From Learned Helplessness to Hope: A Case Study

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The *It Gets Better* movement - led by Dan Savage, an author, columnist, and a journalist - emerged in the United States in late 2010 as an attempt to bring the LGBTQ+ adolescents' suicide 'epidemic' taking place in the social media to an immediate halt. In this paper, I will briefly tell the story of the It Gets Better movement and their hope campaign as a response to the eleven teen suicides in the Fall of 2010. I will analyze Seligman's *learned helplessness* and *aversive stimuli* concepts (Maier & Seligman, 1976) in regard to the community in concern. I will question Snyder's (and group) Hope Theory in relation to the social negative conditions experienced by LGBTQ+ youth at that time and today. I believe that in order to understand these tragic fatalities of suicide, it is not enough to examine hope on the individual level. It should be linked into a broader context of family, community, and nation.

Therefore, I will examine other approaches that I find more suitable; I will look into Weingarten's *human Interconnectedness* views about hope and *'doing hope'*, as a key to understand the emergence of the It Gets Better movement and its role in mobilizing the LGBTQ+ community to help the young generation to vision hope, future, life. I will then discuss Dan Savage's action in posting a YouTube video - resembling Madigan's campaign letters and counter-viewing work with the narrative, as well as the positive outcomes of this 'intervention' in the context of *collective adversity*. My conclusion is that when some individuals with the same typical characteristics are in deep distress and are emotionally unavailable to 'think' hope, we need to look at *hope* and *hopelessness* in the *societal* context of adversity, as *intergenerational trauma*, and deliver hope also in this context, meaning the community should be there for them.

Background - Fall 2010 and *It Gets Better* Campaign in USA

By 2010 the internet became a web-based communication tool. Social media became a critical part of daily conversation. Individuals of all ages were able to connect with a multitude of other individuals that they could not meet by other means and offer thoughts on shared issues that were important to them. It has given rise to all sorts of opportunities. Unfortunately, mass-suicide was one of them. The horrible fall of 2010 is marked as a new low in the history of the LGBTQ+ community in the United States. It

seemed that every day there were new reports of a gay kid killing themselves due to intolerance and hostility.

Suicide 'Epidemic' as a Gender Identity Crisis

Researchers have found that attempted suicide rates and suicidal ideation among LGBTQ+ youth are significantly higher than among the general population ("Suicide among LGBT Youth" n.d) but no one really knows the exact rate of suicides among LGBTQ+ youth. Some of them may never have the chance to come out publicly and many of them keep their gender identity secret or hide it from their friends and families. The premise is that the suicide rates among this group are much higher than statistically shown. Why is this? What is the reason behind the suicide of LGBTQ+ youth?

> "That fall, as I thought about (the adolescents that committed suicide), I reflected on how frequently I'm invited to speak at colleges and universities. I address audiences of gay and straight students, and I frequently talk about homophobia and gay rights and tolerance. But I don't get invited to speak at high schools or middle schools, the places where homophobia does the most damage. Gay kids trapped in middle and high schools would benefit from hearing from LGBT adults — lives could be saved — but very few middle or high schools would ever invite gay adults to address their student bodies...It couldn't happen — schools would never invite gay adults to talk to kids; we would never get permission." (Savage & Miller, 2011)

The 'Intervention'

Savage (2010) and his husband, Terry Miller, created a YouTube video about their own experiences being bullied as teens with the goal of reaching out to teenagers who are struggling with their gender identities. In that video, they told about their past experiences of negative attitudes toward them in high school, the life of a young gay adult, their choice to live gay lifestyle, their romantic life, their marriage, and the adoption of their son D.J. This video was intended to reach out to bullied gay, lesbian, bisexual, and transgender people, particularly young people. It was an attempt to deliver a simple message about the future: It gets better.

