

# Making Healthy Marriage and Relationship Education Programs More Inclusive for LGBTQ+ Youth and Adults

White Paper for the Fatherhood, Relationships, and Marriage – Illuminating the Next Generation of Research (FRAMING Research) Project



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**Making Healthy Marriage and Relationship  
Education Programs More Inclusive for LGBTQ+  
Youth and Adults: White Paper for the  
Fatherhood, Relationships, and Marriage –  
Illuminating the Next Generation of Research  
(FRAMING Research) Project**

September 2023

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## Overview

### Introduction

Healthy marriage and relationship education (HMRE) programs aim to support strong, healthy, and happy families by teaching skills to help young people and adults form and maintain high-quality romantic relationships. Although most of the topics that HMRE programs cover are applicable to people of any gender in both heterosexual and non-heterosexual relationships, few programs explicitly address the perspectives and needs of those who are lesbian, gay, bisexual, transgender, queer, or another sexual or gender minority (LGBTQ+). This is a critical gap given research showing that LGBTQ+ people face different challenges and issues than non-LGBTQ+ people in their romantic relationships. In addition, the number of youth and adults who identify as LGBTQ+ has increased substantially in recent years. For these reasons, there is a need for HMRE providers to have guidance on how to make HMRE programs more inclusive for LGBTQ+ people in their communities.

### Primary research questions

1. What challenges do HMRE programs face related to serving LGBTQ+ youth and adults?
2. What promising practices and approaches exist for making HMRE programs more inclusive for LGBTQ+ youth and adults?
3. What gaps remain in our understanding of how to make HMRE programs more inclusive for LGBTQ+ youth and adults?

### Purpose

This white paper explores how to make HMRE programs more inclusive for LGBTQ+ youth and adults. To address this issue, the study team reviewed the literature on relationship education and inclusive programming for LGBTQ+ youth and adults, conducted focus groups with HMRE program directors and program practitioners, and interviewed HMRE educators and participants. Based on these data sources, the paper describes the common challenges that programs face related to LGBTQ+ inclusivity and promising strategies for overcoming these challenges. The paper concludes with a discussion of remaining gaps in our understanding of how to make HMRE programs more inclusive for LGBTQ+ participants and considerations for future work on this topic.

### Key findings and highlights

We uncovered several common challenges to making HMRE programs more inclusive of LGBTQ+ participants, as well as potential strategies for overcoming these challenges. We explore challenges and strategies in three areas: (1) recruitment, outreach, and initial engagement; (2) program content and delivery; and (3) staff hiring and training.

When it comes to **recruitment, outreach, and initial engagement**, common challenges include (1) programs not knowing where and how to reach LGBTQ+ people and (2) outreach and initial program materials lacking LGBTQ+-affirmative imagery and language. To overcome these challenges, programs should (1) recruit in settings that are welcoming to and frequented by LGBTQ+ people; (2) make sure people's first impression of the program is one of LGBTQ+ inclusivity; and (3) partner with or employ members of the LGBTQ+ community to strengthen outreach and initial engagement.



In the area of **program content and delivery**, common challenges to LGBTQ+ inclusivity include (1) program materials lacking images and examples of LGBTQ+ youth, adults, and families; (2) programs rarely addressing experiences or issues that are specific to LGBTQ+ relationships; (3) programs only focusing on same-sex couples when they do address LGBTQ+ relationships; (4) programs using a deficit-based approach when discussing LGBTQ+ people and their relationships; and (5) programs facing many constraints when modifying content to make it more inclusive. To overcome these challenges, programs should (1) update program language, images, and examples to be inclusive of LGBTQ+ people and relationships; (2) address topics and issues that are relevant to LGBTQ+ people and relationships; (3) present information about LGBTQ+ people’s experiences using a strengths-based approach; (4) and consider using alternative delivery formats for LGBTQ+ inclusive programming.

In the area of **staff hiring and training**, common challenges include (1) a lack of LGBTQ+ staff making it difficult for LGBTQ+ participants to connect and engage with the program; (2) program staff not being accepting or supportive of LGBTQ+ relationships; and (3) educators needing more training on best practices for serving LGBTQ+ youth and adults. To overcome these challenges, programs should (1) hire staff—including educators, case managers, co-educators, or peer mentors—who are LGBTQ+ or who have lived experience as an ally or advocate; (2) hire staff who are open-minded and accepting of LGBTQ+ people and relationships; and (3) provide all staff with comprehensive training on how to serve and support LGBTQ+ participants.

### Methods

To identify the challenges and strategies presented in this paper, the study team analyzed data from several sources. First, we reviewed the past ten years of literature on relationship education and related programming for LGBTQ+ youth and adults. Second, we reviewed LGBTQ+ inclusivity resources and guidance documents developed for a variety of settings, such as schools, sexual health education programs, child welfare agencies, health care settings, and more. Third, we conducted focus groups with HMRE program directors and program practitioners who serve LGBTQ+ populations in other contexts. Fourth, we conducted interviews with HMRE educators who worked at programs that serve youth and adults. Fifth, we conducted interviews with HMRE program participants (both youth and adults) who self-identified as LGBTQ+.

### Recommendations for future research and programming

The literature we reviewed, as well as the program practitioners, educators, and participants with whom we spoke, highlighted several common challenges related to inclusivity, as well as promising strategies for addressing these challenges. However, several gaps remain in our understanding of how to make HMRE programs more inclusive for LGBTQ+ participants, which future research and programming could address:

- Additional research on the relationship experiences of certain subgroups within the LGBTQ+ community—including those who are transgender, non-binary, or intersex, as well as those who are racial or ethnic minorities—would enhance program content and delivery.
- Collecting data on participants’ sexual orientation and gender identity would allow programs to better serve the LGBTQ+ community.
- The feasibility and efficacy of certain strategies for improving LGBTQ+ inclusivity may depend on programs’ social and political environment, including community members’ attitudes toward

LGBTQ+ people and laws or policies related to discussing sexual orientation and gender identity in schools.

Despite the challenges and unanswered questions that accompany this work, enhancing the inclusivity of HMRE programs is imperative for improving the health and well-being of LGBTQ+ people and their families.

## I. Introduction

Healthy marriage and relationship education (HMRE) programs aim to support strong, healthy, and happy families by teaching skills to help young people and adults form and maintain high-quality romantic relationships (Office of Family Assistance [OFA] 2021). Since 2005, Congress has dedicated funding to HMRE programming through competitive grants administered by OFA within the Administration for Children and Families (ACF). ACF funds two types of HMRE grant programs, one geared toward high school–age youth and young adults up to age 24 (ACF 2020a) and the other toward adult couples and individuals (ACF 2020b). These programs address topics such as recognizing the signs of healthy and unhealthy relationships, strengthening communication and conflict management skills, and supporting one’s own mental and emotional well-being (Scott and Huz 2020; Stanley et al. 2020).

Although most of the topics that HMRE programs cover are applicable to people of any gender in both heterosexual and non-heterosexual relationships, few programs explicitly address the perspective and needs of those who are LGBTQ+ (Peters et al. 2018). This is a critical gap given research showing that LGBTQ+ people face different challenges and issues than non-LGBTQ+ people in their romantic relationships (Dank et al. 2014; Reczek 2016, 2020). Research also finds that LGBTQ+ youth are more at risk of adverse mental health outcomes, including suicide, than are their cisgender<sup>1</sup>, heterosexual peers (Centers for Disease Control and Prevention [CDC] 2023a). Moreover, there has been a substantial increase in recent years in the number of people who identify as LGBTQ+. Between 2012 and 2021, the percentage of U.S. adults who report being LGBTQ+ increased from 3 percent to 7 percent (Jones 2022). Similarly, between 2015 and 2021, the percentage of U.S. high school students who identified as non-heterosexual—including gay or lesbian, bisexual, or other/questioning—increased from 11 percent to 26 percent (CDC 2016; CDC 2023b). For all these reasons, there is a need for HMRE providers to have guidance on how to make HMRE programs more inclusive for LGBTQ+ people in their communities.

The acronym **LGBTQ+** encompasses a broad array of people who do not identify as heterosexual or cisgender. It stands for **lesbian, gay, bisexual, transgender, and queer**. The **plus sign** represents the many other identities included under the LGBTQ+ umbrella, such as intersex or asexual. Although we mostly use the full acronym throughout the paper, we occasionally use other acronyms, such as LGBT or LGB, when referring to research that includes only a subset of the LGBTQ+ community.

This white paper, developed as part of the Fatherhood, Relationships, and Marriage—Illuminating the Next Generation of Research (FRAMING Research) project, explores how to make HMRE programs more inclusive for LGBTQ+ youth and adults. It builds on earlier work led by the Office of Planning, Research, and Evaluation to understand approaches HMRE programs could use to better serve same-sex couples, as well as adults and youth who may one day become involved in a same-sex relationship (Peters et al. 2018). Specifically, the current paper addresses the following three questions:

1. What challenges do HMRE programs face related to serving LGBTQ+ youth and adults?
2. What promising practices and approaches exist for making HMRE programs more inclusive for LGBTQ+ youth and adults?
3. What gaps remain in our understanding of how to make HMRE programs more inclusive for LGBTQ+ youth and adults?

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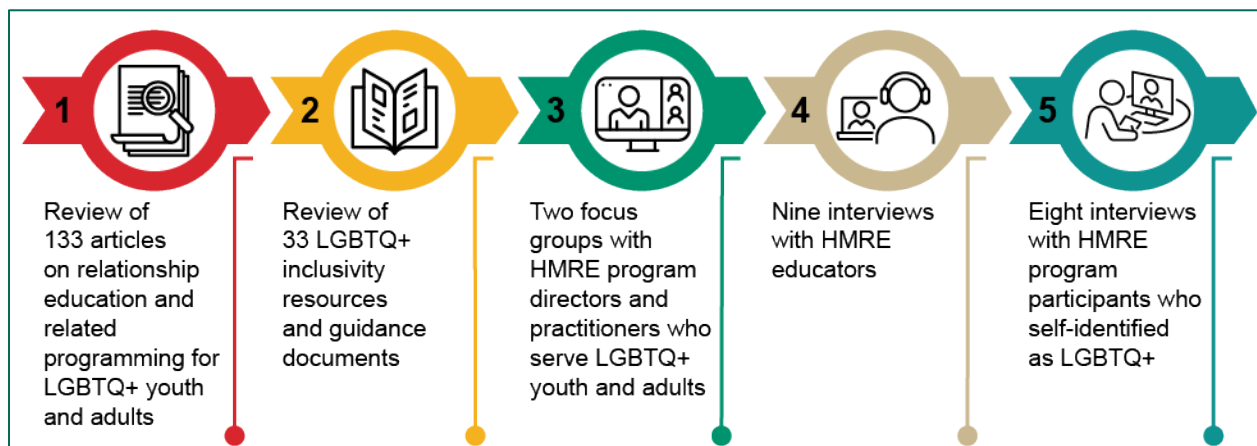
<sup>1</sup> The term *cisgender* refers to people whose gender identity aligns with the sex they were assigned at birth.

### About the FRAMING Research project

This work is part of the Fatherhood, Relationships, and Marriage—Illuminating the Next Generation of Research (FRAMING Research) project, sponsored by the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services. ACF has partnered with Mathematica and its subcontractor Public Strategies to conduct the FRAMING Research study. The project focuses on gathering and summarizing information on healthy marriage and responsible fatherhood programming and connected areas, using literature reviews, knowledge maps, expert consultations, and technical work groups. The project team has drafted a range of products exploring key topics that emerged during the project. ▲

To address these questions, we collected information from several sources. First, we reviewed literature spanning ten years (133 articles published between 2013 and 2022) on relationship education and related programming for LGBTQ+ youth and adults. Second, we reviewed 33 LGBTQ+ inclusivity resources and guidance documents developed for use in a variety of settings, such as schools, sexual health education programs, child welfare agencies, health care settings, immigration agencies, and workplaces. Third, we conducted two focus groups with HMRE program directors and program practitioners who serve LGBTQ+ populations in other contexts. One focus group consisted of practitioners who work with youth, and the second consisted of practitioners who work with adults. Fourth, we conducted interviews with nine HMRE educators, four who worked at programs that serve youth and five who worked at programs that serve adults. Fifth, we conducted interviews with eight HMRE program participants who self-identified as LGBTQ+, six who participated in a program for youth and two who participated in a program for adults. For more information on each of these data collection approaches, see Appendix A.

