble at school/bullying (21%).

**The Effects of Trauma**

“*What’s in your pants!*” A teenager shouts this across the room at a transgender student. The aggressor continues to shout while moving toward the student when another classmate steps in between to intervene. The substitute teacher either didn’t notice or didn’t know how to intervene so they remained at the desk looking at papers. (Incident Occurred in a Delaware Middle School)

The historical ten identified “adverse childhood experiences” (ACE’s) outlined in the original study from 1995-97 were not explicit to LGBTQ+ experiences yet illustrate a road map toward understanding the adverse impact of trauma on LGBTQ+ adolescents and adults (see Figure 1).

**Figure 1. LGBTQ+ Adverse Experiences**

Research on the impact of microaggressions toward LGBTQ+ adults and adolescents who recall school victimization highlight heightened psychological distress, higher substance abuse use, higher risk of depression, social anxiety, suicidality, and may suffer long-term negative
effects which can contribute to increased rates of PTSD within the LGBTQ+ community.\textsuperscript{9,10}\n
Further exploration of the long-term outcomes on LGBTQ+ adults appear to show even higher levels of distress when race/ethnicity and/or transgender/non-binary are factored in to identify the compounded adverse impact often felt with intersectional minority identities.\textsuperscript{11–13}

“Actions which promote invisibility and deny a young person’s right to exist as their authentic self is trauma” - author

By reviewing the DEYRBS 2017 data we can hear directly from our LGBTQ+ youth; and the findings are startling and disturbing. LGBTQ+ Youth are twice as likely to feel sad or hopeless compared to heterosexual youth. These same youth are 3-4 times as likely to consider suicide and make a suicide plan. Most unsettling is that 1 in 5 report attempting suicide with almost 10% of those youth requiring medical intervention (see Table 4).

Table 4. Effects of ACEs on High School Youth in Delaware

| Question                                           | Heterosexual | Gay / Lesbian | Bisexual | Not Sure |
|----------------------------------------------------|--------------|---------------|----------|----------|
| Felt Sad or Hopeless                               | 27.5         | 53.1          | 66       | 46.4     |
| Seriously considered attempting suicide            | 13.3         | 4.4           | 49.6     | 31.8     |
| Made a plan about how they would attempt suicide   | 10.4         | 33.2          | 39.4     | 25.6     |
| Attempted Suicide                                  | 5.4          | 18.6          | 24.2     | 14.3     |
| Suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse | 1.7          | 9.6           | 6.9      | 5.6      |

Additionally, when homes are not safe and when schools are not safe, the research reflects higher rates of homelessness, higher rates of Juvenile Justice System use, higher rates in the Foster Care System, increased dropout rates, and increased high risk behaviors (including self-harm, drugs, alcohol abuse, and unsafe sexual activity.\textsuperscript{11,14,15}

Our LGBTQ+ young people deserve better in our schools. We owe it to our children to have an affirming launch into adulthood. How might we begin to create safer, more supportive schools? How might we build resilience while reducing risk for our LGBTQ+ youth?

**Microaggressions**

**Microassaults** are small behaviors that are intentional and purposefully hurtful (e.g., using the wrong name or pronouns, name calling, making derogatory statements or threatening gestures).

**Microinsults** are rude statements that are usually unintentional or unconscious that indicate ignorance or bias (e.g., asking inappropriate questions, redirecting someone to another bathroom, or facial expressions that reveal confusion or disgust).

**Microinvalidations** are statements or actions that are usually unintentional or unconscious that ignore, minimize, or nullify a person’s identity (e.g., having only two options for sex/gender on forms, classroom illustrations of famous people in history who are all white, all straight, and all cisgender).
**Intersectional Microaggressions** are microaggressions (of all types) that are connected to multiple parts of a person’s identity (such as race and gender or religion and ethnicity).

**Systematic Microaggressions & Discrimination** are institutionally based microaggressions that cannot be attributed to one specific person but that affect many or most members of a group.

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Green, E.R. & Maurer, L.M (2015). *The Teaching Transgender Toolkit: A Facilitator’s Guide to Increasing Knowledge, Decreasing Prejudice & Building Skills.* Ithaca NY: Planned Parenthood of The Southern Finger Lakes: Out for Health.