> "I wanted to encourage other LGBT adults to make videos for LGBT kids and post them to YouTube. I wanted to call it: The It Gets Better Project. And I wanted us to make the first video together, to talk about our lives together, to share our joy." (Savage and Miller, 2011)

Seligman's Learned Helplessness

The origins of hope as a construct in research begin with the opposing ends of a spectrum: hopelessness and helplessness. The next description might be repulsive. Seligman and Maier were testing dogs' (and later - rats) reactions to electric shocks. In a series of experiments in late 1960, they placed dogs in a box, where one side's floor could be electrified and the other side not. They noticed that some of the dogs who previously experienced electric shocks were not attempting to jump over to the other side to rescue themselves. Even when presented with a potential option to avoid the negative aversive stimuli, they did not attempt to take it. They learned that struggle is useless.

Later on, Hiroto and Seligman (1975) investigated learned helplessness on human participants, exploring the difference between avoidable and unavoidable negative stimulus on participants' ability to complete cognitive exercises. The results were similar indicating that participants who experience the unavoidable negative stimulus demonstrate decreased ability to complete tasks. Hiroto and Seligman related the results to the perception of the subjects as being lack of control over the environment even when offered a method of relief from stimuli (Hiroto & Seligman, 1975). The fundamental concept of the Learned Helplessness Theory is that clinical depression or related mental illnesses may result from real or perceived absence of control over the outcome of the situation.

Could it be that these kids experience 'aversive stimuli'? How have they 'learned helplessness'? Taking into account the fact that these kids committed suicide *publicly* and, in a timing, close to one another, we need to look at the negative conditions and learned helplessness in a *societal* context.

On a nationwide level

On the nationwide level, stress due to discrimination of civil rights has a huge impact on the mental health state of an LGBTQ+ individual, no matter what their age is. The physical and mental health and well-being of the community's youth depend on the passage of laws with regard to civil rights. When there is a passage of laws with recognition of their equal rights, positive impacts on their well-being are shown. Conversely, when there is a passage of laws that discriminate against LGBTQ+, the negative impact resulted in is an increase in the use of drugs ("Suicide among LGBT". n.d.). A study of nationwide data from across the United States from January 1999 to December 2015 (Raifman, Moscoe, Austin, & McConnell 2017) revealed that the establishment of same-sex marriage is associated with a significant

reduction in the rate of attempted suicide among children, with the effect being concentrated among children of a minority of sexual orientation (LGBTQ+ youth). This resulted in approximately 134,000 fewer children attempting suicide each year in the United States.

On a community level

On a community level, being under threat due to bullying and cyber-bullying in school specifically regarding sexuality or gender anti-gay bullying can explain the deep despair of these kids. In 2019, LGBTQ+ teens still face serious problems in schools on a daily basis. Areas of concern include bullying and harassment, exclusion from school curricula and resources, restrictions on LGBT student groups, and other forms of discrimination and bigotry against students and staff based on sexual orientation and gender identity (Thoreson, 2016). Sometimes it is hidden in an *implicit* message from adults as well. In some instances, teachers may object to class discussions about gender topics or mock LGBTQ+ youth, or join the bullying. Political attacks on the civil rights of LGBTQ+ people can dramatically aggravate the atmosphere in school against the LGBTQ+ minority. In addition, because of the lack of policies that affirm this minority in school, these kids are vulnerable.

On a family level

On a family level, the lack of support from family and peers in accepting the gender/sexual identity and/or sexual orientation provides another explanation for the mental health obstacles young adults and teens face. Insecure attachment (Bowlby, 1969, 1973,1980) built up since infancy could influence patterns of relationship with a caregiver over time. It could be a hidden message that parents believe that their child's sexual orientation is 'a choice'. In addition, the reactions of parents to their children's disclosure can play an important factor in understanding the stressors on the youth's health; mourning and feelings of grief and loss of a parent regarding their child who just came out as gay, can attribute to the stressful event. Sometimes co-occurring stressors that are happening alongside the main issue at hand, such as divorce or mental illness in the family can aggravate the already stressful situation. The teen tends to regret the coming-out action, followed by depression due to feelings of shame and fears of rejection.