Figure 1. Data sources for white paper



We begin the white paper with a brief overview of HMRE programs for youth and adults, including the content they cover, where they operate, and who they serve (Section II). We then present our findings on the common challenges programs face related to LGBTQ+ inclusivity and promising strategies for overcoming these challenges (Section III). We describe challenges and strategies in three areas: (1) recruitment, outreach, and initial engagement; (2) program content and delivery; and (3) staff hiring and training. We end the paper with a discussion about remaining gaps in our understanding of how to make HMRE programs more inclusive for LGBTQ+ participants and considerations for future work on this topic (Section IV).

## II. Overview of HMRE Programs for Youth and Adults

HMRE programs for youth offer skills-based relationship and marriage education to youth in high school (grades 9–12), high school–age youth (ages 14–17), and youth in late adolescence to early adulthood (ages 18–24) (ACF 2020a). The programs aim to increase youth’s understanding of romantic relationships and prepare them to have healthy romantic relationships in adolescence and adulthood. To accomplish this goal, programs address topics such as recognizing the characteristics of healthy and unhealthy relationships, preventing dating violence, and developing socioemotional and communication skills (Alamillo et al. 2021). Some programs also include content on career and college readiness, the benefits of marriage, and sexual health/teen pregnancy prevention (Scott et al. 2017; Scott and Huz 2020; Simpson et al. 2018). Most programs use a structured curriculum that involves a mix of educator-led instruction, interactive class discussions, role-playing and skill-building activities, and opportunities for independent self-reflection (Alamillo et al. 2021; Scott et al. 2017; Scott and Huz 2020).

Most commonly, HMRE programs for youth are delivered in high schools as part of an existing class, such as health or consumer sciences (Alamillo et al. 2021; Scott et al. 2017; Scott and Huz 2020). When delivered in schools, HMRE programs are usually geared toward a general population of students. Some programs offer services at other locations in the community, such as libraries, community centers, or religious institutions. A handful of programs offer some or all of their services online. Community-based and online programs may serve a general population of youth or be tailored to a specific population, such as youth who are pregnant or parenting or youth in the foster care system (Allen et al. 2014; Leip 2021). Many HMRE grant recipients hire and train their own educators to deliver programming, while others opt to train teachers or other people in the community to deliver the program.

HMRE programs for adults aim to help individuals and couples ages 18 and older form and maintain healthy, stable romantic relationships and marriages (ACF 2020b). Programs serve a variety of populations, including married couples, unmarried couples, or individual adults who may or may not be in a relationship (Friend et al. 2022). Programs may serve adults with specific characteristics and life experiences, such as expectant or new parents, people in the military, or people with low incomes. Program content tends to vary based on the population. Although most programs address topics such as communicating with a partner, managing anger and conflict, and controlling stress and other negative emotions, some programs also address topics related to parenting and coparenting or sexual health and intimacy (Scott and Huz 2020). Many programs also offer financial stability services, employment services, case management, and referrals to other services in the community (Friend et al. 2022; Scott and Huz 2020).

Like programs for youth, most HMRE programs for adults are delivered in a group setting. Programming may be offered at different locations within the community—for example, nonprofit or social service organizations, libraries, religious institutions, or college campuses—and some programs deliver services entirely online (Scott and Huz 2020; Stanley et al. 2020). Most programs use a structured curriculum, but many tailor or supplement the curriculum to better address the needs of the people they serve (Scott and Huz 2020). Programming is often delivered by one or two educators who are trained on the curriculum, and possibly by a case manager who is trained to work one-on-one with individuals or couples (Friend et al. 2022; Scott and Huz 2020).

### III. Challenges and Strategies Related to LGBTQ+ Inclusivity

Our review of the literature on relationship education and related services for LGBTQ+ youth and adults, scan of inclusivity resources, and focus groups and interviews with program directors, educators, and participants uncovered several common challenges to making HMRE programs more inclusive for LGBTQ+ participants as well as potential strategies for overcoming these challenges. Below we describe common challenges and promising strategies in the areas of (1) recruitment, outreach, and initial engagement; (2) program content and delivery; and (3) staff hiring and training.

#### Recruitment, Outreach, and Initial Engagement

Most HMRE programs for adults, and programs for youth that operate outside of schools, engage in a variety of outreach activities to advertise their services and recruit eligible couples and individuals (Friend and Paulsell 2020). The activities can include hanging posters or flyers in public locations such as libraries, schools, universities, churches, or hospitals; advertising online or on social media; or meeting potential participants at events like farmers markets or wedding expos. In contrast, programs that operate in schools usually do not need to conduct outreach after they have reached an agreement with the school or district to deliver programming to students enrolled in a particular class. As a result, these different program models face a different set of considerations in trying to make their recruitment, outreach, and initial engagement approaches more inclusive.

#### Challenges related to recruitment, outreach, and initial engagement

*(1) Programs often do not know where and how to reach LGBTQ+ people.*

Despite feeling like their program had a lot to offer the LGBTQ+ community, many HMRE program directors and educators said they had a hard time getting LGBTQ+ individuals and couples to enroll in their program. One reason for this challenge was that programs did not know where to recruit LGBTQ+ participants. For example, one educator we interviewed said their program serves youth in schools during the school year and in a community center during the summer. The program would like to recruit a greater number of LGBTQ+ youth to participate in the summer program, but they have struggled to find locations frequented by large numbers of LGBTQ+ youth where they could advertise their program.

Compounding this challenge is that many of the locations where HMRE programs have historically conducted outreach have poor reputations among the LGBTQ+ community (Green 2020; Poteat 2017; Scott and Rhoades 2014; Whitton 2016). As one educator said, “I actually think the problem is before the curriculum, because I just don’t think we’re getting LGBTQ people through the door, . . . we’re not even having those initial conversations because we’re not reaching out to LGBTQ groups and support organizations. We’re reaching out to churches, which can be actively hostile toward LGBTQ populations.”

Likewise, a program director whose program operates in a local hospital system shared, “Changing the material and going to the places that we normally go when we're recruiting [heterosexual, cisgender] couples hasn't helped. . . . And we learned that a lot of LGBTQ+ couples are wary of hospital systems because they've gone to visit these hospitals and have been treated terribly.”

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**"Changing the material and going to the place that we normally go when we're recruiting [heterosexual, cisgender] couples hasn't helped."**

**—HMRE program director**



*(2) Outreach and initial program materials often lack LGBTQ+-affirmative imagery and language.*

Outreach materials that lack adequate representation of the LGBTQ+ community may deter potential participants from signing up for HMRE programs. The images used in outreach materials for many relationship education programs contain only cisgender, heterosexual couples and refer to “men and

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**"You wouldn't know that it's a place you can go to. You would think it's just for, you know, women and men in relationships."**

**—LGBTQ+ program participant**

women” or “husbands and wives.” Even if the message is unintentional, sexual minorities may perceive such language as indicating that the services are intended for cisgender people in different-sex relationships (Scott et al. 2019). As one adult program participant expressed, “You wouldn’t know that it’s a place that you can go to. You would think it’s just for, you know, women and men in relationships.... They did have posters, but it’s like women and men.”

Although, in some ways, school-based HMRE programs get to bypass the work that other programs must do to market themselves to potential participants, they still have to convince students in their classes that the program material is going to be relevant and interesting. If youth feel the program is not geared toward people like them, they are less likely to pay attention and receive the program’s intended benefits (Bradford et al. 2019; Roberts et al. 2020). The program directors and educators we interviewed estimated that around 30–40 percent of high schoolers in their classes identify as LGBTQ+. This was true for programs in urban and rural settings and in various regions of the country. However, despite the high percentage of LGBTQ+ participants, the introductory materials used by school-based programs primarily featured heterosexual couples and did not explicitly mention LGBTQ+ people or relationships. Youth that we spoke with said that even though they still had to attend classes, this lack of representation undermined their interest in the program.

### **Strategies related to recruitment, outreach, and initial engagement**

*(1) Recruit in settings that are welcoming to and frequented by LGBTQ+ people.*

For programs that aim to recruit more LGBTQ+ participants, it is crucial to conduct outreach in locations where LGBTQ+ people will be receptive to their messaging. Such places can include high schools, universities, pride centers, coffee houses, restaurants, stores, and LGBTQ+-friendly churches or religious institutions. Advertising on social media can also help programs reach greater numbers of LGBTQ+ youth and adults from diverse racial/ethnic and socioeconomic backgrounds (Whitton et al. 2016, 2018, 2023; Ybarra et al. 2021). Programs can tailor ads to people who self-identify as LGBTQ+ or to those who have “liked” or “expressed interest” in LGBTQ-friendly groups, businesses, or community events (Starks et al. 2021). They can also partner with local LGBTQ+-friendly businesses or advocacy organizations and ask these partners to post advertisements on their social media accounts on behalf of the program. Programs can also consider advertising in printed or online magazines or on websites or online forums that cater to the LGBTQ+ community (Behr 2019; Whitton et al. 2016, 2018, 2023).

*(2) Make sure people’s first impression of the program is one of LGBTQ+ inclusivity.*

Outreach materials should make it clear that the program welcomes and affirms LGBTQ+ participants (Hannenman et al. 2022). Relatively small changes can have a big impact on program enrollment. For example, in one study we reviewed, a relationship intervention was able to recruit a large number of same-sex couples by incorporating a rainbow into their study logo and stating on their website that the intervention was appropriate for sexual minorities (Pentel et al. 2021). Program advertisements should avoid using heteronormative and gendered language when possible (Behr 2019). For example, programs

should consider using the phrase “relationship education” rather than “marital education” or “pre-marital education” because, despite the fact that marriage is now legal for LGBTQ+ people in all states, many LGBTQ+ people still think of marriage as an institution for opposite-sex partners (Scott et al. 2019).

Programs should continue to highlight their inclusivity during their interactions with participants after they enroll. This is especially true for school-based HMRE programs, because these programs often do not engage in traditional recruitment activities and they tend to serve a large number of LGBTQ+ youth. One youth educator we spoke with suggested having everyone in the class, including the educators, wear a name tag that includes their preferred pronouns. This educator’s program started implementing this strategy years ago, and they reported it made a big difference in LGBTQ+ students’ initial engagement in the program. Another strategy is for programs to display the pride flag on program materials or in the classroom (Moore et al. 2020, Little and Cheevers 2019). Programs should also present images of diverse couples and individuals on program materials, representing racial, ethnic, and gender diversity, and same-sex couples (Oransky et al. 2019; Peters et al. 2018; Rand 2021). In addition, intake paperwork should allow people to select from a variety of identity and relationship options, such as “trans-man,” “trans-woman” or “non-binary” in addition to “male/female” or “man/woman,” and “spouse” or “partner” rather than “husband/wife” or “boyfriend/girlfriend” (Green 2020; Scott et al. 2019). As another educator we interviewed noted, these types of simple measures “serve as signals that everyone is welcome. It also helps people put their guards down and feel safe.”

*(3) Partner with or employ members of the LGBTQ+ community to strengthen outreach and initial engagement.*

HMRE program providers should partner with or employ members of the LGBTQ+ community to offer advice about where to advertise, help recruit LGBTQ+ participants, and develop and review outreach and intake materials (Peters et al. 2018). One HMRE program director, who had experience recruiting same-sex couples in four different cities, noted that it can be difficult to determine which businesses or community groups are trusted and popular within the LGBTQ+ community. Having a staff member or consultant who is a member of the local LGBTQ+ community can help programs identify these spaces and lead recruitment efforts there. Members of the LGBTQ+ community can also review recruitment and intake materials to make sure they are appropriate for LGBTQ+ youth and adults (Little and Cheevers 2019; Rand 2021). To identify potential LGBTQ+ partners or staff members, programs should look for people who are trusted and well-liked within the LGBTQ+ community (Roberts et al. 2020). These people may work at a school, a pride center, or another LGBTQ-friendly organization, for example. Students who are active in a gender and sexuality or gay-straight alliance (GSA) or similar clubs at their school could also be a good resource for helping programs recruit and appeal to more LGBTQ+ youth.

### Program Content and Delivery

HMRE programs aim to deliver content that both supports the development of participants’ interpersonal and socioemotional skills and addresses participants’ needs related to their current or future romantic relationships. Our review of the literature, as well as information from focus groups and interviews with program directors, educators, and participants, uncovered several common challenges to making HMRE programs’ content and delivery approaches more inclusive of LGBTQ+ participants, as well as potential strategies for overcoming these challenges.



