
CREATING SAFER SPACES FOR LGBTQ YOUTH:

A Toolkit for Education, Healthcare,
and Community-Based Organizations



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A letter from Shabre West

Youth Activist, YouthResource Leadership Program,¹ Advocates for Youth

Dear Readers,

My name is Shabre West and I use she/her pronouns. I am a part of YouthResource Leadership Program, a program of Advocates for Youth dedicated to advocating for LGBTQ health and rights on college campuses, in our communities, and at the state and federal level. I think it's important for LGBTQ youth, and particularly youth of color, to access safer and affirming spaces, because as a Black lesbian I believe LGBTQ youth who look like me should be supported and valued no matter what! LGBTQ youth should be able to exist in their truth. The purpose of this Toolkit is to support youth-serving professionals, educators, and clinicians in ensuring that LGBTQ youth, especially youth of color, are affirmed and validated in their organizations.

Growing up, messages I heard about sexuality included "You are going to go to hell if you are gay." I also heard, "It's just a phase and you probably will go back straight." I remember when I first came out as a lesbian and being masculine presenting my grandmother said, "Why can't you be gay and be a girly girl?" I received messages that there were only two genders, male and female, and only much later did I learn that some folks may identify as neither male nor female gender identity. Unfortunately, I didn't have the ability to explore my sexuality or gender identity the way I wanted. I think it is important to have our gender identities and sexual identities affirmed by adults, especially youth-serving professionals in our lives, because it is crucial to our health and well-being.

This toolkit is extended to LGBTQ youth-serving professionals in education, healthcare, and nonprofit organizations. It is everyone's role to understand how racism, sexism, transphobia, and homophobia negatively affect young people. We know from years of research that these harmful practices have serious consequences for LGBTQ youth, including high rates of morbidity, mortality, mental health challenges, and suicidal ideation as a result of violence, prejudice, and discrimination. The goal of this Toolkit is to create a safer and more welcoming environment for LGBTQ youth by directly addressing homophobia and transphobia among staff and young people. Several studies² have indicated that, when creating safer spaces, we must also tackle racism, since "LGBTQ youth of color experience LGBTQ-related stressors (LGBTQ-related violence, family rejection, discrimination), as well as racial-ethnic minority stressors (race-related discrimination, community violence) and overrepresentation in low-income families and low opportunity neighborhoods."

LGBTQ youth of color are powerful when we feel comfortable in our own skin, are able to be visible as LGBTQ as a way to express a sense of pride in our identities, and are not forced to conform to stereotypical gender roles. LGBTQ youth have the right to live free from oppression, the right to education, the right to prevention, the right to treatment and care and the right to live without criminalization, discrimination and stigma. Period.

Thank you for taking the time to do what's needed to safeguard LGBTQ youth.

Best,
Shabre

ACKNOWLEDGEMENTS

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1.0 OVERVIEW

"I believe that telling our stories, first to ourselves and then to one another and the world, is a revolutionary act."

-Janet Mock³



1.1 BACKGROUND

Lesbian, gay, bisexual, transgender, and queer or questioning (LGBTQ) youth generally receive poor quality of care, authentic support, and education due to stigma, lack of youth-serving professionals' awareness, and insensitivity to the unique needs of this community. Moreso, LGBTQ youth of color (YOC) are at disproportionate risk for negative sexual health outcomes and face stigma related to race, ethnicity, sexual orientation, gender identity, and expression. This stigma and discrimination places LGBTQ youth at higher risk for contracting STIs and HIV, mental health issues, and poverty. A survey, which identified health disparities faced by LGBTQ youth of color in Boston, found that they struggle to access lifesaving resources.²

Participants were asked to report the frequency with which they experienced five specific types of everyday discrimination during the prior 12 months, such as being treated with less courtesy or respect or being treated as if they were not as smart as others. About a third (32.5 percent) of participants reported experiencing five or more types of everyday discrimination and only 11.8 percent reported no experience of everyday discrimination in the prior 12 months. In addition, many (52.6 percent) youth reported current receipt of public benefits/governmental assistance, including MassHealth insurance, food stamps (SNAP), public housing, Section 8 or rent vouchers, or Supplemental Security Income (SSI).

