Research Proposal: LGBTQ+ Youth Familial Relationships

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## **Abstract**

There is a need for evidence-based interventions to help improve familial acceptance towards LGBTQ+ youth. The LGBTQ+ community is at a higher risk for certain health disparities like substance abuse, suicidal ideation, bullying, and depression. Familial acceptance is protective of these negative health outcomes but there is no research in how to improve familial support, especially families of culturally diverse backgrounds. Currently for parents, peer support groups are popular programs that provide social support for parents going through similar experiences. One group of participants will only participate in family interventions (1 parent with 2 guardians) and the other group of participants will participate in group interventions (2 children with 2 sets of parents/guardians). The intervention will last 1 year, and a questionnaire will be conducted each month to observe progress of familial acceptance. At the end of the intervention, the child and parents will each have their own 1-1 interview recounting their experience and how the familial relationships have been influenced by the intervention. For 5 years, once every year 1-1 interviews will be conducted, and a questionnaire will be provided to evaluate the progression. This research proposal focuses on whether familial intervention or group (including other LGBTQ+ children and their parents) interventions will be more effective in improving familial relationships. This research will be beneficial to determine what therapy-based activities or educational resources were influential in improving familial acceptance of LGBTQ+ child.

# Background

The relationship that LGBTQ+ youth have with their families can shape certain health outcomes. 7-9% of youth between the ages of 8-18 years old in the U.S. identify as LGBTQ+.1 The LGBTQ+ community are at a higher risk for substance abuse, STDs, cardiovascular diseases, obesity, bullying, depression, and suicide compared to the general population.2 These health disparities can affect those in their early teens until their early adulthood. Family support and acceptance is an influential factor in the shaping of these health outcomes.

Newcomb et al wanted to review articles that examined studies on how families influence the health of LGBTQ+ youth. Families that do not support LGBTQ+ youth have a higher risk of mental health problems, substance abuse, sexual risk, or even homelessness.3 Peer-led support group for parents are currently the most popular type of programs but there is no research on whether these groups improve familial relationships.3 Newcomb et al suggest that existing family-based interventions should be adjusted, or new ones should be created to address the complexity of LGBTQ+ youth health issues.3 The Family Acceptance Project is a research, intervention, education, and policy initiative by San Francisco State University that provides educational resources to diverse cultural families of LGBTQ+ youth to improve familial relationships.4

Ryan et al wanted to focus on the effects of behaviors of accepting families towards their LGBTQ+ child and how that affected their health outcomes.5 Ryan et al examined that most studies focused on the negative behaviors of families and predicting health outcomes amongst these LGBTQ+ youth.5 Ryan et al focused on findings from the Family Acceptance Project and the results were that Latino, immigrant, religious, and low socioeconomic status families, in general, were less likely to accept their LGBTQ+ child.5 The study also showed that family

acceptance is protective of negative health outcomes and is associated with high self-esteem, social support, and general health.5 The authors concluded with that research is needed on interventions to promote familial acceptance of LGBTQ+ child across all different types of families to help reduce health disparities.5

Parker et al conducted a scoping study to identify existing interventions, programs, policies, and gaps in the literature that focused on promoting familial acceptance and support towards the LGBTQ+ child.6 The scoping study found that there was not a lot of peer-reviewed studies that described interventions to help reduce family stigma against LGBTQ+ youth.6 McConnell and the other authors had a study that focused on the social support from families and peers and how that affected the mental health of the LGBTQ+ youth.7 Majority of participants in study associated little family support with feelings of depression, suicidal ideation, anxiety, and other mental health outcomes. 7 The study also found that youth with little family support experienced more stress and were at a higher risk of mental health disparities in early adulthood.7 What the authors from all these articles agree on is that there is little research on interventions needed for diverse families to learn about their LGBTQ+ child and accept them. The authors also agreed that the identity of these children does affect their mental, physical, and emotional health. Newcomb et al wanted to examine research on what makes certain families more supportive of others, how families cope with the coming out process, and what positive outcomes are necessary for improving familial relationships. 3 Parker and the other authors identified how there is not much evidence-based intervention that specify the certain diverse factors of these families which have distinct needs on how to reduce stigma towards the LGBTQ+ community.6 There is also limited knowledge on what educational resources these families need to improve their relationship with their child.6 Due to this extensive gap of

knowledge, this research is essential for providing a foundation in what interventions are needed to improve familial relationships with LGBTQ+ youth. Since peer support groups are popular, this research proposal focuses on whether familial intervention or group (including other LGBTQ+ children and their parents) interventions will be more effective in improving familial relationships.

## Statement

This research study wants to examine whether family or group interventions are more effective in improving LGBTQ+ youth familial relationships to reduce health disparities and promote familial support and acceptance.

## Methods and Procedures

The population for this research will include LGBTQ+ youth between the ages of 10-16 years old in the U.S. including parents or 2 main guardians. The participants will be recruited through parent peer groups, online/in person LGBTQ+ youth support groups (nonprofits, local government programs, or social media), and schools with LGBTQ+ support organizations/clubs. Since participants are underage and privacy is essential, informed consent is required for participation. The first group of participants will only participate in family therapy. There will be 14 groups of 1 child with 2 parents/guardians. The second group of participants will only participate in group therapy. There will be 7 groups of 2 children with 2 sets of parents/guardians. Each group will have 42 participants each.

The intervention will be 1 year long. There will be an intervention session that occurs twice a month. Each session will be 2 hours long. This is a mixed methods design study that includes both qualitative and quantitative data. At the end of each month, there will be a questionnaire that is provided to the parents/guardians and the child individually. The questionnaire will consist of questions asking about relationship with the other, if the relationship has improved or not during the intervention, and what therapy-based approaches have been impactful during this intervention. For the group intervention, the questionnaire will ask if the influence of another family having similar experiences helps improve their own familial relationships.

At the end of the 1-year period, there will be a 1-1 interview conducted with the parent and child. This interview will be beneficial to gather qualitative data on how the intervention has impacted these familial relationships throughout the year. After the intervention, once every 5 years, 1-1 interviews will be conducted, and another questionnaire will be filled out. A complex topic like LGBTQ+ familial acceptance can last years which is why this post-intervention process is essential to determine if the intervention was significant. The questionnaires are beneficial for the data analysis to be able to compare responses throughout the intervention. The 1-1 interviews provide a more personal account of the intervention and able to provide more depth to the quantitative data. The researcher will be able to analyze the responses and determine if certain cultural or socioeconomic factors affected familial acceptance of LGBTQ+ child or if, generally, familial acceptance improved.

## Dissemination Plan

This research will help determine what families of different cultures, religions, and socioeconomic status need to reduce stigma towards LGBTQ+ youth. This research will also help therapists and public health professionals understand what therapeutic approaches or activities are best suited to improve familial relationships, whether in an individual or group setting. Since privacy must be considered due to minors participating in this study, the results will have anonymity with the families. The results that will be shared will include educational resources that were beneficial for the child or parents/guardians or any therapy-based activities that proved effective to improve familial relationships. As well as any other resources that will be provided during the quantitative and qualitative data analysis process.

These results will be shared with LGBTQ+ nonprofits organizations that work with LGBTQ+ youth. For example, The Family Acceptance Project will benefit from this research to further improve their initiative of improving familial acceptance within culturally diverse families. The Trevor Project and the It Gets Better Project are well-known LGBTQ+ nonprofits that will benefit from sharing the results with a wide and diverse audience. Sharing the results with public health professionals, psychiatrists, school psychologists, parent peer groups, LGBTQ+ youth support groups, and other organizations and professionals that work with LGBTQ+ youth.

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