### Challenges related to program content and delivery

#### *(1) Program materials lack images and examples of LGBTQ+ youth, adults, and families.*

The curricula and program materials that HMRE programs use often lack pictures, videos, vignettes, or other examples of LGBTQ+ people and relationships. Several program directors and educators noted that their curricula did not include many—or any—images of LGBTQ+ individuals or couples. They also noted that curriculum materials typically lacked vignettes or examples highlighting how the concepts addressed apply to LGBTQ+ people and relationships. One program educator described this problem in their curriculum: “There will be like a caveat in our curriculum that says ‘Oh, this also applies to LGBTQ populations.’ And it just skirts off. It doesn’t say anything else.” This lack of representation can make it more difficult for LGBTQ+ participants to understand how the program content applies to them and, in turn, can reduce their engagement in the program (Bradford et al. 2019; Hatch 2021; Pepping et al. 2019; Roberts et al. 2020; Scott et al. 2019). One youth participant described feeling “a little bit left out in a way. But you know, I kind of expected it.”

When programs do depict LGBTQ+ people and relationships, they often adhere to heteronormative gender roles that may be less relevant to the LGBTQ+ community. For example, participants noted that gendered language, such as the terms “man/woman,” “boyfriend/girlfriend,” and “husband/wife” are not universally applicable to LGBTQ+ people and relationships. Even the word “couple” can be perceived as exclusionary to participants who are not in a dyadic relationship. As one participant described, “Being in a gay relationship at the time, it’s always assumed in a gendered, male-female relationship that the male will do stuff like take out the trash and stuff like that. And the female will do stuff like the dishes and clean the house. But you know, in gay couples and lesbian couples, they distribute, you know, like chores, household responsibilities differently. And stuff like that like wasn’t really brought up.”

#### *(2) Programs rarely address experiences or issues that are specific to LGBTQ+ relationships.*

Many topics and skills that HMRE programs cover, such as healthy communication patterns or how to manage conflicting viewpoints, are applicable to both heterosexual and non-heterosexual relationships. However, HMRE programs often fail to address the unique challenges and issues that LGBTQ+ relationships face, such as decisions around “coming out” to different people or in different settings, or discrimination and rejection from family and friends (Catalpa 2020; Frank 2021; Scott and Rhoades 2014; Whitton 2016, 2018). For example, partners in an LGBTQ+ relationship may disagree about whether to disclose their relationship to certain relatives or to their employers. Currently, topics such as these are not commonly addressed in HMRE programs for youth or adults.

#### *(3) When programs address LGBTQ+ relationships, they tend to focus on same-sex couples.*

On the occasions when programs discuss LGBTQ+ relationships, they almost exclusively focus on same-sex, cisgender couples rather than the growing number of people who identify as bisexual, transgender, nonbinary<sup>2</sup>, or another subgroup within the LGBTQ+ community. People who identify as transgender, nonbinary, or bisexual often encounter stigma from both outside and within the LGBTQ+ community (Bermea and VanBergen 2021; Coolhart 2023; Minten and Muzacz 2022), and program directors noted that this topic is rarely addressed in HMRE programs. Even if program participants do not personally identify as a member of one of these groups, they may find the information relevant to their relationships with family members or friends. For example, one adult program educator noted that even though most of the couples he serves are cisgender and heterosexual, many have children who are nonbinary or

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<sup>2</sup> The term *nonbinary* refers to people whose gender identity falls outside of the traditional gender binary structure of girl/woman and boy/man.

transgender and would like more information on how to better support their children. Programs also rarely address the nuances of triadic or polyamorous relationships, which tend to be more common in the LGBTQ+ community (Coolhart 2023; Minten and Muzacz 2022).

*(4) Programs tend to use a deficit-based approach when discussing LGBTQ+ people and their relationships.*

When programs discuss LGBTQ+ relationships, they often highlight the challenges and struggles that LGBTQ+ people face in relationships rather than their assets and strengths (Fisher and Komosa-Hawkins 2013; Rhoades 2020). For example, one youth program educator described how the only time their program mentioned LGBTQ+ relationships was when they discussed higher rates of teen dating violence for LGBTQ+ youth. Although sexual minority youth do report higher rates of exposure to violence than do their heterosexual peers (CDC 2023a), presenting statistics without discussing the factors that contribute to negative health and relationship outcomes for LGBTQ+ populations (e.g., minority stress or homo/transphobia) can have a stigmatizing effect (Fisher and Komosa-Hawkins 2013; Sylaska and Edwards 2015).

*(5) Programs face many constraints when modifying content to make it more inclusive.*

HMRE programs for youth and adults often purchase standardized curricula from curriculum developers. When using these curricula, programs often need to consult with the developer before they can make substantial changes, and there may be limits to the scope of allowable changes.

In HMRE programs for youth, program directors and curriculum developers may not be the only parties involved in selecting and modifying program content. Programs that operate in schools usually need to seek permission from administrators, and potentially from school boards and parents. The literature we reviewed and the HMRE program directors and educators with whom we spoke described how the concerns of administrators, school boards, and parents about addressing LGBTQ+ relationships in schools can be a barrier to HMRE programs' attempts to deliver inclusive content (Roberts et al. 2020; Swanson 2015). One program educator shared their worry that their job could be jeopardized if they discussed topics related to gender and sexuality that were not approved by the school.

In addition, some HMRE programs for youth operate in places where local or state policies restrict the discussion of sexual orientation and gender identity in schools (Fisher and Komosa-Hawkins 2013; Movement Advancement Project 2023; Swanson 2017). As one HMRE program director noted, "The rhetoric that's coming out of, really everywhere, but certainly these states [with these policies], it's just becoming more and more inflamed. So in that sense, people are paying more attention to these things in a negative—like looking for something to almost make an issue of." The political landscape around LGBTQ+ people and relationships may make it even more challenging for HMRE programs to introduce inclusive content.

### **Strategies related to program content and delivery**

*(1) Update program language, images, and examples to be inclusive of LGBTQ+ people and relationships.*

HMRE programs should update the language, pictures, and examples they use to be more inclusive of LGBTQ+ people and their relationships. Programs can include gender neutral terms in their description of relationships, such as "partners" in addition to "boyfriend/girlfriend" or "husband/wife" (CDC 2020; Gay, Lesbian, and Straight Education Network [GLSEN] 2019). Examples used in lessons can also use

different sets of pronouns for the people in the example, such as they/them/theirs or ze/zir/zirs. Programs that cover topics related to sexual and reproductive health can use the name of specific reproductive organs rather than making references to “male anatomy” or “female anatomy” (Dunleavy and Dodd 2021). In addition to using gender neutral terms and pronouns, program directors suggested using television or movie clips of LGBTQ+ relationships to exemplify concepts addressed in class. One practitioner suggested partnering with local universities to have students film videos to fill gaps in program content. When updating program language and imagery or developing new examples, it can be helpful to work with a person or organization within the LGBTQ+ community to get feedback on whether the new materials are serving their intended purpose (Behr 2019).

*(2) Address topics and issues that are relevant to LGBTQ+ people and relationships.*

In addition to updating the language, images, and examples used to describe people and relationships, HMRE programs can also work with curriculum developers to add topics that resonate with LGBTQ+ participants. Although many of the topics that HMRE programs currently cover are already relevant for LGBTQ+ youth and adults, the literature we reviewed and the program participants and staff with whom we spoke, recommended several additional topics that programs could address. For youth programs, these topics might include the impact of gendered social norms, language, and bias on the mental health and relationships of LGBTQ+ people (Heck 2015; Mata et al. 2022); “coming out” and talking with parents and peers about one’s sexuality or gender identity (Heck 2015; Porta et al. 2017); marriage, pregnancy, and parenting in the context of LGBTQ+ relationships (Haley et al. 2019); and others. Adult programs could discuss legal issues that LGBTQ+ partners may face, such as preparing medical and legal documents in states with limited protections for LGBTQ+ relationships (Scott and Rhoades 2014; Whitton 2016). They could also discuss the unique relationship challenges and stressors faced by LGBTQ+ spouses or partners. Although some stressors, such as those concerning parenting, coparenting, managing extended family relationships, and fostering intimacy, are common regardless of one’s sexual or gender identity, these stressors may arise in different ways in LGBTQ+ relationships due to a lack of social norms around partners’ roles in LGBTQ+ relationships or lower levels of support from family members (Scott and Rhoades 2014; Whitton 2016). Deciding when and to whom to “come out” as a couple or managing the gender-affirming transition of one partner can further strain LGBTQ+ romantic relationships (Coolhart 2023). Table 1 presents a list of inclusivity topics for youth and adult HMRE programs to consider.

**Table 1. Inclusivity topics for HMRE programs**

| Topics for youth programs   | Topics for adult programs   |
|---|---|
| <ul style="list-style-type: none"> <li>• The impact of gendered social norms and language on LGBTQ+ youth</li> </ul>  | <ul style="list-style-type: none"> <li>• Dealing with stigma, discrimination, and legal challenges</li> </ul>   |
| <ul style="list-style-type: none"> <li>• Defining different types of romantic relationships and what they mean, including relationships among people who are lesbian, gay, bisexual, transgender, non-binary, or another sexual or gender identity</li> </ul> | <ul style="list-style-type: none"> <li>• Preparing financial, medical, or legal documents in states with limited LGBTQ+ protections</li> </ul>                              |
| <ul style="list-style-type: none"> <li>• Normalizing acceptance of LGBTQ+ relationships</li> </ul>  | <ul style="list-style-type: none"> <li>• Managing relationships with extended family members</li> </ul>   |
| <ul style="list-style-type: none"> <li>• “Coming out” and how to talk with parents, friends, and romantic partners about one’s sexuality or gender identity</li> </ul>  | <ul style="list-style-type: none"> <li>• “Coming out” and relationship disclosure to different people and in different situations</li> </ul>                                |
| <ul style="list-style-type: none"> <li>• Healthy communication, consent, and coercion for LGBTQ+ youth in relationships</li> </ul>  | <ul style="list-style-type: none"> <li>• Healthy communication, consent, and coercion in LGBTQ+ relationships, including polyamorous or non-dyadic relationships</li> </ul> |
| <ul style="list-style-type: none"> <li>• Pregnancy and parenting for LGBTQ+ people</li> </ul>   | <ul style="list-style-type: none"> <li>• Family planning, parenting, coparenting, and blended families</li> </ul>   |
| <ul style="list-style-type: none"> <li>• Positive and negative outcomes associated with marriage, including considerations for shared income and property</li> </ul>  | <ul style="list-style-type: none"> <li>• Positive and negative outcomes associated with marriage, including considerations for shared income and property</li> </ul>        |
|   | <ul style="list-style-type: none"> <li>• Gender transitions/managing partner’s transition</li> </ul>  |

*(3) Present information about LGBTQ+ people’s experiences using a strengths-based approach.*

When presenting information about LGBTQ+ people and relationships, curricula should emphasize LGBTQ+ youth and adults’ many strengths and acknowledge the systemic factors that may lead to certain challenges or negative relationship outcomes for them. For example, programs should not only cite statistics about LGBTQ+ people’s increased exposure to violence or worse mental health outcomes. Using a strengths-based approach, programs should also include a discussion of the broader factors that can lead to such outcomes (e.g., minority stress, sexual stigma, disapproval from family members), highlight protective factors and strategies LGBTQ+ people leverage to counteract these factors (e.g., ability to embrace non-heteronormative relationship roles, formation of strong relationships with friends), and demonstrate how skills like empathy and active listening can reduce stigma toward LGBTQ+ people and couples (Giammattei 2015; Hobaica and Kwon 2017; McDermott et al. 2021; Rhoades 2020; Roberts et al. 2020; Sun et al. 2022).

*(4) Consider alternative delivery formats for LGBTQ+ inclusive programming.*

Programs that operate in schools during the regular school day may be limited in what they can discuss related to gender identity and sexual orientation because of state or local laws or district-level restrictions. In such cases, programs may be able to partner with school-based clubs or community-based organizations to deliver the program outside the classroom setting. For example, program directors described how they partnered with GSAs, health clinics, and youth shelters to reach LGBTQ+ youth in their communities. School-based programs can also consider using text messages, online platforms, or social media to reach LGBTQ+ participants (Cahill et al. 2021; Fish et al. 2020; Ybarra et al. 2018, 2023).

Programs that operate outside of schools, including programs for adults, might consider offering workshops specifically for LGBTQ+ participants. Programming tailored to an LGBTQ+ audience has the potential to create a safer and more cohesive environment for LGBTQ+ participants to ask questions and

share their experiences (Ouellette and Alamillo 2023). One program director that we spoke with described how their program is piloting workshops tailored to LGBTQ+ participants, having received feedback from community partners that this format would better address the needs of the LGBTQ+ community. Programs can also deliver services virtually to reach a larger number of LGBTQ+ participants with content tailored directly to them. However, one potential downside of this approach is that it reduces participants' opportunity to learn from others with different backgrounds, particularly the opportunity for cisgender, heterosexual participants to learn about LGBTQ+ relationships (Ouellette and Alamillo 2023). Another approach that programs can consider is to offer supplemental content or case management that more directly addresses the needs of LGBTQ+ participants while still serving diverse participants in the same workshops.