To better meet the needs of all young people, we must integrate awareness of racism and the understanding of how culture shapes sexual attitudes, values, and beliefs. We must also be willing to redress homophobia and transphobia within Black and Brown communities and create safer spaces for LGBTQ young people of color.

1.2 PURPOSE

This Toolkit has been developed to assist individuals, community-based organizations, providers, healthcare staff, educators, and others that see the value of incorporating key safer space components into their organizations so that young people survive and thrive. Recommendations serve as a guide and should be tailored to each individual young person and organizational setting.

Safer Spaces can be defined as “the environmental product of a conscious set of decisions and actions taken by individuals to promote equality, fairness, non-violence, and affirmation of the unconditional value of all peoples, where youth are free to grow, thrive, and express their individual identities.”⁴

Furthermore, this Toolkit highlights challenges faced by LGBTQ youth, offers insight on how they thrive, and enhances the awareness among healthcare staff, educators, and additional youth-serving professionals about the existing disparities in order to provide more comprehensive, competent, evidence-based care and support to this community.

Healthcare, education, and community-based organizations vary in capacity, size, and demographics. This Toolkit does not embrace a one-size-fits-all approach. Instead, it provides actionable advice on implementing practices, programs, and policies that affirm LGBTQ young people. It is important to recognize that organizations are also often at different places in their evolution toward acknowledging the need to intentionally serve and uplift LGBTQ young people and in their efforts to take action to do so.

This Toolkit was created through the lens of our **Queer and Gender Equity Project (QGEP)** which launched 10+ years ago. The QGEP provides support to organizations seeking to enhance their support for LGBTQ youth, especially young people of color, via education, policy, research, professional training, and technical assistance.

2.0 “SHOW ME THE RECEIPTS:” YOUNG PEOPLE, GENDER, and SEXUALITY

“We need educators, parents, and healthcare providers to catch up with science and provide LGTBQ youth and youth of color the positive, affirming support we deserve. We cannot let young people be left behind as casualties of our progress.”

-Jamanii Brown, Youth Activist⁵

Some organizations and programs are intentional about serving LGBTQ youth. However, many youth-serving programs in the United States—including educational, health care, youth development, sports, recreational, and employment programs, among others—ignore, overlook, or reject the presence of LGBTQ youth among those they serve. This section includes key terms, research on LGBTQ youth and the need for safer spaces, and in-depth interviews from LGBTQ youth on their experiences in education, healthcare, and community-based organizations.

At Advocates for Youth, we approach our work with young people from a firm belief that every young person is of great value, irrespective of race, ethnicity, health status, socio-economic background, sexual orientation, or gender identity.

Now more than ever LGBTQ young people, especially youth of color, need:

- shame-free, medically accurate, culturally responsive, and LGBTQ-inclusive comprehensive sexuality education and information
- independent and confidential access to the full range of sexual and reproductive health services
- organizations and communities that provide safe and supportive environments and equitable distribution of opportunities and resources
- intersectional policies that fully address the diversity of their backgrounds, identities, and experiences and center the most marginalized young people
- a society that views sexuality as normal and healthy and treats young people as valuable partners.

2.1 KEY TERMS^{6,7}

Terminology and language to describe experiences and identities are fluid, and identity terms mean different things to different people. This glossary of terms aims to serve as a guide and resource. Every definition does not and will not perfectly describe every individual's experience with an identity.

Assigned sex at birth (ASAB) the sex (male or female) assigned a child at birth, based on the child's external genitalia. Also referred to as birth sex, or natal sex.

Biological sex how someone identifies their sex and it is reflected on regulatory (read: oppressive) documents; a person's biological sex or sex can may be the same as ASAB or different from ASAB. Biological sex and sex can change, but ASAB is a moment in time that does not change. One can change their birth certificate, etc., but what gets changed is biological sex or sex, not ASAB.