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**What We Can Do To Make a Difference**

I propose there are four key areas in which both immediate and lasting change can occur to improve the safety and support for all children. These four pillars are: (1) policy/procedures that protect LGBTQ+ students at the administrative level; (2) comprehensive cultural sensitivity training for faculty/staff serving LGBTQ+ students and their families; (3) incorporating inclusive curriculum on LGBTQ+ history into the classroom; (4) and creating, supporting, and sustaining gender sexuality alliances at both the Middle and High Schools.

**Pillar One: School Administration / School Districts**

Currently there is no unequivocal policy through the Delaware Department of Education that protects all youth across the spectrum of Sexual Orientation, Gender Identity, and Gender Expression (SOGIE). Yet, there is evidence on the positive impact such policies have toward creating a safer environment for LGBTQ+ youth. When the highest leadership position in the school system makes it clear that LGBTQ+ students are protected the results are astounding!17,18

Resource: Model district anti-bullying and harassment policy by GLSEN (Gay, Lesbian, Straight Education Network)

First and foremost, anti-bullying policies that are explicitly inclusive of SOGIE and enforced show a significant reduction in the risk of suicide attempts in LGBTQ+ youth in both Middle School and High School (see Figure 2). Additionally, LGBTQ+ youth who report a reduction in victimization at school more readily identify adult mentors/alleys, which leads to LGBTQ+ youth being more likely to engage in school activities while reducing high risk behaviors.19,20

Hatzenbuehler and Keyes compared school district policies in Oregon based on inclusive to least inclusive policies and noted: (1) school districts that adapt inclusive anti-bullying policies see a decrease in rates of suicide attempts from previous years. The research noted:

> “Whereas 31% of lesbian and gay adolescents attempted suicide in counties where school districts were the least likely to adopt inclusive anti-bullying policies, only 17% attempted suicide in counties with the greatest proportion of school districts with inclusive policies.”21

This is corroborated by Saewyc, et al., whose study illustrated that schools with anti-bullying policies for three or more years showed greater gains in reduced risk and increased safety than schools for fewer years/no policy. Equally significant, the studies demonstrated reduced risk for suicide among both LGBTQ+ youth and heterosexual youth!22
Other Policy Suggestions: De-gender rites of passage in a school. Change Homecoming King & Queen to Homecoming Royalty. Eliminate gendered graduation robes.  

Pillar Two: Cultural Sensitivity Training of Faculty and Staff

A 2019 study entitled Supporting Safe and Healthy Schools for LGBTQ Students: A National Survey of School Counselors, Social Workers, and Psychologists reported the following findings:

- 37% of school mental health professionals had never received any formal training on LGBTQ+ student issues during their career
- 76% of school mental health professionals received little to no training on working with LGBTQ+ youth.

May I call you friend?

A school administrator shared with me that school policy and parent demands prevented them calling the transgender student by their affirming name and pronouns. Each time the student was called their “dead name” and mis-gendered, the pain on their face was evident.

The school administrator’s heart is about affirming each child’s inherent dignity and self-worth. Found between a proverbial rock and hard place they looked at the student and said, “May I call you friend?” The student smiled because in that moment they knew they were seen and affirmed. (This act of compassion and mentoring occurred in a Delaware School)

Another study noted “teachers’ own prejudice against sexual minorities may prevent them from being positive role models for sexuality minority youth.”

When our school’s staff/faculty are ill-prepared and ill-trained to support LGBTQ+ youth, microaggressions go unaddressed and support for these same youth decrease. The most effective way to create culturally competent supportive staff/faculty is to require excellent professional development for all staff/faculty that: (1) centers on evidence-based research on challenges/opportunities of LGBTQ+ youth across the full SOGIE spectrum; (2) brings in the significance of intersectionality in relationship with ACE’s; and (3) through didactic exercises,
waive staff to become aware of and know how to effectively intervene when microaggressions occur; (4) while providing insight on how to build resilience within these same youth.\textsuperscript{26}