### Staff Hiring and Training

The characteristics, attitudes, and behaviors of HMRE staff are important elements for program inclusivity. Because the curricula used by HMRE programs tend not to explicitly address LGBTQ+ relationships, it is often up to educators and case managers to make the program more inclusive and highlight how the topics addressed in class are relevant to LGBTQ+ people. Below, we highlight several challenges for program staff related to LGBTQ+ inclusivity, as well as promising strategies to overcome these challenges.

#### Challenges related to staff hiring and training

*(1) A lack of LGBTQ+ staff can make it difficult for LGBTQ+ participants to connect and engage with the program.*

A recurring theme in the literature, and among the practitioners and LGBTQ+ participants with whom we spoke, was how a lack of LGBTQ+ staff can make it difficult for participants to open up and engage deeply in the program. We reviewed several studies that focused on the sexual health education experiences of LGBTQ+ youth, and these studies found that learning about sexual health from a teacher whose sexual orientation or gender identity differed from their own made the experience more uncomfortable (Bradford et al. 2019; Dowshen et al. 2017; Roberts et al. 2020). However, it is usually not feasible to have educators mirror the characteristics of all participants when a program serves people with various characteristics and identities. In addition, it can be challenging for programs to find a diverse pool of qualified candidates, and programs may not know the sexual orientation or gender identity of people applying for the position.

*(2) Some program staff are not accepting or supportive of LGBTQ+ relationships.*

Program directors and program participants expressed a need for more educators and case managers who are accepting of LGBTQ+ relationships. The importance of hiring staff who will be inclusive and welcoming to all participants was echoed in the literature we reviewed. When LGBTQ+ participants perceive a staff member's discomfort with or disapproval of the LGBTQ+ community, they tend to be less engaged in the program (Scott and Rhoades 2014) and are more likely to drop out entirely (Ford et al. 2013).

*(3) Educators need more training on best practices for serving LGBTQ+ youth and adults.*

Staff who have not been adequately trained to serve LGBTQ+ clients risk providing unhelpful, inappropriate, or even harmful information (Green 2020; Lee-Tammeus 2017; Whitton 2016). The educators we interviewed said that more training and guidance on serving the LGBTQ+ community

would allow them to better support and build stronger connections with the LGBTQ+ participants in their workshops. Most educators reported that they had not received training on this topic and did not know where to seek out this guidance. As one educator expressed, “I have to do my own research and stay in the know, which is hard.” Similarly, an educator in an HMRE program serving youth said, “I look at each student as an individual person, and I try to respect their wishes and needs as much as possible.... But I do feel it’s harder to create that connection [with LGBTQ+ youth] because I was raised in a time when this wasn’t a common thing. One of the areas I struggle with is just knowing what to say.... I don’t know what I don’t know.” Even educators who had received training on serving LGBTQ+ participants expressed a desire for ongoing training. As one noted, “We received training from a local LGBT community group, and we’ve done online webinars and trainings. But there’s always more to learn and be aware of. I definitely see the value of being on the forefront and being proactive about what we could change or tweak.”

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**"I do feel it's harder to create that connection [with LGBTQ+ youth] because I was raised in a time when this wasn't a common thing. One of the areas I struggle with is just knowing what to say...I don't know what I don't know."**

**—HMRE program educator**

### **Strategies related to educator hiring and training**

*(1) Hire staff—including educators, case managers, co-educators, or peer mentors—who are LGBTQ+ or who have lived experience as an ally or advocate.*

Programs should hire staff who are members of the LGBTQ+ community. Learning from people with a shared identity, who may have experienced the same situations or challenges in their relationships, can enhance LGBTQ+ participants’ engagement in and satisfaction with the program. Discussing the benefits of hiring gay or lesbian educators to facilitate programs for same-sex couples, one program director explained that participants “can absorb and learn the communication skills training so much better if a couple who looks like them is demonstrating it.” Likewise, one of the educators we interviewed, who is gay, shared that LGBTQ+ participants in his classes tend to build rapport with him quickly because they know he is part of their community.

Programs can also use a co-facilitation approach, in which a primary educator is paired with a co-educator who openly identifies as LGBTQ+ (Whitton 2016). This person can help address participants’ questions

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**"The moment [youth] have an LGBTQ+ person in front of them, they start feeling comfortable to broach questions they've always had...so having somebody that mirrors them is very important...it's already half the battle."**

**—Developer of a program for LGBTQ+ youth and their families**

or share examples or personal experiences that resonate with LGBTQ+ participants. In programs for youth, using peer mentors who are closer in age and have more in common with participants may help youth open up and engage more deeply with the program content (Clermont et al. 2020; Catalpa 2020). As one of the practitioners we spoke with noted, “The moment [youth] have an LGBTQ+ person in front of them, they start feeling comfortable to broach questions they’ve always had...so having somebody that mirrors them is very important.... It’s already half the battle.”

*(2) Hire staff who are open-minded and accepting of LGBTQ+ people and relationships.*

Even if staff do not identify as LGBTQ+, it is important to ensure they are accepting of the LGBTQ+ community (Peters et al. 2018, Sparkman-Key et al. 2019). Several participants we interviewed said that

having open-minded educators who are genuinely supportive of LGBTQ+ relationships was more important than having educators within the LGBTQ+ community. As one youth expressed, “Even if [educators] are queer, they have specific experiences. If they’re a bisexual, cis woman, that can be different from a pansexual, non-binary person’s experiences. So there’s always more they can learn from different people’s experiences in the community.”

To support the hiring of accepting and open-minded staff members, programs can present job candidates with specific questions or scenarios to assess their attitudes about LGBTQ+ people and relationships (CDC 2020; Peters et al. 2018; Vermont Agency of Education 2018). Another strategy is for programs to develop a policy requiring staff to be inclusive and respectful of different viewpoints. It should also specify how staff are expected to enforce the policy in group workshops and when working one-on-one with participants or couples. One program director we spoke with said that requiring staff to sign an inclusivity policy, which their program does, makes it clear to staff that “This is what is required of your job. So if this doesn’t fit, then this is the wrong job.” Program supervisors and leaders can continue to support staff in their delivery of inclusive programming after they are hired by incorporating feedback as part of regular supervisory conversations and performance evaluations.

*(3) Provide all staff with comprehensive training on how to serve and support LGBTQ+ participants.*

Offering formal professional development to all staff around working with sexual and gender minorities sends a signal that the organization is committed to serving this population and helps ensure all participants receive standardized and high-quality services (Ford et al. 2013; Kull 2016). The literature we reviewed offered several recommendations for how to train and provide ongoing support to educators and other frontline staff so they feel better prepared to work with LGBTQ+ participants (Cox 2021; Dunleavy and Dodd 2021; Fisher and Komosa-Hawkins 2013; Pepping et al. 2019; Roberts et al. 2020; Terepka and Torres-Pagán 2020; Vela 2016). Effective trainings should cover the following:

1. **Information on LGBTQ+ history, culture, issues, and terminology.** Most HMRE curricula do not explicitly address issues that are specific to LGBTQ+ relationships. Therefore, it is up to educators and case managers to supplement the curricula with issues and examples that are relevant to this population (GLSEN 2019; Gowen and Wings-Yanez 2014). In addition to helping staff understand the challenges that LGBTQ+ people face, trainings should also highlight the many strengths and positive aspects of LGBTQ+ relationships, such as the potential to carve out more egalitarian roles in romantic relationships in the absence of gender-based norms (Rhoades 2020). It is also important for staff to be aware of common terms used in the LGBTQ+ community, which can vary over time, across age groups, and across geographic regions (Roberts et al. 2020; Whitton et al. 2023).
2. **Information on the diverse and intersectional identities of LGBTQ+ people.** Trainings should take care to avoid referring to the LGBTQ+ community as a monolithic group and acknowledge similarities and differences among people who are lesbian, gay, bisexual, transgender, non-binary, or another sexual or gender identity (Gowen and Wings-Yanez 2014; De Guzman et al. 2018; Whitman 2013). In addition, trainings should acknowledge the complex intersection of race, religion, and LGBTQ+ identity (Fisher and Komosa-Hawkins 2013). The literature on sexual health education for LGBTQ+ youth indicates that participants tend to be more engaged in services when providers recognize their different identities and do not make assumptions about them based on stereotypes (Jeremiah et al. 2020; Moore et al. 2020; Vela 2016).
3. **Cultural humility and responding to participants in a non-defensive manner.** Although it is important for staff to be aware of LGBTQ+ issues and terminology, they should also accept that they will not be fully knowledgeable about every aspect of LGBTQ+ culture. As one of the LGBTQ+



program providers we spoke with noted, “Facilitators need to resist the temptation to fight or become counter aggressive if challenged.” A cultural humility framework emphasizes the importance of engaging in a lifelong process of learning about and respecting different points of view (Tervalon and Murray-García 1998). Training on cultural humility has been linked to improved care for LGBTQ+ people in sexual and reproductive health care settings (Jadwin-Cakmak et al. 2020).

4. **Opportunities to explore one’s own biases and misconceptions.** Staff need to be willing to let go of their previously held ideas about sexuality and categories of gender identity and expression (Dunleavy and Dodd 2021; Rand et al. 2021; Terepka and Torres-Pagán 2020). As one of the LGBTQ+ program providers we met with said, “We’re all built with lots of information and expectations around relationships. So I would say it’s important to train facilitators to have a look at their own biases and be able to address that and see how it could show up in the way they present information.” One article we reviewed recommended a series of self-reflective questions for staff to use to explore their own heteronormative assumptions, heterosexual privilege, and heterosexual identity (Fisher and Komosa-Hawkins 2013).
5. **Techniques for managing sensitive interactions in workshops, including discriminatory comments from other participants.** Educators who lead group workshops need to be skilled at gracefully allowing participants to share their thoughts and opinions while also ensuring they do not cause harm to anyone else (Hannenman et al. 2022). One suggestion shared by an educator we interviewed was to work with each new class to develop group norms around treating others with respect. If someone in the class is disrespectful, the educator can remind that person of the group norm and then redirect the conversation. Emphasizing the importance of classroom management in the adult program context, one participant noted, “You can’t just say ‘Oh, we’re inclusive’ and then when someone says something offensive, you just let them have that kind of conversation. You also have to be able to tell [them to stop]. Although we’re all adults, it’s just like, you’re supposed to establish respectful and healthy boundaries so that we can continue these sessions as a group without feeling like someone is an outcast.”
6. **Guidance on district, state, and federal laws and policies related to LGBTQ+ issues.** Frontline staff need clarity on what topics they are allowed to address, and guidance on how to address politically charged topics, especially in school settings. For example, some states and school districts have mandates that prohibit discussion of LGBTQ+ people or issues in certain grades. If staff do not fully understand these mandates, they may be hesitant to discuss these issues at all, even when these discussions would be permitted and benefit youth in their classes (Fisher and Komosa-Hawkins 2013). Knowing this information can empower staff to feel more confident discussing LGBTQ+ topics with program participants.
7. **Supportive and trustworthy resources for LGBTQ+ participants.** Staff should be aware of LGBTQ-affirmative organizations in the local community or school, including GSAs and pride organizations, that could provide additional support to LGBTQ+ participants in their program. Educators should also be knowledgeable about reputable online resources to share with youth and adults who may want more information on LGBTQ+ relationships. Some well-known national organizations with a strong online presence are The Trevor Project, GLSEN, GLAAD, PFLAG, and the Human Rights Campaign.



## IV. Remaining Gaps and Considerations for Future Research and Programming

Many HMRE programs for youth and adults are currently grappling with how to better serve LGBTQ+ people in their communities. As the number of people who openly identify as LGBTQ+ continues to grow, it will be even more important for HMRE programs to ensure that their services are inclusive. Inclusive programming not only has benefits for LGBTQ+ participants but also has the potential to enhance services for youth and adults of all genders and sexual orientations (Gowen and Wings-Yanez 2014; Hobaica and Kwon 2017; Poteat et al. 2017). In programs for youth, discussing LGBTQ+ people and relationships can help youth think about their own identity development and support their current and future friendships, family relationships, and romantic partnerships. In programs for adults, inclusive content can enhance participants' understanding and acceptance of the LGBTQ+ community and support their relationships with others—friends, children, or other relatives, for example—who are LGBTQ+.