> "And the people gay teenagers need most — their own parents — often believe that they can somehow prevent their children from growing up to be gay — or from ever coming out — by depriving them of information, resources, support, and positive role models." (Savage & Miller, 2011)

On a personal level

On a personal level, internalized homophobia is very subtle at any age. It is based on the involuntary belief by the LGBTQ+ individual that the homophobic lies, negative stereotypes, and myths about them are true. Internalized homophobia has been defined as 'the gay person's direction of negative social attitudes toward the self, leading to a devaluation of the self and result in an internal conflict and poor self-regard.' (Meyer & Dean, 1998). In repressing their own sexual orientation and gender identity among their family and loved ones there is damage to their sense of self-worth. Feelings of shame, self-hate, self-blame, and self-disgust are inevitable and can surface at different times. In addition, the more LGBTQ+ youth push themselves or are pressured toward staying in or coming out, the more they'll have to struggle with potential traumatic symptoms.

Discussion - Seligman Aversive Stimuli - Is It Relevant?

Experiencing aversive stimuli in late 2010, these LGBTQ+ teens were significantly vulnerable in their social systems. Therefore, learned helplessness here should be examined in a broader spectrum, and as an indicator of *intergenerational trauma*.

Root (1992) suggests that racism and discrimination compound the impact of direct or personal trauma by allowing for the oppression of a community of peoples. This "insidious trauma" becomes normalized to the point that the group does not realize how social conditions continue to oppress them. Rather than focusing on a singular event that makes the individual feel unsafe, this insidious trauma leads to a view that the world is an unsafe place for a whole group of peoples (Root, 1992). Dutton (1998) adds that this "matrix of traumatic experiences… may shape the lived experience of a person within a given cultural group".

In late 2010, oppression, persecution, negative stereotypes, and isolation all contributed to the lack of sense of belonging and feelings of abandonment among the LGBTQ+ community. The young individuals were isolated from the community and the older generation was not able to support the young. Lack of emotional bonding between the young and the old in the LGBTQ+ community, the young generation grew up without a language to express their identities, no knowledge passed to them. No doubt the systemic conditions perpetuate and exacerbate the cycle of abuse.

> "Watching the suicide crisis unfold last fall, my husband and I decided that we weren't going to be shamed out of speaking to LGBT youth anymore. For a long time when an LGBT adult tried to

talk to a gay kid, we were accused of recruiting, of being pedophiles. There was a sort of learned

helplessness of the persecution of gay and lesbian children by gay and lesbian adults where we

felt like we couldn't address it, like we couldn't talk to them. And the idea behind the project

was for gay adults to talk to queer kids about our lives to give them hope for their futures."

(Savage and Miller, 2011)

In regard to hope in late 2010, living in a community oppressed by political and cultural forces, the suicides were a *manifestation* of this conflict. In other words, the unheard voices of the adolescents were the unheard voice of the entire LGBTQ+ community. By breaking the limitations and directing a message intended to reach the young of the community, there was a deep level of identity conflict within the individual and inside the community that came to a resolution. Someone had to break this pattern in order to create a change and bring hope for the young. In 2010, posting a video on social media resulted in a new way of communication, and providing support to members. Their action allowed a new voice, the voice of a more integrated community, a more consolidated identity.

Hope - Snyder's definition

In Snyder's group hope model (2002) there are three components: goals, pathways, and agency. Goals are the anchor of the theory as they provide direction and endpoint for hopeful thinking when they are valuable and uncertain. Pathway thoughts (waypower) refer to two things: (1) the routes we take to achieve our desired goals and (2) the individual's perceived ability to produce these routes. The third component is the agency thoughts (willpower), and refer to the motivation we have to undertake the routes toward our goals.

Discussion - Snyder's Group Hope Model - Is It Relevant?

Many of the LGBTQ+ youth in fall 2010 probably believed that goals (such as living gay's lifestyle, having romantic relationships, establishing a family, having kids) are unachievable, unrealizable, and impassable. These goals might have been set aside as they are perceived as nonviable.

In Snyder's model, motivation and determination through agency thoughts (willpower) are derived from within. In regard to the LGBTQ+ youth in 2010, it is clear that these adolescents experience daily rejection and abandonment. Seeing life as a flow and dynamic rather than static is a deep impression that requires life experience and comes later in life. When under ongoing social negative conditions youth could perceive the situation as static and apparently predictable. What if those kids do not have

the psychological resources or the personal independence to handle things themselves that they will have when they are older? What if they believe that this reality is not about to change in the future due to lack of life experience?

