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IMPROVING THE MENTAL HEALTH OF LGBTQ YOUTH: A SHORT NARRATIVE REVIEW OF SPECIFIC INTERVENTIONS

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Abstract

Previous studies concerning LGBTQ individuals' experiences found significant challenges, including discrimination, prejudice, and violence. Given these experiences, researchers are preoccupied with the examination of the potential adverse effects on the physical and mental health of LGBTQ individuals and the effective strategies to reduce these negative outcomes. In this short narrative review, we discuss some of the specific interventions aimed to improve the mental health of LGBTQ individuals, especially among the youth. More specifically, we discuss the theoretical framework and empirical evidence related to LGBTQ – Affirmative Cognitive–Behavioral Therapy, Creative Writing and Expressive Wiring Therapy, Attachment–based Family Therapy, and LGBTQ Relationally – based Positive Psychology.

Keywords: ***LGBTQ; youth; mental health; therapies.***

Introduction

LGBTQ is an acronym for communities or individuals who identify as sexually or gender-diverse. Specifically, LGBTQ refers to lesbian, gay, bisexual, transsexual, and queer individuals (Peel, 2014). In terms of sexual diversity, lesbians and gay individuals are those who are attracted to other individuals of the same sex, and bisexual individuals are those who

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are attracted to both men and women. Regarding gender diversity, transgender individuals are those who have a gender identity that does not align with the sex assigned to them at birth. Finally, the term *queer* represents an inclusive umbrella term encompassing various sexual orientations and gender identities that are not exclusively heterosexual or cisgender.

Previous studies concerning LGBTQ individuals' experiences found significant challenges, including discrimination (Casey et al., 2019), prejudice (Roggemans et al., 2015), and violence (D'haese et al., 2015). Given these experiences, researchers are preoccupied with the examination of the potential adverse effects on the physical and mental health of LGBTQ individuals. In this regard, it was consistently empirically demonstrated that facing discrimination or harassment harms their physical and psychological well-being (Schmitt et al., 2014). Thus, previous studies found that experiences of stigma, discrimination, or harassment are related to lower self-esteem (Toomey et al., 2010), feelings of shame (Logie et al., 2019), and social isolation (Garcia et al., 2020). Overall, the negative effects of discrimination were associated with psychological distress (Seelman et al., 2017), including symptoms of depression (Kulick et al., 2017), PTSD (Reisner et al., 2016), substance use (Lee et al., 2016) and even suicidal ideation (Carter et al., 2019). Research suggests that stigma and discrimination significantly influence LGBTQ individuals' mental health (Bostwick et al., 2014).

Previous literature highlighted a considerable number of proper therapies for improving mental health among LGBTQ individuals. Among these therapies, some of the most common are related to cognitive-behavioral therapy (Ross et al., 2007), LGBTQ – affirmative cognitive - behavioral therapy (Craig et al., 2013), creative arts therapy (Pelton-Sweet & Sherry, 2008), expressive writing therapy (Pachankis & Goldfried, 2010), attachment–based family therapy (Diamond et al., 2013), and positive psychology – based interventions (Lytle et al., 2014).

LGBTQ – Affirmative Cognitive–Behavioral Therapy

Cognitive–behavioral therapy (CBT) is a psychotherapy approach, which empirically proved its efficacity in depression (Rakovshik & McManus, 2010), anxiety (Otte, 2011), bulimia nervosa (Poulsen et al., 2014), and other psychological disorders (Linardon et al., 2017). CBT derives from the Cognitive theory that suggests perception of event influence emotions and behaviors (Beck, 1993), and represents the psychological treatment that teaches individuals to identify distorted thoughts and change thinking patterns.

Thus, CBT encourages individuals to develop alternative perspectives on situations and challenges, leading to subsequent modifications in emotions and behaviors (Beck, 1993).