The literature we reviewed, as well as the program practitioners, educators, and participants with whom we spoke, highlighted common challenges related to program inclusivity, as well as numerous strategies and approaches for addressing these challenges. However, several gaps remain in our understanding of how to make programs more inclusive for LGBTQ+ participants, which future research and programming could address:

- **Additional research on the relationship experiences of certain subgroups within the LGBTQ+ community would enhance program content and delivery.** Most research on LGBTQ+ relationship and relationship interventions, including a prior study of federally funded HMRE programs (Peters et al. 2018), has focused on the experiences of lesbian, gay, or bisexual people in same-sex relationships. We know much less about the relationship and parenting experiences of people who are transgender, non-binary, intersex, and other sexual and gender minorities (Coolhart 2023; Minten and Muzacz 2022). We also know relatively little about how the relationship experiences of LGBTQ+ people vary by race/ethnicity or across different age groups. As a result, HMRE programs may not know what content to deliver or resources to share to best meet the needs of these diverse subgroups.
- **Data on participants' sexual orientation and gender identity would allow programs to better serve the LGBTQ+ community.** Collecting data on participants' sexual orientation and gender identity—which is commonly referred to as “SOGI” (sexual orientation and gender identity) data collection—is important for assessing LGBTQ+ participants' satisfaction with HMRE programs and programs' impact on relevant outcomes (Ouellette and Alamillo 2022; Cikara 2023). Collecting SOGI data would also allow HMRE programs to explore whether LGBTQ+ participants have program experiences or outcomes that differ from those of cisgender, heterosexual participants (Ouellette and Alamillo 2023). Programs could use this information to inform program adaptations that better address the needs of LGBTQ+ participants. When collecting SOGI data, programs should take extra care to maintain participants' privacy and confidentiality by adhering to strict data security policies, such as removing participants' names and other personally identifying information from survey responses. This is especially important for programs that work with youth.
- **The feasibility and efficacy of certain strategies may depend on programs' social and political environment.** LGBTQ+ inclusivity continues to be a politically charged issue in the United States. For example, whereas some states have laws prohibiting the discussion of sexual orientation and gender identity in schools, other states require schools to address these topics (Movement Advancement Project 2023). In addition, social norms related to LGBTQ+ relationships and

acceptance of LGBTQ+ people can vary widely from place to place (Peters et al. 2018). These policies and norms can affect the ease with which programs are able to implement the strategies and approaches proposed in this paper. Programs should recognize the importance of their local context and work within it to enhance the inclusivity of their services. Programs across the country should also communicate with one another to share strategies they have used to enhance their inclusivity, particularly in less supportive environments.

Even though there is still more work to do, it is important for HMRE programs to continue to strive for greater inclusivity of the LGBTQ+ community. A common theme in the literature on relationship education for LGBTQ+ youth and adults, as well as in our conversations with practitioners who have long served LGBTQ+ populations, is that simply welcoming LGBTQ+ participants is not enough. It is also not enough to merely state that the content covered by HMRE programs applies to everyone regardless of their sexual orientation or gender identity. To truly be inclusive, programs must directly address the needs and relationship issues that face the LGBTQ+ people they serve. By failing to offer such inclusive services, programs run the risk of excluding or even harming the LGBTQ+ youth and adults who participate in their programs. As one program practitioner explained, “It ultimately comes down to doing no harm.... And if we’re not offering programs in inclusive ways, we’re doing harm, whether we mean to or not. It’s not just leaving people out. It’s causing some emotional and mental discomfort and potentially distress. And I think we have to avoid that at all costs.” Despite the many challenges and unanswered questions that accompany this work, enhancing the inclusivity of HMRE programs is imperative for improving the health and well-being of LGBTQ+ people and their families.



**"It ultimately comes down to doing no harm...And if we're not offering programs in inclusive ways, we're doing harm, whether we mean to or not."**

***—Practitioner and evaluator focused on LGBTQ+-inclusive programming***

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# **Appendix A**

## **Methods**

## Literature review parameters and procedures

To identify relevant literature on relationship education and related services for LGBTQ+ populations, the study team conducted two separate literature searches, one aimed at services for youth and one aimed at services for adults. Separate searches were necessary because the search parameters needed to differ to yield a relevant and manageable group of citations on programming for each age group. We consulted with two experts in the field of relationship programming for youth and adults to inform our literature search. (These experts also participated in our practitioner focus groups, as described later in the appendix.) The parameters used for each search, as well as the screening criteria, can be found in Tables A.1. and A.2. Five team members were trained on these parameters and completed the article screening.

**Table A.1. Youth literature search and screening parameters**

| Review parameter          | Details  |
|---------------------------|--|
| Search limits             | Published since 2013; English language; peer reviewed  |
| Targeted disciplines      | Healthy marriage and relationship education; sexual health education; mental health  |
| Databases                 | Academic Search Complete, APA PsycInfo, PubMed, Sociology Source Ultimate, Education Source, ERIC  |
| Search terms <sup>a</sup> | <p><u>Population terms:</u><br/>                     (LGBTQ*[ti] OR LGBT*[ti] OR GLBT*[ti] OR same-sex[ti] OR sexual minorit*[ti] OR male-couple*[ti] OR female-couple*[ti] OR gender-sexuality[ti] OR "gay straight alliance" OR Men-who-have-sex-with-men[ti] OR MSM[ti] OR women-who-have-sex-with-women[ti] OR WSW[ti] OR transgender*[ti] OR trans-gender[ti] OR trans[ti] OR two-spirit*[ti] OR non-binary[ti] OR nonbinary[ti] OR assigned-female[ti] OR assigned-male[ti] OR gay[ti] OR homosexual*[ti] OR lesbian*[ti] OR lesbigay[ti] OR bi-sexual*[ti] OR bisexual*[ti] OR asexual*[ti] OR pansexual[ti] OR queer[ti] OR gender-queer[ti] OR genderqueer[ti] OR bi-gender[ti] OR bigender[ti] OR agender[ti] OR inter-sex[ti] OR intersex[ti] OR gender-fluid[ti] OR same-gender[ti] OR gender minorit*[ti] OR gender-affirm*[ti] OR questioning[ti] OR "sexual AND gender" OR "sexual gender"[ti])<br/>                     (Youth[ti] OR young[ti] OR minor*[ti] OR child[ti] OR children[ti] OR teen*[ti] OR "young adult"[ti:~2] OR student*[ti] OR adolescen*[ti] OR juvenil*[ti] OR "13-19"[ti])</p> <p><u>Subject terms:</u> (marriage*[ti] OR married[ti] OR marital[ti] OR relationship*[ti] OR couple*[ti] OR intimate partner*[ti] OR partner*[ti] OR cohabit*[ti] OR parent*[ti] OR famil*[ti] OR mother*[ti] OR father*[ti] OR ((sex[ti] OR sexual[ti] OR sexuality[ti] OR sexuality-inclus*[ti]) AND (behavio*[ti] OR educat*[ti] OR therap*[ti] OR communicat*[ti] OR health[ti])) OR pregnan*[ti] OR romantic[ti] OR interpersonal*[ti] OR inter-personal*[ti] OR conflict[ti] OR dyadic[ti] OR alliance[ti] OR (mental[ti] AND (health[ti] OR well-being[ti] OR wellbeing[ti])))</p> <p><u>Program type terms:</u> (educat*[ti] OR interven*[ti] OR program*[ti] OR support*[ti] OR counsel*[ti] OR resource*[ti] OR promot*[ti] OR strateg*[ti] OR practic*[ti] OR curricul*[ti] OR project*[ti] OR initiativ*[ti] OR training[ti] OR incentiv*[ti] OR implement*[ti] OR model*[ti] OR therap*[ti] OR service*[ti] OR communicat*[ti] OR messag*[ti] OR talk*[ti] OR discuss*[ti] OR dialog*[ti] OR workshop*[ti] OR seminar*[ti] OR approach*[ti])</p> |
| Screening criteria        | <p>Article is based on research conducted in the United States and focuses on at least one of the following:</p> <ul style="list-style-type: none"> <li>• A study of a program, intervention, or service related to the relationships, sexual education, or mental health of LGBTQ+ clients</li> <li>• Barriers and/or recommendations for making relationship, sexual education, or mental health programs/services more inclusive for LGBTQ+ youth</li> <li>• Public policies or legislation related to serving LGBTQ+ youth</li> </ul>  |

<sup>a</sup> For an article to meet our search parameters, the article had to include one term from each of the population, subject, and program type search terms.

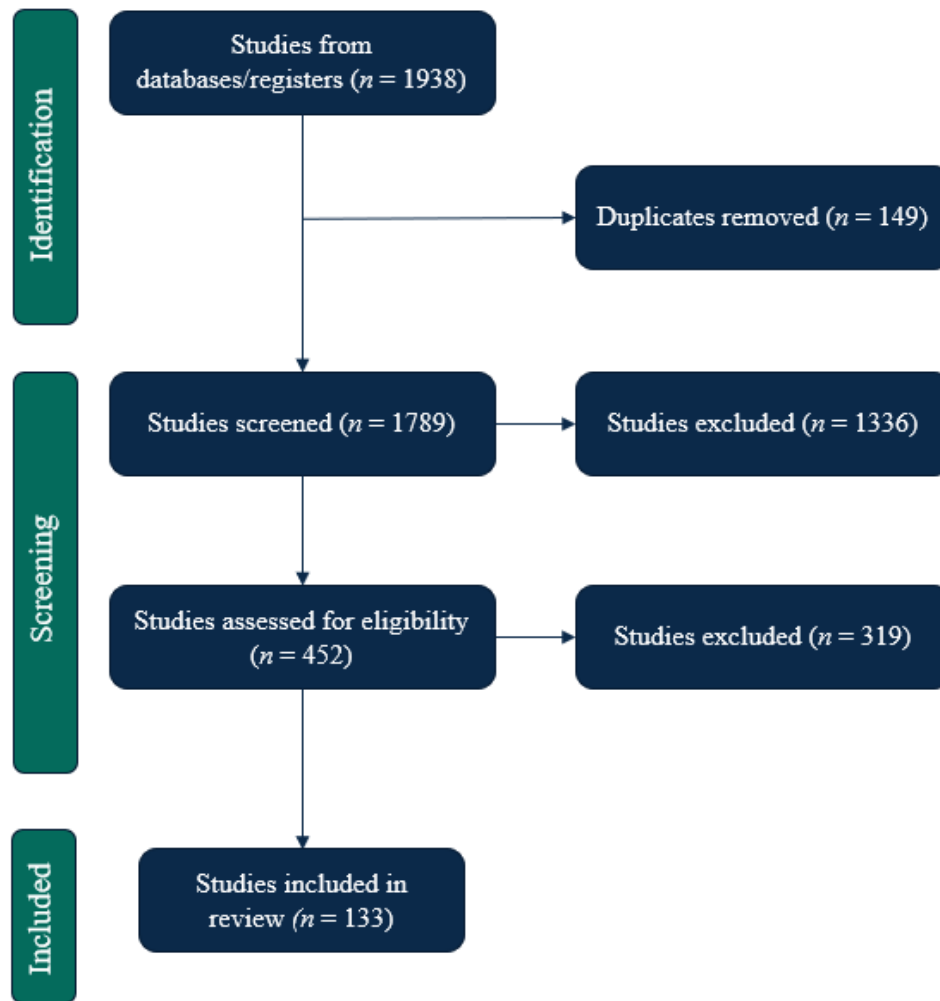
**Table A.2. Adult literature search and screening parameters**

| Review parameter          | Details   |
|---------------------------|---|
| Search limits             | Published since 2013; English language; peer reviewed   |
| Targeted disciplines      | Healthy marriage and relationship education; couples counseling   |
| Databases                 | Academic Search Complete, APA PsycInfo, PubMed, Sociology Source Ultimate, Education Source, ERIC   |
| Search terms <sup>a</sup> | <p><b>Population terms:</b> (LGBTQ*[ti] OR LGBT*[ti] OR GLBT*[ti] OR same-sex[ti] OR sexual minorit*[ti] OR male-couple*[ti] OR female-couple*[ti] OR gender-sexuality[ti] OR “gay straight alliance” OR Men-who-have-sex-with-men[ti] OR MSM[ti] OR women-who-have-sex-with-women[ti] OR WSW[ti] OR transgender*[ti] OR trans-gender[ti] OR trans[ti] OR two-spirit*[ti] OR non-binary[ti] OR nonbinary[ti] OR assigned-female[ti] OR assigned-male[ti] OR gay[ti] OR homosexual*[ti] OR lesbian*[ti] OR lesbigay[ti] OR bi-sexual*[ti] OR bisexual*[ti] OR asexual*[ti] OR pansexual[ti] OR queer[ti] OR gender-queer[ti] OR genderqueer[ti] OR bi-gender[ti] OR bigender[ti] OR agender[ti] OR inter-sex[ti] OR intersex[ti] OR gender-fluid[ti] OR same-gender[ti] OR gender minorit*[ti] OR gender-affirm*[ti] OR questioning[ti] OR “sexual AND gender” OR “sexual gender”[ti])</p> <p><b>Subject terms:</b> (marriage*[ti] OR married[ti] OR marital[ti] OR relationship*[ti] OR couple*[ti] OR intimate partner*[ti] OR partner*[ti] OR cohabit*[ti] OR parent*[ti] OR famil*[ti] OR mother*[ti] OR father*[ti] OR pregnan*[ti] OR romantic[ti] OR interpersonal*[ti] OR inter-personal*[ti] OR conflict[ti] OR dyadic[ti] OR alliance[ti])</p> <p><b>Program type terms:</b> (educat*[ti] OR interven*[ti] OR program*[ti] OR support*[ti] OR counsel*[ti] OR resource*[ti] OR promot*[ti] OR strateg*[ti] OR practic*[ti] OR curricul*[ti] OR project*[ti] OR initiativ*[ti] OR training[ti] OR incentiv*[ti] OR implement*[ti] OR model*[ti] OR therap*[ti] OR service*[ti] OR communicat*[ti] OR messag*[ti] OR talk*[ti] OR discuss*[ti] OR dialog*[ti] OR workshop*[ti] OR seminar*[ti] OR approach*[ti])</p> |
| Screening criteria        | <p>Article is based on research conducted in the United States and focuses on at least one of the following:</p> <ul style="list-style-type: none"> <li>• A program, intervention, or service related to the relationships of LGBTQ+ clients (e.g., relationship education, couples counseling)</li> <li>• Barriers and/or recommendations for making programs/services related to the relationships of LGBTQ+ clients more inclusive for LGBTQ+ adults</li> <li>• Public policies or legislation related to serving LGBTQ+ adults</li> </ul>   |