Transitions Delaware, llc has provided trainings to school administration and faculty ranging between sixty minutes to a full day based upon the identified needs and goals of the school or district. One of the frequent benefits noted by those who attend the trainings is the small group, didactic exercises that afford participants the opportunity to ask clarifying questions and practice affirmation exercises geared at building resilience in youth. The other benefit extolled by participants is having a greater understanding on the differences between sexual orientation \textit{and} gender identity \textit{and} gender expression in relation to greater insight on the ever-expanding vocabulary and pronoun usage of LGBTQ+ youth in their identity formation. It is advisable that consultation be provided by trainers to those requesting a training in advance to ensure the materials provided and delivered are relevant content to the school making the request.

When comprehensive training is well delivered, research illuminates that staff/faculty become effective supporters of LGBTQ+ youth:

(1) LGBTQ+ students with supportive school staff, were less likely to feel unsafe (40.6\% vs. 78.7\%);

(2) were less likely to miss school because they felt unsafe or uncomfortable (16.9\% vs. 47.2\%);

(3) had higher GPAs than other students (3.3 vs. 2.8); and

(4) were less likely to say they might not graduate high school (1.7\% vs. 9.5\%).\textsuperscript{11}

\textbf{Pillar Three: Inclusive Curriculum}

An inclusive curriculum validates LGBTQ+ youth. Hidden rainbows are as important as hidden figures!\textsuperscript{27} Visibility of LGBTQ+ historical figures from math/science, the arts, political/social justice, etc. provide the LGBTQ+ young person mentors and role models while also “normalizing” the value and importance of LGBTQ+ contributions to society to heterosexual and cisgender students.\textsuperscript{28–30} In one study it was noted that

“by infusing relevant transgender content into lectures and reading materials, instructors contribute to normalizing transgender issues for an inclusive curriculum.”\textsuperscript{31}

The Center for Disease and Control (CDC) reports LGBTQ+ youth are more likely to have poor health outcomes than their heterosexual (straight) peers.\textsuperscript{32} Yet, only 4\% of LGBTQ+ students were taught positive information about LGBTQ+ people or issues in their health classes.\textsuperscript{18}

Through direct interactions with LGBTQ+ youth in the Delaware public schools, there is a common refrain heard from the students who say sexuality education is “heteronormative and cisnormative.” The Delaware DHHS Division of Public Health identified in the Delaware Adolescent Sexual Health State Plan (January 2011) that

…services must be strengthened to better serve sexual minority youth (i.e., students who either identified as gay, lesbian, bisexual, transgender or reported any same-sex sexual contact). And inclusive policies will strengthen the capacity of youth-serving organizations to prevent risk behaviors and improve health
outcomes among Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ) youth.33

Yet, upon informal interviews with parents, students, and health teachers, an inclusive health and sex education for Delaware LGBTQ+ youth does not appear to be evident despite there being the January 2011 Delaware Adolescent Sexual Health State Plan which states services must be strengthened to better serve sexual minority youth.

In February 2019, New Jersey became the second state to require that schools teach LGBTQ+ history.34 When LGBTQ+ students were interviewed on the value of inclusive curriculum, they shared:

“learning about LGBTQ+ issues in my school helped stop bullying;” and “people in my class became more aware of things…were simply more educated afterwards, and had a little bit of an easier time talking about LGBTQ+ issues;” and another student explained “that when LGBTQ+ youth see themselves reflected in the curriculum they can feel hopeful about their own future.”35,36

From library books to lesson plans, it is important to incorporate LGBTQ+ into the curriculum because the visibility gives LGBTQ+ students hope while educating and fostering compassion among their peers. In fact, 75.2% of LGBTQ+ students in schools with an inclusive curriculum said their peers were accepting of LGBTQ+ people, compared to 39.6% of those without an inclusive.18

Pillar Four: Gender Sexuality Alliances (GSAs)

GSAs are one of the primary ways for middle and high school administration, faculty, and staff to offer safe, affirming space for LGBTQ+ youth. The interplay of the four pillars of support creates a school environment where a GSA moves from crisis management of daily microaggressions to affirming informal/formal mentoring, as well as leadership development through a school sanctioned club.