> "A bullied gay teenager who ends his life is saying that he can't picture a future with enough joy in it to compensate for the pain he's in now. Justin and Billy — and, as that terrible September ground on, Seth and Asher and Tyler and Raymond and Cody — couldn't see how their own lives might get better. " (Savage & Miller, 2011)

Snyder's concept provides only a narrow view of the concept and would not address situations when goals are perceived impossible to achieve and agency thoughts were scarcely developed under ongoing social negative conditions or when suicidal thoughts are apparent. In the next section, I will mention Weingarten's views about blocked pathways.

Examining Weingarten's Approach to Hope

Kaethe Weingarten, an essayist who writes about hope. As a three times cancer survivor, she draws her ideas from a personal experience. She describes her desperate need for hope while ill, as coming from an outer source. In her case, she discusses her own personal experience where her husband provided hope for her.

Weingarten critiques Snyder's perspective (2007). She believes that hope and despair are unevenly distributed in our lives. When people, groups, nations lack hope, others are witnesses. Weingarten talks about the action of 'doing hope'. In these cases, others may have to help us 'do hope'. "People who are discouraged can rarely summon the energy or creativity to see their goals clearly or imagine routes to them." (Weingarten, 2007). Situations perceived as hopeless engender confusion about the goals themselves. Moreover, despair is a conviction that nothing of what one wants is within reach. Weingarten's main contribution is in looking at hopelessness in the context of blocked pathways to goals.

> "Without gay role models to mentor and support them, without the examples our lives represent, they couldn't see how they might get from bullied gay teenager to safe and happy gay adult." (Savage & Miller, 2011)

It may call for different actions though. According to her, in this concept of *human-interrelatedness hope*, we each have a role in its manifestation. Our positions in relation to hope determine what we

must do; for those who are hopeless, the task is to resist the temptation to withdraw from others and to resist isolation. Conversely, those who witness despair must refuse indifference. That is, those who are hopeless and those who witness their despair have different tasks. The challenge is to make visible the different tasks that hope and hopelessness perform in lives and relationships.

Encouraging and supporting others to resist isolation is a way that we can do hope together. Weingarten believes "it is important to do, since hope confers so many advantages, for individuals and societies".

Only there was no way to reach out to the youth of the LGBTQ+ community at that time. 'Doing hope', Savage thought that if older gay people offered hope and encouragement to gay teens, the teens would realize that their lives were worth living. He was aware that "schools and churches certainly were not going to let us anywhere near their children. But in the age of the internet, we COULD reach out and there was nothing queasy teachers and intolerant parents could do to stop it."

> "I was riding a train to JFK Airport when it occurred to me that I was waiting for permission that I no longer needed. In the era of social media — in a world with YouTube and Twitter and Facebook — I could speak directly to LGBT kids right now. I didn't need permission from parents or an invitation from a school. I could look into a camera, share my story, and let LGBT kids know that it got better for me and it would get better for them too. I could give 'em hope." (Savage and Miller, 2011)

The Narrative Approach to Instilling Hope

The narrative approach in psychotherapy suggests that stories and the lives of the persons we see in therapy do not exist in a vacuum; they are instead viewed as under the influence of a powerfully shaping broader context. This is particularly right in the various dimensions of class, race, gender, sexual orientation, and ability. (Bjorøy, Madigan & Nylund, 2015).

Campaign Letters and Counter-Viewing Writing as Intervention

Building upon the therapeutic letter-writing tradition of Michael White and David Epston (1990), Madigan (2007) developed this practice into writing 'campaign letters'. The idea is to create a community of concern around the patient with the potential to break the connection to despairing views of the person suffering and allow for the anticipation of hope to emerge. These therapeutic letters help to make us see the world in different ways as one and at the same time with the hope that preferred change occurs. The client's community stands in support of the person and on the firm belief

that change for their loved one is possible. This is an opportunity to envision a future where the problem story is in the background or the past. The letter offers a preferred imagination and future possibilities.