<sup>a</sup> For an article to meet our search parameters, the article had to include one term from each of the population, subject, and program type search terms.

One hundred and thirty-three articles were ultimately included in the review (see Figure A.1). Eighty-four of these articles focused on youth, 45 focused on adults, and 4 focused on both age groups. Appendix B contains the full list of articles included in the review.

Figure A.1. PRISMA diagram for literature review



To extract data from each article included in our review, the team created a template based on our three research questions. We extracted information about the study or purpose of the article (e.g., objective, study design, sample size, key findings); the population of interest (youth or adults); program and service topics and setting; and challenges and strategies to making programs more inclusive for LGBTQ+ youth and adults. Challenges and strategies focused on the following topics: recruitment and outreach; program/service content; program delivery; hiring and training; community partnerships; and community, social, and political context.

### LGBTQ+ inclusivity resource review

In addition to reviewing the literature on relationship education and related services for LGBTQ+ populations, the study team also reviewed literature and resources related to LGBTQ+ inclusivity across different practice areas. The review included both peer-reviewed articles and grey literature, including practitioner- or participant-focused toolkits, guides, and reports. We searched seven databases that focused on general human services studies, psychology, sociology, nursing and allied health, and education and policy for relevant literature (Table A.3). In addition, we used Google and Google Scholar to identify grey literature, government reports, and other potential sources. We retained only English-

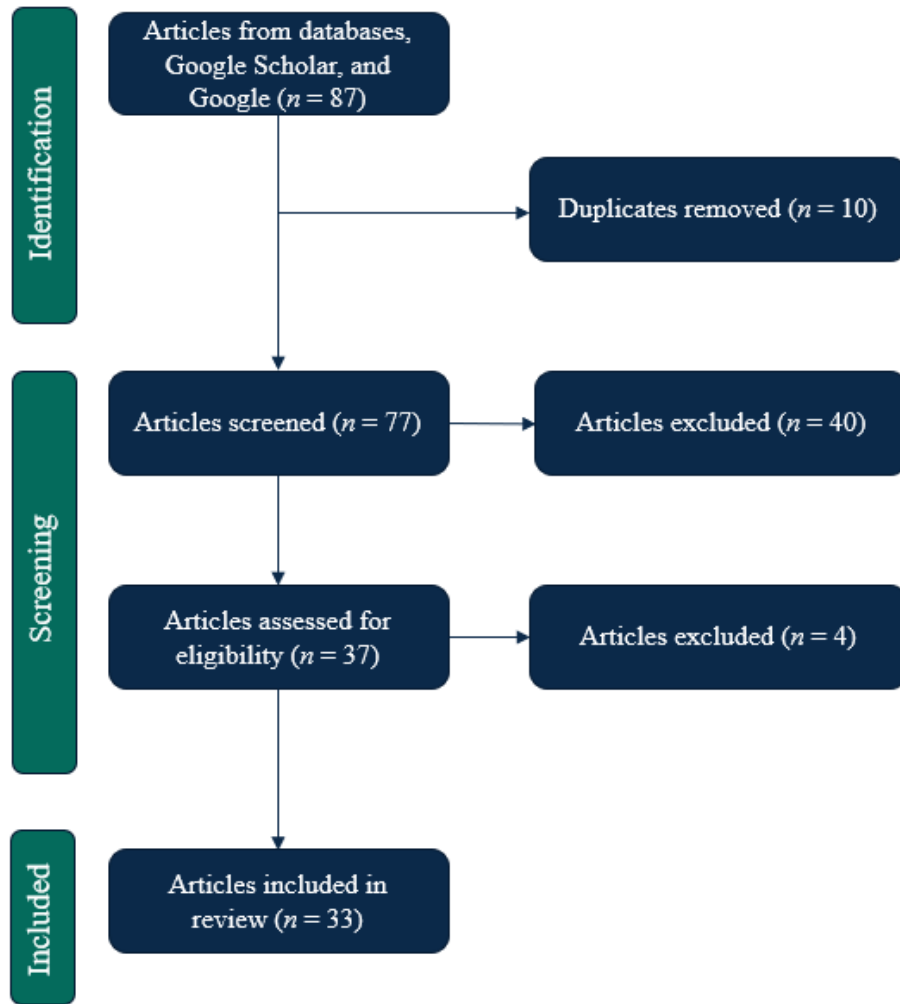
language publications related to programs or organizations within the United States. In total, 33 inclusivity resources were included in our review (Figure A.2).

**Table A.3. Inclusivity resource search parameters**

| Search parameter                       | Details  |
|--|--|
| Limits                                 | English language; U.S. based   |
| Databases                              | APA PsycInfo, Academic Search Complete, CINAHL Ultimate, Family & Society Studies Worldwide, Sociology Source Ultimate, Education Source, Health Policy Reference Center |
| Database search terms                  | "HMRE," "LGBT," and "programming"  |
| Google and Google Scholar search terms | "health relationships," "marriage," "LGBTQ," "same sex," "programs," "training," "education," "checklist," and "toolkit"   |

We applied a systematic screening process to assess the relevance of each source based on its applicability to and description of LGBTQ+ inclusivity practices. For screening, we reviewed articles' titles and abstracts or executive summaries to determine their relevance to LGBTQ+ inclusivity practices in one of the following areas: services, organizational climate, or staffing. Then we used a spreadsheet to review the full text and summarize promising practices and approaches for LGBTQ+ inclusivity. We organized the spreadsheet according to the three service delivery areas and their subcategories: (1) services: curriculum, intake, direct services, community engagement, physical setting; (2) organizational climate: policies, program design/environment; and (3) staffing: training and professional development, biases and attitudes. Appendix B contains the full list of articles included in the review.

Figure A.2. PRISMA diagram for inclusivity resource review



### Qualitative data collection and analysis

To better understand the challenges that HMRE programs face related to serving LGBTQ+ youth and adults and to gather strategies for improving inclusivity, the study team collected qualitative data from three sources: program practitioners, educators, and participants. We worked with Health Media Lab to secure institutional review board (IRB) approval for the data collection. The IRB approved the study design, recruitment materials, instruments and protocols, and processes to protect participants' confidentiality and privacy.

#### Program practitioners

We conducted virtual focus groups with HMRE program directors and practitioners who had experience leading work with LGBTQ+ populations in other program contexts. Our intention was to conduct two 90-minute focus groups: one involving practitioners who serve youth and a second involving practitioners who serve adults. However, scheduling conflicts resulted in us conducting two focus groups and two one-on-one interviews. Each practitioner received \$150 as a thank-you for their time.

On the youth side, we conducted one focus group with four practitioners: two federally-funded HMRE program directors, one director of an HIV and STI prevention program for LGBTQ+ youth and their families, and one director of a program evaluation firm that focuses on updating sexual health and pregnancy prevention programs to make them more inclusive for LGBTQ+ youth. On the adult side, we conducted one focus group with three practitioners: two federally funded HMRE program directors and one developer and director of a relationship education program for same-sex couples. We also conducted two one-on-one interviews: one with a federally funded HMRE program director and one with the former director of an organization that provides mental health services and substance use treatment to LGBTQ+ people.

Our focus group protocol, which is included in Appendix C, covered different areas of program implementation, including recruitment and outreach; curricula and other program services; staff hiring, training, and service delivery; community partnerships; and programs' social and political context. On each of these topics, we discussed the challenges programs face related to LGBTQ+ inclusivity and strategies for making programs more inclusive.

### **Program educators**

The study team also conducted virtual one-on-one interviews with nine educators who worked at federally funded HMRE programs. Four of the educators worked at a program that served youth and five worked at a program that served adults. Each interview lasted approximately 45 minutes, and educators received a \$75 Visa gift card as a thank-you for their time. The interviews focused on educators' experience delivering HMRE programming, including questions about how many participants in their programs identify as LGBTQ+, what challenges they have noticed related to serving LGBTQ+ youth and adults, and what strategies they have used to make programming more inclusive for LGBTQ+ participants. For the full interview protocol, see Appendix C.

### **Program participants**

Finally, the study team conducted virtual one-on-one interviews with eight individuals who self-identified as LGBTQ+ and were participating or had recently participated in a federally-funded HMRE program at the time of the interview. Six of the people we interviewed had recently participated in a youth HMRE program, and two of the people we interviewed had recently participated in an adult HMRE program. Two more adult program participants signed up to be interviewed, but they did not show up and our attempts to reach them to reschedule were unsuccessful. Each interview lasted approximately 45 minutes, and participants received a \$75 Visa gift card as a thank-you for their time. The interviews focused on participants' experiences in the HMRE program, the challenges or issues they encountered, and their ideas for how programs could improve their content, services, or delivery approach to make programming more inclusive for LGBTQ+ participants in the future. For the full interview protocols for youth and adults, see Appendix C.

### **Approach and analysis**

Two FRAMING study team members were present during the focus groups and interviews. One served as the primary moderator and the other took notes and asked clarifying or follow-up questions. With participants' permission, we audio recorded the focus groups and interviews to make sure our notes were complete. We then had the recordings transcribed and uploaded the transcripts to a project file in NVivo, a qualitative coding software.



The team developed an initial list of high-level codes based on themes that emerged from the literature and inclusivity reviews, focus groups, and interviews. Each team member independently coded one interview and met to discuss their coding, resolve any differences, and modify the codes as necessary. They then divided the remaining transcripts among them and coded them using NVivo. One team member reviewed everyone's coding to ensure they were applying the codes correctly and consistently. After the transcripts were coded, the team analyzed the results, focusing on the frequency with which they heard certain themes and identifying examples of challenges and strategies related to LGBTQ+ inclusivity for the white paper.

## **Appendix B**

### **Literature Reviewed**

## Literature on relationship education and related services for LGBTQ+ youth and adults

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## **Appendix C**

### **Focus Group and Interview Protocols**

## Adult Program Practitioner Focus Group Protocol

Thank you for being here today. We appreciate your willingness to share your experience and expertise about HMRE programs and serving LGBTQ+ adults and couples. I'm going to start by sharing some quick background on the FRAMING Research project and this piece of the project. Then, we will go around and do brief introductions. After that, we will spend the rest of our time having a conversation about how HMRE programs are serving LGBTQ+ clients, what challenges exist related to serving this population, and what promising practices and approaches could HMRE programs use to enhance their inclusivity for LGBTQ+ adults and couples. We will spend some of the time asking questions that we want each of you to answer, but most of the time we want to let you talk with each other as you share your experiences and expertise.

Before we continue, we would like to ask your permission to record this session. The study team will be the only ones who access the recording, and we will record the session for note keeping purposes only. Is that OK with everyone?