GSAs are in a key position to foster youth resiliency through mentoring. The historical three primary purposes of GSAs are social, support, and advocacy.37 GSA Advisers are often school teachers or counselors; and research supports that having “mentors—especially teacher-mentors—are positive forces in the educational resilience of sexual minority youth ... [and] provide the biggest boost to the chances that sexual minority youth will attend college.”24

When GSAs are active in the school, research has demonstrated time and again that there were fewer homophobic comments from peers, less victimization related to SOGIE, greater school connectedness, and more instances of teacher intervention in homo/transphobic harassment.

Additionally, and as significantly important, youth who can be present in a GSA experience a more positive impact on their emotional/mental health through both peer and adult mentoring.38 Through peer mentoring, LGBTQ+ students are able to share experiences and stories of affirmation and support which displace and replace the negative messages encountered in homes or in hallways. When a GSA is scheduled on a day/time that makes it difficult for LGBTQ+ youth to attend, the result is a poorly attended GSA that is often erroneously interpreted by
faculty/administration as meaning there are no LGBTQ+ students in need of this support at that school. This is a false narrative. Equally important, if the GSA Adviser is not recognized by the LGBTQ+ youth as an ally, they will not attend. Trust is essential for youth to risk disclosing their identity to a representative of the school. Christian Rummel, of the American Institute for Research writes:

> In-person mentoring relationships may serve an important protective role for [LGBTQ+] youth, helping them to confront challenges…informal mentoring relationships with adults may promote positive educational outcomes…mentors appear well-positioned to offer ongoing support that can attune to the needs of youth as they navigate through phases of exploring, accepting, and sharing their identity with others.14

Big Brothers Big Sister of Delaware is the only formal mentoring program in state that has a targeted LGBTQ+ Mentoring Program for both Middle/High School GSAs, as well as traditional Big Brother/Sister/Sibling matches with Little Brother/Sister/Sibling matches.

In summary, the positive outcomes of GSAs are a reclaimed sense of hope, a stronger sense of school connectedness, and an increased sense of well-being, educational attainment, and positive self-esteem. The positive impact of GSAs at both the middle & high schools translates into a reduction in high-risk behaviors and increase in resiliency in LGBTQ+ youth.

**Building Resilience in Today’s LGBTQ+ Youth**

"When all Americans are treated as equal, no matter who they are or whom they love, we are all more free."--Barack Obama

In the note he left behind when Eric James Borges engaged in death by suicide, he said, “my pain is not caused because I am gay. My pain was caused by how I was treated because I am gay.”39 How best can we counter pain caused by a community that treats LGBTQ+ youth differently because they are LGBTQ+? The four pillars briefly highlighted in this article provide a road map toward changing the school culture by creating community of inclusion and cultivating mentoring relationships which can inspire LGBTQ+ youth to discover their dreams and live into their potential.

By engaging the metaphor of four pillars in relation to a school building, if one pillar is missing, the structure will become unstable, and unstable buildings risk collapse, often resulting in injury or even death. In K. Asakura article entitled *Paving Pathways Through the Pain: A Grounded Theory of Resilience Among Lesbian, Gay, Bisexual, Trans and Queer Youth*, they write:

> “On the one hand, it courageous that these LGBTQ+ youth actively paved their own pathways to resilience. On the other hand, there are potential personal costs on youth when they individually assume and carry responsibilities to cope with external adversities put on them.”40

Today, as evidenced by the Delaware Youth Risk Behavioral Survey, many Delaware schools operate without any or with minimal efforts in helping LGBTQ+ youth pave a pathway to resilience.
Shifting a school climate from exclusion to inclusion requires an intentional and transparent plan! The actionable steps for District School Boards, Superintendents, and School Administration require changing the policies and procedures to include SOGIE; and to allocate funds for training culturally competent and equipped faculty and staff to be better able to engage intersectional, appropriate formal and informal mentoring of LGBTQ+ youth in the classroom, on the stage, court, field, and through GSAs at the middle and high school.