Cisgender a person whose gender identity is congruent with (or "matches") the sex they were assigned at birth. (i.e., a person who is not transgender).

Coming out the process by which one accepts and/or comes to identify one's own sexual orientation or gender identity (to "come out" to oneself). Also the process by which one shares one's sexual orientation or gender identity with others (to "come out" to friends, etc.).

Gender binary the idea that gender is strictly an either/or option of male/men/masculine or female/woman/feminine based on sex assigned at birth, rather than a continuum or spectrum of gender identities and expressions.

Gender conforming a person whose gender expression is perceived as being consistent with cultural norms expected for that gender. According to these norms, boys/men are or should be masculine, and girls/women are or should be feminine. Not all cisgender people are gender conforming and not all transgender people are gender non-conforming.

Gender dysphoria the formal diagnosis in the American Psychiatric Association's Diagnostic and Statistical Manual, Fifth Edition (DSM 5), used by psychologists and physicians to indicate that a person meets the diagnostic criteria to engage in medical transition. In other words, the medical diagnosis for being transgender. This diagnosis does not apply to all transgender people and should not be used generally to refer to being of transgender experience.

Gender expression a person's outward gender presentation, usually comprised of personal style, clothing, hairstyle, makeup, jewelry, vocal inflection and body language. Gender expression is typically categorized as masculine or feminine, less commonly as androgynous. Gender expression can be congruent with a person's gender identity, but it can also be incongruent if, for instance, a person does not feel safe or supported, or does not have the resources needed to engage in gender expression that authentically reflects their gender identity..

Gender fluid describes a person whose gender identity is not fixed. A person who is gender fluid may always feel like a mix of the two traditional genders, many genders, or may feel more one gender some days, and another gender other days.

Gender identity a person's internal sense of being a man/male, woman/female, both, neither, or another gender.

Gender non-binary a continuum or spectrum of gender identities and expressions, often based on the rejection of the gender binary's assumption that gender is strictly an either/or option of male/men/masculine or female/woman/feminine based on sex assigned at birth.

Gender non-conforming a person whose gender expression is perceived as being inconsistent with cultural norms expected for that gender. Specifically, boys/men are not masculine enough or are feminine, while girls/women are not feminine enough or are masculine. Not all transgender people are gender non-conforming, and not all gender non-conforming people identify as transgender. Cisgender people may also be gender non-conforming. Gender non-conformity is often inaccurately associated with sexual orientation.

Genderqueer a person whose gender identity is neither male nor female, is between or beyond genders, or is some combination of genders. Other terms for people whose gender identity falls outside the gender binary include gender variant, gender expansive, etc.

Medical transition a long-term series of medical interventions that utilizes hormonal treatments and/or surgical interventions to change a person's body to be more congruent with their gender identity. Medical transition is the approved medical treatment for gender dysphoria.

Questioning a person who is exploring or questioning their sexual orientation, gender identity, or expression. Some may later identify as transgender or gender non-conforming, while others may not. Can also refer to someone who is questioning or exploring their sexual orientation.

Queer an umbrella term used by some to describe people who think of their sexual orientation or gender identity as outside of societal norms. Some people view the term queer as more fluid and inclusive than traditional categories for sexual orientation and gender identity. Due to its history as a derogatory term, the term queer is not embraced or used by all members of the LGBTQ community.






Sexual orientation a person's feelings of attraction (emotional, psychological, physical, and/or sexual) towards other people. A person may be attracted to people of the same sex, to those of another sex, to those of all sexes, or without reference to sex or gender.

Social transition a transgender person's process of creating a life that is congruent with their gender identity, which often includes asking others to use a name, pronoun, or gender that is more congruent with their gender identity. It may also involve a person changing their gender expression to match their gender identity.

Transgender an adjective used to describe a person whose gender identity is incongruent with (or does not "match") the sex they were assigned at birth. "Transgender" serves as an umbrella term to refer to the full range and diversity of identities within transgender communities. It is currently the most widely used and recognized term to refer to people of transgender experience.