[START RECORDING HERE]

### Overview of study

FRAMING Research (which stands for Fatherhood, Relationships, and Marriage—Illuminating the Next Generation of Research) is a project designed to summarize research on healthy marriage and relationship education (HMRE) programs and responsible fatherhood (RF) programs; highlight and prioritize key learning gaps; and inform researchers' and policymakers' efforts to strengthen future programs. The project is funded by the Office of Planning, Research, and Evaluation within the Administration for Children and Families.

As part of FRAMING Research, we are writing a white paper exploring how to make HMRE programs more inclusive for LGBTQ+ youth and adults. For those of you on the call who aren't as familiar with HMRE programs, these are programs funded by the Office of Family Assistance within ACF to support healthy romantic relationships. Some programs are geared toward high-school age youth and often look similar to sexual health programs, although they focus on a wider range of topics, including understanding healthy relationships, communicating and managing conflict with romantic partners, etc. Many of these programs are delivered in schools during the regular school day or in after-school programs, although they can also be delivered in community-based settings. Other HMRE programs are geared toward adults, including married couples, couples who are dating, or even adult individuals who may or may not be in a relationship. These programs are usually delivered in community-based settings, such as at community colleges, social service agencies, etc.

During today's call, we are going to focus on strategies for serving LGBTQ+ clients in HMRE programs for adults and couples. We already held a separate call focused on youth. Our goal is to learn more about HMRE programs' experiences with recruiting and serving LGBTQ+ clients, promising practices and approaches for supporting the inclusion of LGBTQ+ adults and couples in relationship education programs, and areas where additional research or support is needed to promote this inclusivity. In addition to these conversations, as part of this white paper we are also reviewing the literature on relationship education and related services for LGBTQ+ youth and adults, and we will be conducting interviews with program educators and with program participants who self-identify as LGBTQ+.

### **A note about terms and format**

While we are using the term LGBTQ+ for this discussion, we would like for you to think and talk about each of the diverse groups represented under the label. We are interested in learning more about how you currently support, conduct research with, or work with sexual and gender minorities, including people who are gay, lesbian, bisexual, trans, queer, nonbinary, and other sexual or gender identities. If you have specific examples, please remember to not use identifying information, such as names.

As we said before, we will ask some questions that we want each of you to answer, so that we can all understand more about your background and expertise. However, we will also ask a lot of open-ended questions to generate discussion and ideas around challenges related to serving this population and strategies that have helped or could help make programs more inclusive. For a couple of questions, we will also be asking you to write your responses in the chat.

Let's begin with introductions.

### **Introductions**

Briefly describe your background as it relates to working with HMRE programs and/or working with LGBTQ+ adults and couples

1. Name and current position
2. Brief description of role and/or area of expertise

### **Background on program context**

Next, I will ask each of you a few questions about the programs and populations you have worked with.

3. What sorts of adults and couples do you serve in your program or work with through your research?
4. Can you briefly describe your program? What are the main services that the program offers? If you use specific curriculum, could you share the name?
5. Does your program serve many LGBTQ+ adults and couples, and why do you think this is?
6. Are there certain subgroups of adults and couples under the LGBTQ+ umbrella that you serve a lot of? Are certain subgroups less well-represented?
7. Are there any challenges related to serving LGBTQ+ youth that are at the top of your mind or that you want to make sure we talk about today?

Now, let's transition to talking about specific aspects of the programs you work with. For the next set of questions, feel free to respond to each other, to ask for clarification from each other, and to share your own experiences based on what you are hearing others say. We'll begin with outreach.

### **Outreach**

8. How do you find adults and couples to participate in your program?
  - a. Does your program specifically aim to serve LGBTQ+ adults and couples?

9. Are there certain strategies you use to make recruitment, marketing, or other outreach materials more inclusive to LGBTQ+ adults and couples? (possible probes: inclusive recruitment materials, recruiting at certain locations, using recruiters who are LGBTQ+, etc.)
10. For those of you who have experience with federally funded HMRE programs, do any of these strategies seem useful or feasible for HMRE programs that serve adults and couples? What challenges do you anticipate with these recruitment strategies?

**Curriculum and program services**

11. Please take a few minutes to write your response to the following question in the chat: What sorts of topics or elements are important for relationship education programs to address to ensure they are inclusive for LGBTQ+ adults and couples?
12. Does anyone want to share some of the things they put in the chat?
13. For HMRE providers, overall, do you think your program feels inclusive for LGBTQ+ adults and couples?
  - a. Can you say more about what topics or elements do feel inclusive?
  - b. What elements could be improved to make it more inclusive?
  - c. Do you think it would be feasible to add the topics or elements suggested in the chat to your program?
  - d. Do you anticipate any challenges making these sorts of adaptations?
14. Does anyone have suggestions for how HMRE programs could successfully address those challenges?

**Staff Training – Educators**

15. Please take a few minutes to write your response to the following question in the chat: What sorts of training or support do program educators need to successfully serve LGBTQ+ adults and couples? (probes: training on proper terminology, inclusive language, not being defensive when corrected, etc.)
16. Have educators or other staff in your program expressed concerns related to serving LGBTQ+ populations?
  - a. If so, can you share how you have addressed these concerns?
  - b. What has worked well?
17. Are there good resources that exist for training HMRE educators to be more inclusive of LGBTQ+ adults and couples?
18. For HMRE providers, does it seem feasible to implement some of these training suggestions in your program? Why or why not?
  - a. Are there specific barriers you foresee to training educators and program staff to be more inclusive of LGBTQ+ adults and couples?
  - b. Does anyone have suggestions for overcoming these barriers?

### **Community Partners**

19. Does your program or your research involve partnering with other organizations in the community that serve LGBTQ+ adults and couples?
  - a. If yes, can you share what has worked well when working with community partners?
  - b. If no, why do you think that is?
20. What are some challenges to maintaining and building relationships with other organizations that serve LGBTQ+ adults and couples?
  - a. Does anyone have additional suggestions for addressing those challenges?

### **Other forms of support**

21. Are there other barriers you have seen related to offering relationship education to LGBTQ+ adults and couples in your community that we have not already discussed?
22. What types of support or changes would be helpful to address these challenges? (Probes: additional training, financial support, cultural shifts, etc.)

### **FRAMING - Identifying gaps and future research**

A key objective of the FRAMING Research project is to think about promising directions for future research.

23. Given everything we have discussed today, what is one area for future research that you think could improve our understanding of how to better serve LGBTQ+ adults and couples in HMRE programs?
  - a. For example, are there strategies or resources for making programs more inclusive that could be interesting to test within the HMRE context?
24. Anything else you want to add before we close?

### **Wrap up and overview of next steps**

Thank you again for sharing your insights and ideas with us today. Our next step will be to conduct interviews with HMRE program educators and current and former HMRE program participants who are LGBTQ+. If you have suggestions for educators or participants who may want to participate in an interview, please send me an email after the call.

Our goal is to combine the themes and strategies discussed on today's call with the information that we collect from our interviews with educators and program participants. We will then summarize these themes in a white paper for ACF. We will send you a copy of the final white paper once it is ready.

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Finally, we encourage you to stay in contact with each other if you wish to do so to continue to exchange ideas and resources. Thank you again for sharing your experiences with us today.

## Youth Program Practitioner Focus Group Protocol

Thank you for being here today. We appreciate your willingness to share your experience and expertise about HMRE programs and serving LGBTQ+ youth. I'm going to start by sharing some quick background on the FRAMING Research project and this piece of the project. Then, we will go around and do brief introductions. After that, we will spend the rest of our time having a conversation about how HMRE programs are serving LGBTQ+ clients, what challenges exist related to serving this population, and what promising practices and approaches could HMRE programs use to enhance their inclusivity for LGBTQ+ youth. We will spend some of the time asking questions that we want each of you to answer, but most of the time we want to let you talk with each other as you share your experiences and expertise.

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As we said before, we will ask some questions that we want each of you to answer, so that we can all understand more about your background and expertise. However, we will also ask a lot of open-ended questions to generate discussion and ideas around challenges related to serving this population and strategies that have helped or could help make programs more inclusive. For a couple of questions, we will also be asking you to write your responses in the chat.

Any questions before we get started?

Let's begin with introductions.

### **Introductions**

Briefly describe your background as it relates to working with HMRE programs and/or working with LGBTQ+ youth

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Now, let's transition to talking about specific aspects of the programs you work with. For the next set of questions, feel free to respond to each other, to ask for clarification from each other, and to share your own experiences based on what you are hearing others say. We'll begin with outreach.

### **Outreach**

6. How do you find youth to participate in your program? If most of your recruitment happens at the school-level, please share your thinking about that process.
  - a. Does your program specifically aim to serve LGBTQ+ youth?

7. Are there certain strategies you use to make recruitment, marketing, or other outreach materials more inclusive to LGBTQ+ youth? (possible probes: inclusive recruitment materials, recruiting at certain locations, using recruiters who are LGBTQ+, etc.)
8. For those of you who have experience with federally-funded HMRE programs, do any of these strategies seem useful or feasible for HMRE programs that serve youth? What challenges do you anticipate with these recruitment strategies?
  - a. For example, are there specific challenges to making recruitment materials more inclusive when recruiting schools?

**Curriculum and program services**

9. Please take a few minutes to write your response to the following question in the chat: What sorts of topics or elements are important for relationship education programs to address to ensure they are inclusive for LGBTQ+ youth?
10. Does anyone want to share some of the things they put in the chat?
11. For HMRE providers, overall, do you think your program feels inclusive for LGBTQ+ youth?
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14. Have educators or other staff in your program expressed concerns related to serving LGBTQ+ populations?
  - a. If so, can you share how you have addressed these concerns?
  - b. What has worked well?
15. Are there good resources that exist for training HMRE educators to be more inclusive of LGBTQ+ youth?
16. For HMRE providers, does it seem feasible to implement some of these training suggestions in your program? Why or why not?
  - a. Are there specific barriers you foresee to training educators and program staff to be more inclusive of LGBTQ+ youth?

- b. Does anyone have suggestions for overcoming these barriers?

**Community Partners**

- 17. Does your program or your research involve partnering with other organizations in the community that serve LGBTQ+ youth?
  - a. If yes, can you share what has worked well when working with community partners?
  - b. If no, why do you think that is?
- 18. What are some challenges to maintaining and building relationships with other organizations that serve LGBTQ+ youth?
  - a. Does anyone have additional suggestions for addressing those challenges?

**Other forms of support**

- 19. Are there other barriers you have seen related to offering relationship education to LGBTQ+ youth in your community that we have not already discussed? (Probes: political climate, school district or state policies, parental involvement, etc.)
- 20. What types of support or changes would be helpful to address these challenges? (Probes: additional training, financial support, cultural shifts, etc.)

**FRAMING - Identifying gaps and future research**

A key objective of the FRAMING Research project is to think about promising directions for future research.

- 21. Given everything we have discussed today, what is one area for future research that you think could improve our understanding of how to better serve LGBTQ+ youth in HMRE programs?
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- 22. Anything else you want to add before we close?

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Finally, we encourage you to stay in contact with each other if you wish to do so to continue to exchange ideas and resources. Thank you again for sharing your experiences with us today.

## Educator Interview Protocol

### Study introduction and consent

Thank you for taking the time to speak with us today. My name is \_\_\_\_\_, and I am joined by my colleague \_\_\_\_\_. We do not work for [*the HMRE program*]. We are from a company called Mathematica and are working on a research project called the FRAMING Research project, which examines existing and ongoing research on healthy marriage and relationship education programs and responsible fatherhood programs. This project is funded by the Office of Planning, Research, and Evaluation, or OPRE, which is part of the Administration for Children and Families within the U. S. Department of Health and Human Services.

We are speaking with you today to hear more about your experiences as a facilitator for [*the HMRE program*] and learn ways to help make these types of programs more inclusive for LGBTQ+ participants in the future. Our discussion today will take about 45 minutes. We will combine the information you share with us today with information from other people we are interviewing and write a summary of what we learned.

We will not connect your name to anything you say, so please share your opinions freely. We will keep your identity and what you say here private to the extent permitted by law. The information is being collected for research purposes only.

I will be taking notes as we go, but we would like to record this interview so that we can refer to it to make sure that our notes are accurate. The recording is for our internal use only, and after we are sure that we have good notes, we will delete the recording. Are you OK with us recording the interview? [*If they assent, notetaker should hit record.*]

You can choose not to participate in the discussion and there will be no consequences if you choose not to participate. You can also choose not to answer a question if you wish. You will receive a \$75 gift card as a thanks for talking with us today.

Do you have questions about the information we just discussed?

Do you consent to participate in the interview today?

### Ground rules

We value the information you share with us. Before we get started, I would like to say that there are no right or wrong answers to the questions. We are interested in learning from your thoughts, opinions, and experiences. Just say exactly what you think, whether it's positive or negative. This will be an informal discussion.