The personal cost on LGBTQ+ youth cultivating their own resilience often involves the adverse effects of ACEs and long-term medical/mental health complications as outlined in the beginning of this article. Therefore, it is beholden upon school boards, superintendents, school administration, faculty and staff to “… have the responsibility to share the burden carried by these youth and envision and actualize the kind of social climates that pave smoother pathways on which LGBTQ+ youth can march on with less pain and more joy.”

Summary

Twenty years ago this year, I graduated from Columbia Theological Seminary (CTS) with a master’s in divinity. I was told during my entrance interview that I was the first LGBTQ+ person to openly apply to the seminary. I did not walk into a welcoming community, and my experience fluctuated from welcoming to tolerated to hostile. This was a difficult environment for my then 28-year-old self. I had access to family, friends, and community support as I walked through this stressful time. Sadly, we do not afford that same level of encouragement and support to children who come out as young as ten (and even younger). Through my own lived experience, I can “testify” on the importance of bringing LGBTQ+ curriculum into the classroom setting as a means for creating positive change. I can “preach” about the value of having faculty and administration engage in cultural sensitivity training.

During my senior year, I preached a sermon entitled “Let the Little Children Come unto Me, Do Not Stop Them” referencing the words ascribed to Jesus in the Gospel of Mathew 19:14. My message was about creating safer, more supportive churches and schools for LGBTQ+ youth. The day after I talked about the risks LGBTQ+ youth face, the world learned about Mathew Shepperd; and a year after I graduated, the student body started a gender sexuality alliance called Imago Dei, which means ‘image of God’.

This GSA remains active at CTS as a positive influence in the community, and the southern seminary now celebrates diversity across sexual orientation, gender identity, and gender expression. Meaningful and lasting change takes time. This kind of change calls forth leaders who are willing to risk public scrutiny and criticism.

May you, the reader, be inspired and encouraged to be the change we need today in our Delaware schools. May we, together, create safer, more supportive schools for LGBTQ+ youth.

References

1. 2017 Delaware Youth Risk Behavior Survey (YRBS). Center for Drug and Health Studies, University of Delaware. Retrieved from https://www.cdhs.udel.edu/seow/school-surveys/youth-risk-behavior-survey-(yrbs)

2. 2019 Kids Count in Delaware Fact Book. (2019). Retrieved from http://udspace.udel.edu/handle/19716/24098
3. Nurius, P. S., Uehara, E., & Zatzick, D. F. (2013, April). Intersection of stress, social disadvantage, and life course processes: Reframing trauma and mental health. *American Journal of Psychiatric Rehabilitation, 16*(2), 91–114. PubMed https://doi.org/10.1080/15487768.2013.789688

4. Growing Up, L. G. B. T. in America. Retrieved from https://www.hrc.org/youth-report/about-the-survey

5. "The Adverse Childhood Experiences (ACE) Study". (2014, May). CDC.gov. Retrieved from https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/about.html

6. Greene, D. C., Britton, P. J., & Fitts, B. (2014). Long-term outcomes of lesbian, gay, bisexual, and transgender recalled school victimization. *Journal of Counseling and Development, 92*, 406–417. https://doi.org/10.1002/j.1556-6676.2014.00167.x

7. Mueller, A. S., James, W., Abrutyn, S., & Levin, M. L. (2015, May). Suicide ideation and bullying among US adolescents: Examining the intersections of sexual orientation, gender, and race/ethnicity. *American Journal of Public Health, 105*(5), 980–985. PubMed https://doi.org/10.2105/AJPH.2014.302391

8. Russell, S. T., Ryan, C., Toomey, R. B., Diaz, R. M., & Sanchez, J. (2011, May). Lesbian, gay, bisexual, and transgender adolescent school victimization: Implications for young adult health and adjustment. *The Journal of School Health, 81*(5), 223–230. PubMed https://doi.org/10.1111/j.1746-1561.2011.00583.x

9. Rivers, I. (2004). Recollections of bullying at school and their long-term implications for lesbians, gay men, and bisexuals. *Crisis, 25*(4), 169–175. PubMed https://doi.org/10.1027/0227-5910.25.4.169