> "Suddenly gay, lesbian, bisexual, and transgender adults all over the country — all over the world-- were speaking to LGBT youth. We weren't waiting for anyone's permission anymore. We found our voices. And LGBT adults who made videos for the project weren't just talking at LGBT youth. The kids who watched videos sent emails, via YouTube, to the adults posting them. Thousands of LGBT adults who thought they were just going to contribute a video found themselves talking with LGBT youth, offering them not just hope but advice, insight, and something too many LGBT youth lack: the ear of a supportive adult who understands what they're going through." (Savage and Miller, 2011)

Moreover, into this practice, Madigan added *counter-viewing letter writing* (2007). Creating letter-writing campaigns through communities of concern is a means to counter-balance the problem-saturated story and dominant memory of despair and failure (Madigan and Epston, 1995). The task of the counter-viewer is to challenge the old structures and melt away helplessness/hopelessness thinking. When a person - who 'had been there' and shared similar experiences - stands and tells a counter-viewing story, it breaks the thinking pattern, it is empowering and giving permission to see the future, to believe, set goals, live. The counter-viewing writing technique is designed to assist the individual to be re-membered back towards membership systems of love and support from which the problem had dis-membered them in the first place.

The Outcomes

In the internet era of 2010, videos were certainly replacing the traditional letters and have even more empowering effect. In the first "It Gets Better" Youtube video directed to the LGBTQ+ teens, Savage and Miller described the experiences each of them had been bullied in school, and the many opportunities that opened up for them after high school, offering not just hope, but for advice and insight from adults who had been in their situation.

For the LGBTQ+ adolescents of late 2010, those videos were a way to start taking a critical position of their own narrative and oppose it. It is from respecting the place in which a person stands in the moment of therapeutic encounter and at the same time it counter-balances the problem-saturated story. In terms of clinical work, Savage's YouTube letter-video was surely an 'intervention'.

In the clinic, the narrative therapist promotes a process of separating the individual from 'fixed' and deficit conclusions/descriptions about their identity. The main idea in narrative therapy is that identity is fluid, dynamic, and contextual (Madigan, 2011). In Savage's words:

> "By giving ourselves permission to speak directly to LGBT youth, Terry and I gave permission to all LGBT adults everywhere to speak to LGBT youth. It forced straight people — politicians, teachers, preachers, and parents — to decide whose side they were on. Were they going to come to the defense of bullied LGBT teenagers? Or were they going to remain silent and, by so doing, give aid and comfort to the young anti-gay bullies who attack LGBT children in schools and the adult anti-gay bullies at conservative "family" organizations who attack LGBT people for a living?"

Conclusion

In this paper, I looked into the It Gets Better movement and its instilling of hope among LGBTQ+ youth in 2010. Hope and despair co-exist in our space. However, in dealing with adversity, hope is a hard task to invoke from within ourselves; In doing hope we want to be aware of similar cases where helplessness and aversive stimuli are visible, look at it as intergenerational trauma, and intervene in a more holistic view addressing both the individual and the community.

The narrative approach is based on the idea that the stories people live by are not a mirror of a person's life but are actually shaping of people's real experiences. The spontaneous intervention of a campaign video containing a counter-viewing narrative telling about a current or future fulfilling life as opposed to past negative life experiences can deliver a message of hope.

As for Snyder's *hope* concept, more research is needed to develop a model for cases when learned helplessness is visible.

Indeed the It Gets Better movement shook systems; familial, religious, political, legislative, medical, educational, and mental health. Yet, in 2019 as the suicide rates remain high and continue to grow, taking the lives of kids, hope is urgently and desperately sought in this field of gender diversity.

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Reference

Bjorøy, A., Madigan, S., & Nylund, D. (2015). Narrative Therapy. The Beginner's Guide to Counselling & Psychotherapy, 335. Retrieved from: http://therapeuticconversations.com/wp-content/uploads/2010/07/The-practice-of-therape utic-letter-writing-in-narrative-therapy.pdf

Bowlby J. (1969). Attachment and Loss: Volume I. Attachment. NY: Basic Books.