Do you have any questions before we get started?

### Background

1. To start off, can you please state your title, a brief description of your responsibilities as they relate to [*the HMRE program*], and how long you have worked at the program?
2. How do you describe your gender and sexual orientation, if you feel comfortable sharing? Do you identify as LGBTQ+?

**Program context**

3. I'd like to start by learning a little bit more about your program. What are the overall goals of the program? What curriculum do you use? Do you provide any other services?
4. How would you describe the population that your program typically serves? (*Probes: demographics, couples or individuals*)
5. What percentage of your participants do you think identify as LGBTQ+?
6. Overall, do you feel like the program is inclusive of LGBTQ+ populations? Why or why not? (*Probes: curriculum includes discussion or imagery of sexual or gender minorities; curriculum addresses topics that are relevant for LGBTQ+ people such as coming out or social stigma; facilitators discuss examples of LGBTQ+ relationships*)
7. Are there topics that do not seem particularly relevant to LGBTQ+ participants? If so, can you describe what these are?
8. Have you or others at [*the HMRE program*] made changes or adaptations to the curriculum to better support LGBTQ+ participants? Why or why not?
  - a. *If yes:* How did you decide what changes to make? Can you describe the process you used to make these changes? For instance, did you work with the curriculum developer?

**Staff support and training**

9. Do you feel like you are able to connect with LGBTQ+ [*youth/adults*] in the program? Why or why not?
  - a. Do you think it is harder, easier, or about the same as heterosexual and/or cisgender participants?
10. Have you received any training on working with LGBTQ+ participants? If so, can you describe what the training included?
11. Would you like to receive more training or support related to working with LGBTQ+ participants? If so, what types of training or support would be helpful to you?

**Participant engagement**

12. Do you think [*program name*] advertises itself as being inclusive of LGBTQ+ experiences? Why or why not?
  - a. *If yes:* In what ways is it inclusive?
13. Is getting LGBTQ+ participants to open up during the program easier, harder, or about the same as other participants?
  - a. How, if at all, do you help LGBTQ+ participants open up or speak in the program if they are hesitant at first?
14. What strategies do you think helps keep LGBTQ+ participants engaged in the program? (*Probes: rapport with staff, rapport with other participants, topics or skills they learn*)

15. Do you think that LGBTQ+ [*youth/adults*] have different motivations for participating in the program compared to other participants? Why or why not?
16. What skills or topics do you think LGBTQ+ [*youth/adults*] enjoy the most? Do these topics differ from other participants?
17. Do you think it's better for programs to offer separate workshops for LGBTQ+ participants, or to serve everyone in the same workshops regardless of their sexual orientation and gender identity?

**What would help you in the future**

18. Have you ever felt like the curriculum or program resources are insufficient to address a concern specific to LGBTQ+ participants? Why or why not?
  - a. *If yes:* Do you have other resources you use? Do you talk to other facilitators? Can you share a specific example?
19. What ideas, if any, do you have for making [*program name*] more welcoming for LGBTQ+ participants in the future?

**Final thoughts**

That concludes our questions for today. Is there anything else you would like to add or clarify?

Thank you again for sharing your experiences and taking time to answer our questions! Your insights will help others learn from your experiences. In appreciation for participating in this interview, we will be sending you an email with a \$75 gift card after the call. Is the email address we used to schedule this interview the correct email address for us to send the gift card? If not, what email address would you like us to use?

## Adult Participant Interview Protocol

### Study introduction and consent

Thank you for taking the time to speak with us today. My name is \_\_\_\_\_, and I am joined by my colleague \_\_\_\_\_. We do not work for [*the HMRE program*]. We are from a company called Mathematica and are working on a research project called the FRAMING Research project, which examines existing and ongoing research on healthy marriage and relationship education programs and responsible fatherhood programs. This project is funded by the Office of Planning, Research, and Evaluation, or OPRE, which is part of the Administration for Children and Families within the U. S. Department of Health and Human Services.

We are speaking with you today to hear more about your experiences participating in [*the HMRE program*] and learn ways to help make these types of programs more inclusive for LGBTQ+ participants in the future. Our discussion today will take about 45 minutes. We will combine the information you share with us today with information from other people we are interviewing and write a summary of what we learned.

We will not connect your name to anything you say, so please share your opinions freely. We will keep your identity and what you say here private to the extent permitted by law. The information is being collected for research purposes only.

I will be taking notes as we go, but we would like to record this interview so that we can refer to it to make sure that our notes are accurate. The recording is for our internal use only, and after we are sure that we have good notes, we will delete the recording. Are you OK with us recording the interview? [*If they assent, notetaker should hit record.*]

You can choose not to participate in the discussion and there will be no consequences if you choose not to participate. You can also choose not to answer a question if you wish. You will receive a \$75 gift card as a thanks for talking with us today.

Do you have questions about the information we just discussed?

Do you consent to participate in the interview today?

### Ground rules

We value the information you share with us. Before we get started, I would like to say that there are no right or wrong answers to the questions. We are interested in learning from your thoughts, opinions, and experiences. Just say exactly what you think, whether it's positive or negative. This will be an informal discussion.

Do you have any questions before we get started?

### Background

1. To start off, can you tell us a little bit about yourself? (*Probes: race/ethnicity, age, gender, job title, family status*)
2. What is the name of the HMRE program you participated in and where is it located?
3. Did you enroll in the program on your own or did you enroll with a partner?



- a. *If with a partner:* What is your relationship to your partner?
- b. *If alone:* Were you in a romantic relationship at the time of the program or are you in one currently?
- c. How would you describe your [and your partner's] sexual orientation?

**First impressions of the program**

4. How did you first hear about [program name]? (*Probe: flyers/posters, social media, word-of-mouth, other*)
5. Why did you decide to sign up for the program?
6. Did the program advertise itself as being inclusive of LGBTQ+ experiences? What gave you this impression?

**Experiences in HMRE program**

Now I'd like to hear about what the program was like.

*Program context*

7. How would you describe the purpose or goals of [program name]? What topics did you discuss?
8. Were there any other people who identified as LGBTQ+ in the program? If so, how many do you think there were?
9. How well do you feel the program captured the experiences of LGBTQ+ people?
10. How relevant was the program to your experiences as a [participant sexual and/or gender identity]? (*Probe: program content and examples, images in slides and handouts, survey response options for sexual orientation and gender*)

*Facilitators*

11. How many facilitators delivered the program?
12. What were your impressions of the program facilitator(s)? (*Probes: Likes, dislikes, limited interaction, a lot of interaction*)
13. What steps did the facilitator(s) take to create a comfortable environment for LGBTQ+ participants?
14. How knowledgeable did you find the facilitator(s) about LGBTQ+ relationships?

*Peers & classroom environment*

15. Did you feel like the other program participants were generally accepting of your identity? How could you tell?
16. Did you feel comfortable participating and sharing your personal experiences during workshop sessions? Why or why not?

*Application of HMRE program content*

17. What needs has [program name] helped you meet? (*Probe: individual needs, needs as a couple*)
18. How do you feel the program has improved (*your relationship/will improve your relationships in the future?*)
19. In the future, would you prefer to participate in a program tailored to people with specific sexual and gender identities or a program that serves people with different sexual and gender identities all together?

**Inclusivity of LGBTQ+ experiences in future HMRE programs**

20. What ideas do you have for making [program name] more welcoming for LGBTQ+ participants? (*Probes: specific lessons, facilitators, location, recruitment materials*)
21. How could the program partner with any other organizations in the community to better support LGBTQ+ participants?

**Final thoughts**

That concludes our questions for today. Is there anything else you would like to add or clarify?

Thank you again for sharing your experiences and taking time to answer our questions! Your insights will help others learn from your experiences. In appreciation for participating in this interview, we will be sending you an email with a \$75 gift card after the call. Is the email address we used to schedule this interview the correct email address for us to send the gift card? If not, what email address would you like us to use?

## Youth Participant Interview Protocol

### Study introduction and consent

Thank you for taking the time to speak with us today. My name is \_\_\_\_\_, and I am joined by my colleague \_\_\_\_\_. We do not work for [the HMRE program]. We are from a company called Mathematica and are working on a research project called the FRAMING Research project, which examines existing and ongoing research on healthy marriage and relationship education programs and responsible fatherhood programs. This project is funded by the Office of Planning, Research, and Evaluation, or OPRE, which is part of the Administration for Children and Families within the U. S. Department of Health and Human Services.

We are speaking with you today to hear more about your experiences participating in [the HMRE program] and learn ways to help make these types of programs more inclusive for LGBTQ+ participants in the future. Our discussion today will take about 45 minutes. We will combine the information you share with us today with information from other people we are interviewing and write a summary of what we learned.

We will not connect your name to anything you say, so please share your opinions freely. We will keep your identity and what you say here private to the extent permitted by law. The information is being collected for research purposes only.

I will be taking notes as we go, but we would like to record this interview so that we can refer to it to make sure that our notes are accurate. The recording is for our internal use only, and after we are sure that we have good notes, we will delete the recording. Are you OK with us recording the interview? *[If they assent, notetaker should hit record.]*

You can choose not to participate in the discussion and there will be no consequences if you choose not to participate. You can also choose not to answer a question if you wish. You will receive a \$75 gift card as a thanks for talking with us today.

Do you have questions about the information we just discussed?

Do you agree to participate in the interview today?

### Ground rules

We value the information you share with us. Before we get started, I would like to say that there are no right or wrong answers to the questions. We are interested in learning from your thoughts, opinions, and experiences. Just say exactly what you think, whether it's positive or negative. This will be an informal discussion.

Do you have any questions before we get started?

### Background

1. Can you tell me a little bit about yourself, like your age, race, and gender and sexual orientation, if you're comfortable sharing?
2. How did you refer to the relationship education program you participated in? Did it have a name?
3. When did you participate in the program? Are you still participating, or did the program end?

- a. Did you successfully complete the program, or did you leave before the program ended? If you left, can you tell us why?
4. Where did you participate in the program? (*Probes: physical location [e.g. a high school], city, state*)

**First impressions of the program**

5. Thinking back to before the program started, what were your first impressions of [*program name*]?
  - a. What did you hope to get out of participating in the program?
  - b. What concerns did you have about participating in the program?
  - c. What made you decide to participate? (*Probes: voluntary, parent enrolled, school opts in students*)
6. Did the program materials mention anything about the program being appropriate or inclusive for LGBTQ+ youth?

**Experiences in HMRE program**

Now I'd like to hear about what the program was like.

*Program content*

7. How were the experiences of LGBTQ+ people discussed in the program, if at all?
  - a. How did program materials, such as surveys, videos, or handouts, capture LGBTQ+ perspectives?
8. How well did you feel like the program addressed topics that were, or were not, relevant to you as a [*participant sexual and/or gender identity*]? What worked well? What didn't work well?
9. Were there other topics you wish the program had covered, such as topics related to LGBTQ+ youth or relationships? If so, please describe.

*Facilitators*

10. Who delivered the program? (*Probe: Facilitator from outside organization, classroom teacher, someone else*)
11. What did you like about the program facilitator? What did you dislike?
12. How knowledgeable did the facilitator(s) seem about LGBTQ+ people?
13. What else could the facilitator(s) have done to make the program more welcoming for LGBTQ+ youth?

*Peers & classroom environment*

14. How comfortable did you feel talking about your personal experiences during the program? (*Probe: Shared experiences/anecdotes, asked questions, did not share, did not disclose identity*)

15. Did you feel like other youth in the program were accepting and welcoming of your perspective? Why or why not?
16. Do you think it's better for programs to offer separate classes for LGBTQ+ youth, or to serve everyone in the same classes regardless of their sexual orientation and gender identity?
17. *For programs delivered in schools:* Do you feel the environment at your school is welcoming to LGBTQ+ students? Why or why not? How do you think this affected the program environment?

*Application of HMRE program content*

18. How do you feel the program has prepared you for future relationship experiences?
19. How have you used things you learned in [*program name*] in your life?

**Inclusivity of LGBTQ+ experiences in future HMRE programs**

20. Is there anything else that future programs could do to be more welcoming for young people with diverse genders and sexualities? (*Probes: specific lessons, facilitators, incorporating appropriate identity terms and language; partnering with LGBTQ+ friendly community organizations*)

**Final thoughts**

That concludes our questions for today. Is there anything else you would like to add or clarify?

Thank you again for sharing your experiences and taking time to answer our questions! Your insights will help others learn from your experiences. In appreciation for participating in this interview, we will be sending you an email with a \$75 gift card after the call. Is the email address we used to schedule this interview the correct email address for us to send the gift card? If not, what email address would you like us to use?

Thank you again.

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