10. Roberts, A. L., Austin, S. B., Corliss, H. L., Vandermorris, A. K., & Koenen, K. C. (2010, December). Pervasive trauma exposure among US sexual orientation minority adults and risk of posttraumatic stress disorder. *American Journal of Public Health, 100*(12), 2433–2441. PubMed https://doi.org/10.2105/AJPH.2009.168971

11. Mustanski, B., Andrews, R., & Puckett, J. A. (2016) The effects of cumulative victimization on mental health among lesbian, gay, bisexual, and transgender adolescents and young adults. *American Public Health Association, 106*, 527-533

12. James, SE, Herman, J.L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016, December). The Report of the 2015 US Transgender Survey. *National Center for Transgender Equality.*

13. Burdge, H., Hyemingway, Z. T., & Licona, A. C. (2014). Gender nonconforming youth: Discipline disparities, school push-out, and the school-to-prison pipeline.

14. Mallory, C., Sears, B., Hasenbush, A., & Susman, A. (2014) Ensuring access to mentoring program for LGBTQ youth. *The Williams Institute.* Retrieved from https://williamsinstitute.law.ucla.edu/wp-content/uploads/Access-to-Youth-Mentoring-Programs.pdf

15. Rummel, C. L. (2016) Mentoring lesbian, gay, bisexual, transgender, questioning, intersex, and gender nonconforming youth. *American Institutes of Research.* Retrieved from http://nationalmentoringresourcecenter.org/images/PDF/LGBTQ_Population_Review.pdf
16. GLSEN.org. (2019). GLSEN Chapters create LGBTQ-inclusive schools. Retrieved from https://www.glsen.org/chapters

17. Asakura, K. (2017, September). Paving Pathways through the pain: A grounded theory of resilience among lesbian, gay, bisexual, trans, and queer youth. J Res Adolesc, 27(3), 521–536. PubMed https://doi.org/10.1111/jora.12291

18. Hatzenbuehler, M. L., Birkett, M., Van Wagenen, A., & Meyer, I. H. (2014, February). Protective school climates and reduced risk for suicide ideation in sexual minority youths. American Journal of Public Health, 104(2), 279–286. PubMed https://doi.org/10.2105/AJPH.2013.301508

19. Kosciw, J. G., Greytak, E. A., Giga, N. M., Villenas, C., & Danischewski, D. J. (2016). The 2015 National School Climate Survey: The experiences of lesbian, gay, bisexual, transgender, and queer youth in our nation’s schools. Retrieved from https://www.glsen.org/sites/default/files/2015%20National%20GLSEN%202015%20National%20School%20Climate%20Survey%20%28Final%29.pdf

20. Goodenow, C., Szalacha, L., & Westheimer, K. (2006). School support groups, other school factors, and the safety of sexual minority adolescents. Psychology in the Schools, 43, 573–589. https://doi.org/10.1002/pits.20173

21. Hatzenbuehler, M. L., & Keyes, K. M. (2013, July). Inclusive anti-bullying policies and reduced risk of suicide attempts in lesbian and gay youth. J Adolesc Health, 53(1, Suppl), S21–S26. PubMed https://doi.org/10.1016/j.jadohealth.2012.08.010

22. Saewyc, E. M., Konishi, C., Rose, H. A., & Homma, Y. (2014, January 1). School-based strategies to reduce suicidal ideation, suicide attempts, and discrimination among sexual minority and heterosexual adolescents in Western Canada. International Journal of Child, Youth & Family Studies : IJCYFS, 5(1), 89–112. PubMed https://doi.org/10.18357/ijcyfs.saewyce.512014

23. GLSEN. (2016) Transgender Model District Policy. Retrieved from https://www.glsen.org/article/transgender-model-district-policy

24. GLSEN. (2019). Supporting Safe and Health Schools. Retrieved from https://www.glsen.org/article/supporting-safe-and-healthy-schools-lgbtq-students

25. Gastic, B., & Johnson, D. (2009). Teachers-mentors and the educational resilience of sexual minority youth. Journal of Gay & Lesbian Social Services, 21, 219–231. https://doi.org/10.1080/10538720902772139