Based on this approach, specific CBT therapies were developed for gay (Craig et al., 2013) and transgender (Austin & Craig, 2015) individuals. It was suggested that gay and transgender individuals who are exposed to homophobic and transphobic attitudes might develop negative cognitions about themselves which can lead to lower self-esteem, anxiety, and depression (Budge et al., 2010; Kidd et al., 2011). For instance, using the Affirmative Cognitive – Behavioral Therapy (ACBT; Austin & Craig, 2015; Craig et al., 2013), which generally comprises eight sessions, gay and transgender individuals under the effect of negative attitudes and behaviors on their well-being, and learn how thoughts influences emotions, subsequently developing alternative thinking. Moreover, ACBT helps clients to affirm their sexual orientation and gender non-conformity, enabling them to accept and integrate their identity. Also, it was suggested that through gay and trans – affirmative approaches, anxious and depressive symptoms generally improve through ACBT interventions (Craig et al., 2021; Knutson et al., 2021).

Creative Writing Therapy

Creative writing represents a specific form of Art Therapy (Huerta, 2018). This approach is based on the Disinhibition Theory, which posits that unexpressed and unresolved feelings influence one's psychological health (Crowley, 2014). Creating writing interventions are approached in a dual manner: on the one hand, creative writing might be related to writing about traumatic events (Smyth et al., 2008) with the aim of releasing negative emotions, and on the other hand, creative writing might be related to writing about the positive aspects of traumatic events, known as „benefit-finding" (McCullough et al., 2006; Romero, 2008). Previous scholars suggested that benefit-finding is based on the Theory of Self-Regulation (Crowley, 2014). This theory states that finding benefits in a traumatic events might help individuals to better understand that specific event and find meaning in it (King & Miner, 2000). Furthermore, it was suggested that creative writing about the benefits of traumatic events helps individuals to make sense of their experiences and develop a sense of regaining control over their lives (King, 2002; Koenig Kellas et al., 2010).

Previous empirical findings suggested that this approach increased well-being among LGBTQ youths (Crowley, 2014). Moreover, it was found that creative writing therapy improved both mental and physical health among LGBTQ individuals (Swanbon et al., 2008). Another interesting result was found that creative writing therapy helped LGBTQ

individuals to become more open about their sexual or gender identity (Pachankis & Goldfried, 2010). Also, LGBTQ individuals may benefit therapeutic creative writing to process unresolved feelings about their identity and painful anti-LGBTQ experiences (Huerta, 2018).

Expressive Writing Therapy

Based on the Theory of Inhibition and Disclosure, expressive writing therapy is a process developed by Pennebaker (1997) aimed to increase overall mental health and well-being. The theory posits that not talking about our feelings related to negative experiences represents a form of inhibition. Also, it was suggested that, on the long-term, inhibition leads to a high level of stress, which can increase the risk of mental and physical health-related issues. On the other hand, the theory states that disclosure might reduce stress and improve one's mental and physical health (Pennebaker, 1997). However, recent studies about expressive writing found that this form of therapy has many positive ramifications (Giannotta et al., 2009) related to social adjustment (Facchin et al., 2014) and school performance (Wisinger, 2010), lowering somatic complains (Wallander et al., 2011), PTSD and depression symptoms, as well as sexual dysfunctions (Meston et al., 2013). Previous studies also focused on the positive effects of expressive writing regarding the mental health of LGBTQ community. Thus, it was suggested that expressive writing applied over a period of three months might lead to increased mental health among LGBTQ individuals (Pachankis et al., 2020).

Attachment – based Family Therapy

Attachment – based family therapy (ABFT) integrates the multidimensional family approach and emotion-focused therapy (Diamond et al., 2013). Based on the attachment theory, Diamond and their colleagues (2013) adapted these two approaches to reduce suicide thoughts and related behaviors among LGBTQ individuals. Secure attachment development depends on having at least one caregiver who is stable, reliable, and responsive (Belsky & Fearon, 2002). Moreover, previous studies found that secure attachment is related to various positive outcomes, including enhanced self-esteem (Foster et al., 2007), improved emotion regulation abilities (Waters et al., 2010), and increased direct communication (Etzion-Carasso & Oppenheim, 2000). On the other hand, when a caregiver is absent or unresponsive, especially during critical moments such as stressful situations or negative life events, it

results in insecure attachment (Doyle & Cicchetti, 2017). Insecure attachment has consistently been linked to depression and suicidality among adolescents (Venta et al., 2014).