Bowlby J. (1973). Attachment and Loss: Volume II. Separation: Anxiety and Anger. NY: Basic Books.

Bowlby J. (1980). Attachment and Loss: Volume III: Loss: Sadness and Depression. NY: Basic Books.

Dutton, M. (1998). Cultural issues in trauma treatment. Centering, 3 (2), 1-2. Retrieved from: http://www.drchriscourtois.com/images/article_cultural_issues.pdf

Hiroto, D. S., & Seligman, M. E. P. (1975). Generality of learned helplessness in man. Journal of Personality and Social Psychology, 31, 311-327.

Maier, S. F., & Seligman, M. E. (1976). Learned helplessness: theory and evidence. Journal of experimental psychology: general, 105(1), 3.

Meyer, I. H., & Dean, L. (1998). Internalized homophobia, intimacy, and sexual behavior among gay and bisexual men. Psychological perspectives on lesbian and gay issues, 4, 160-186.

Madigan, S. (2007). Anticipating hope within written and naming domains of despair. In: C., Flaskas, I., McCarthy, & J. Sheehan, (Eds.). Hope and despair in narrative and family therapy: Adversity, forgiveness and reconciliation. Pp. 100-112. Routledge. Retrieved from: http://tasnimnoor.com/Portals/0/Leisure/Hope%20and%20Despair%20in%20Narr ative%20and%20Family%20Therapy.pdf

Madigan, S. (2011) Narrative Therapy: Theory and Practice. Chicago, IL: The American Psychological Association (211 pages).

Menzies, P. (2010). Intergenerational trauma from a mental health perspective. Native Social Work Journal. (7) 63-85. Toronto, Ontario. Retrieved from: https://zone.biblio.laurentian.ca/bitstream/10219/384/1/NSWJ-V7-art3-p63-85.PD F

Raifman, J., Moscoe, E., Austin, S. B., & McConnell, M. (2017). Difference-in-Differences Analysis of the Association Between State Same-Sex Marriage Policies and Adolescent Suicide Attempts. JAMA pediatrics, 171(4), 350–356. doi:10.1001/jamapediatrics.2016.4529

Root, M. (1992). Reconstructing the impact of trauma on personality. In Brown, L. & Ballou, M. (Eds.), Personality and psycho-pathology: Feministreprisals. New York: The Guilford Press.

Savage, D. [It Gets Better Project]. (2010, September 21). It gets better: Dan and Terry. [Video file]. Retrieved from http://www.youtube.com/watch?v=7IcVyvg2Qlo

Savage, D., & Miller, T. (2011, March 23). Dan Savage: For Gay Teens, Life 'Gets Better' [Interview by T. Gross]. In NPR News. Fresh Air. Retrieved from https://www.npr.org/2011/03/23/134628750/dan-savage-for-gay-teens-life-gets-better

Seligman, M. E. (1972). Learned helplessness. Annual review of medicine, 23(1), 407-412.

Snyder, C. R., Rand, K. L., & Sigmon, D. R. (2002). Hope theory. Handbook of positive psychology, 257-276.

Suicide among LGBT Youth. (n.d.) In Wikipedia. Retrieved from: https://en.wikipedia.org/wiki/Suicide_among_LGBT_youth

Thoreson, R. (December 7, 2016). Like Walking Through a Hailstorm - Discrimination against LGBT Youth in USA. Human Rights Watch. Retrieved from: https://www.hrw.org/report/2016/12/07/walking-through-hailstorm/discrimination-against-lgbt-youth-us-schools

Weingarten, K. (2007). Hope in a time of global despair. In: C., Flaskas, I., McCarthy, & J. Sheehan, (Eds.). Hope and despair in narrative and family therapy: Adversity, forgiveness and reconciliation. Pp. 13-23. Routledge. Retrieved from: http://tasnimnoor.com/Portals/0/Leisure/Hope%20and%20Despair%20in%20Narrative%20and%20Family%20Therapy.pdf

White, M., White, M. K., Wijaya, M., & Epston, D. (1990). Narrative means to therapeutic ends. WW Norton & Company.