26. Transitions Delaware llc. (2019). Training Services. Retrieved from https://transitionsde.com/training-services/

27. National Aeronautics and Space Administration. (2017) Website Educational Resource: From Hidden to Modern Figures. Modern Figures Education Resources Retrieved from https://www.nasa.gov/modernfigures/education-resources

28. Gowen, L. K., & Winges-Yanez, N. (2014). Lesbian, gay, bisexual, transgender, queer, and questioning youths’ perspectives of inclusive school-based sexuality education. Journal of Sex Research, 51(7), 788–800. PubMed https://doi.org/10.1080/00224499.2013.806648
29. Maguth, B. M., & Taylor, N. (2014). Bringing LGBTQ topics into the social studies classroom. *Social Studies, 105*, 23–28. https://doi.org/10.1080/00377996.2013.788471

30. Helmer, K. (2016). Reading queer counter-narrative in the high-school literature classroom: Possibilities and challenges. *Discourse (Abingdon), 37*(6), 902–916. https://doi.org/10.1080/01596306.2015.1120943

31. Case, K. A., Stewart, B., & Tittsworth, J. (2009). Transgender across the curriculum: A psychology for inclusion. *Teaching of Psychology, 36*, 117–121. https://doi.org/10.1080/00986280902739446

32. CDC. (2019) Protective factors for LGBT youth: Information for health and education professionals. Retrieved from https://www.cdc.gov/healthyyouth/disparities/lgbtprotectivefactors.htm

33. Delaware DHHS Division of Public Health. (2011) Delaware Adolescent Sexual Health State Plan. Retrieved from https://dhss.delaware.gov/dhss/dph/chca/files/deyouthshsp.pdf

34. Adely, H. (2019, Feb). New Jersey becomes second state in nation to require that schools teach LGBT history. *North Jersey Record*. Retrieved from https://www.northjersey.com/story/news/2019/02/01/nj-schools-teach-lgbt-history-new-law/2743028002/

35. Snapp, S. D., Burdge, H., Licona, A. C., Moody, R. L., & Russell, S. T. (2015). Students’ perspectives on LGBTQ-inclusive curriculum. *Equity & Excellence in Education, 48*(2), 249–265. https://doi.org/10.1080/10665684.2015.1025614

36. Hanna, J. L. (2017). One student at a time: A reflection of support for a first-year GSA club and its impact on perceived acceptance for LGBTQ students. *The Clearing House: A Journal of Educational Strategies, Issues and Ideas, 90*(3), 98–102. https://doi.org/10.1080/00098655.2017.1301154

37. Network, G. S. A. (2019) What is a GSA club? Retrieved from https://gsanetwork.org/what-is-a-gsa/

38. Poteat, V. P., Yoshikawa, H., Calzo, J. P., Gray, M. L., DiGiovanni, C. D., Lipkin, A., . . . Shaw, M. P. (2015, January-February). Contextualizing gay-straight alliances: Student, advisor, and structural factors related to positive youth development among members. *Child Development, 86*(1), 176–193. PubMed https://doi.org/10.1111/cdev.12289

39. HuffPost. (October, 2012) Eric James Borges’ Suicide Note, Memorial Service Sheds New Insight Into Bullied Gay Teen’s Life. Retrieved from https://www.huffpost.com/entry/eric-james-borges-gay-teen-filmmaker-suicide-note_n_1240101

40. Asakura, K. (2017, September). Paving pathways through the pain: A grounded theory of resilience among lesbian, gay, bisexual, trans, and queer youth. *J Res Adolesc, 27*(3), 521–536. PubMed https://doi.org/10.1111/jora.12291

41. Hawkins, L. (2018, Jan 16) *When do children know their gender identity?* Children’s Hospital of Philadelphia: Health Tip of the Week. Retrieved from https://www.chop.edu/news/health-tip/when-do-children-develop-their-gender-identity
42. 2017 Delaware Youth Risk Behavior Survey (YRBS). Center for Drug and Health Studies, University of Delaware. Retrieved from https://www.cdhs.udel.edu/seow/school-surveys/youth-risk-behavior-survey-(yrbs)

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