Based on these findings, ABFT was developed with the aim to improve attachment relationships between LGBTQ adolescents and their parents, to reduce feelings of isolation, boost self-esteem, expose them to positive experiences, and instill a sense of optimism about the future (Diamond et al., 2013). Moreover, the authors suggested that these treatment goals are particularly significant for adolescents who are dealing with suicidal tendencies and depression. Thus, in the first phase of treatment, the primary focus in on assisting both the adolescent and parent in recognizing, discussing, and resolving past and present family conflicts that strained their attachment relationship. Next, second part of treatment concentrates on fostering the autonomy and competence of the adolescent, which involves enhancing their school performance, social connections, employment prospects, and engagement in activities.

There are five sequential ABFT treatment tasks, and each task may take one or several sessions. The first task is called „the Relational Reframe Task", and aims to decrease parental criticism and hostility, redirecting the focus of treatment toward improving the quality of the adolescent-parent attachment relationship. The second task, „the Alliance Building Task with the Adolescent", focuses on engaging the adolescent in treatment and instilling hope for positive change. In this task, the therapist establishes a trusting relationship with the adolescent, identifies key family dynamics that contribute to conflict or disengagement, and prepares the adolescent for future discussions with their parents. The third task, known as „the Alliance Building Task with the Parent", centers around reducing parental distress and enhancing parenting skills. Moreover, in this task the therapist examines the stressors that affect the parent, such as psychiatric distress, marital issues, or traumatic childhood experiences, and how these factors influence their parenting abilities. Next, the fourth task, „the Reattachment Task", represents the culmination of the work accomplished in the previous three task. Its purpose is to provide the adolescent with a new, corrective experience involving their parents. Finally, the fifth task, called the „Competency Promoting Task", concentrates on nurturing self-esteem and fostering autonomy and competence. Building competency and self-esteem act as protective factors against hopelessness, depression, and suicidal thoughts (Diamond et al., 2013).

The LGBTQ Relationally – based Positive Psychology

The framework of The LGBTQ Relationally – Based Positive Psychology combines the strengths-based approach of positive psychology with the systemic perspective of Walsh (1996) family resilience framework (Domínguez et al., 2015). On one hand, positive psychologists analyzed how emotions and protective factors contribute to well-being (Seligman & Csikszentmihalyi, 2000). They rejected the deficit-based models and focused on understanding effective responses to negative experiences. By exploring the positive aspects of adversity, positive psychologists found that positive emotions increase stress adaption (Ong et al., 2006). Resilience, a key concept in positive psychology, involves narrowing focus during negative events. In contrast, positive emotions - like joy and hope - increase attention, strengthen cognition, and empower creative problem-solving. Resilient individuals also have more flexible problem-solving skills to effectively experience and use positive emotions (Fredrickson, 2001).

Walsh (1996) proposed the relationally – based family resilience framework, which expanded the previous research of positive psychologists by emphasizing the impact of stressful events on the entire family and their relationships. Family resilience theory acknowledged the importance of family as a social construction with diverse meanings, relational patterns, and unique caring bonds. It goes beyond the individual focus of positive psychologists, and highlighted family strengths under stress, the multiple realities of diverse families, the socio-cultural context, the belief in families' resources for recovery and growth, and the significance of nurturing caring, safe, and committed relationships within families (Walsh, 2012).

Finally, The LGBTQ Relationally – Based Positive Psychology (LGBTQ RBPP) aims to facilitate the support, motivation, and empowerment of LGBTQ families. LGBTQ RBPP sought to explore how non-heterosexual families manage to protect their relationships and their children from hardship while facing stress and adversity. Also, the LGBTQ RBPP framework focuses on areas such as learned optimism, emphasizing systematic interactions, and building on positive emotions as positive psychology research indicated their significance in fostering thriving and resilience (Domínguez et al., 2015).

Conclusion

The available literature offers a wide range of therapies that can be used to improve the mental health of LGBTQ individuals. Each of these therapies has the overall goal to increase self-esteem, reduce psychological distress, and finally build self-acceptance and

resilience. However, in addition to these possible interventions, there is still a need for overall social acceptance and understanding, to effectively fight the stigma surrounding LGBTQ communities.

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