2.2 WHY ARE SAFER SPACES NECESSARY? QUICK FACTS

This toolkit defines Safer Spaces as “the environmental product of a conscious set of decisions and actions taken by individuals to promote equality, fairness, non-violence, and affirmation of the unconditional value of all peoples, where youth are free to grow, thrive, and express their individual identities.” Organizations that do not appear as inclusive or those that are not working toward creating safer spaces, through programs, policies, and practices, may unknowingly be promoting the silence and lack of engagement among LGBTQ young people. The section includes statistics on the need for safer spaces.

Transgender Teens Need Safe & Supportive Schools		
Transgender Students in School	Transgender Students Face Health Risks	Safe and Supportive Schools Can Help
<p>Almost 2% of high school students identify as transgender</p> 	 <p>27% feel unsafe at or going to or from school</p>  <p>35% are bullied at school</p>  <p>35% attempt suicide</p>	<ul style="list-style-type: none"> • Create and enforce anti-bullying policies • Identify and train supportive school staff 

Data from Johns, M. M. et al. 2019⁹

- LGBTQ youth experience disparate rates of mental health issues like anxiety, depression, and suicide compared to their non-LGBTQ+ peers.⁹ Actively affirming their identities is a vital part of addressing these disparities and supporting LGBTQ+ youth in thriving.
- **Only nine states** require that sex education be inclusive of LGBTQ+ young people.¹⁰
- Five states restrict or prohibit the discussion of LGBTQ issues in the classrooms.¹¹ These anti-LGBTQ curriculum laws are referred to as “no promo homo” laws, because they reflect the false idea that inclusive curriculum “promotes” being gay. What’s worse, **several states require** that sex educators discuss LGBTQ+ people negatively or not at all.¹² Recently, a South Carolina law that prohibits discussion of LGBTQ issues in public school sex education classes was declared unconstitutional and therefore overturned by a judge.¹³ LGBTQ youth deserve **inclusive sex education**.

- Laws in many states make it difficult for young people under age 18 to access pre-exposure prophylaxis (PrEP), a daily pill proven to prevent the contraction of HIV, without parental or guardian consent.¹⁴
- Between 2012 and 2016, new diagnoses among Latinx YMSM increased by 17 percent and new diagnoses among Black YMSM increased by nine percent.¹⁵
- LGBTQ+ students of color who experience both racist and homophobic victimization already **report** disparate levels of depression, a lack of belonging at school, and skipping school days due to feeling unsafe.¹⁶
- LGBTQ youth who underwent **conversion therapy** were more than twice as likely to report having attempted suicide and more than 2.5 times as likely to report multiple suicide attempts in the past year compared to those who did not.¹⁷ These findings add empirical data to support the professional consensus that sexual orientation and gender identity conversion efforts are inappropriate and harmful.
- Bisexual girls, regardless of whether they reported bisexual identity or attractions or sexual behavior with [two or more] genders, **reported** feeling less connected to family and school.¹⁸
- Homelessness is the greatest predictor of involvement with the **juvenile justice system**. And since LGBTQ youth compose 40 percent of the homeless youth population, they are at an increased risk of incarceration.¹⁹

2.3 THE IMPACT OF SAFER SPACES: QUICK FACTS

Although no space can be guaranteed to be safe, everyone has a role in ensuring that the health and rights of all young people are considered and honored. While this toolkit includes statistics about LGBTQ youth and their health that can be depressing, it is also important to highlight protective factors—the characteristics, conditions, and behaviors that directly improve positive health outcomes or reduce the effects of stressful life events and other risk factors.^{20,21,22} Protective factors include self-esteem, social support at home, positive friendships, and positive school climates. Sexual identity, defined as how an individual self-identifies and or/publicly identifies in regards to sexuality and sexual orientation, is also a protective factor. Examples of sexual identity development, also known as “coming-out process,” include “the individual coming to accept a GLB identity, resolving internalized homophobia by transforming negative attitudes into positive attitudes, feeling comfortable with the idea that others may know about the unfolding identity, and disclosing that identity to others.”²³

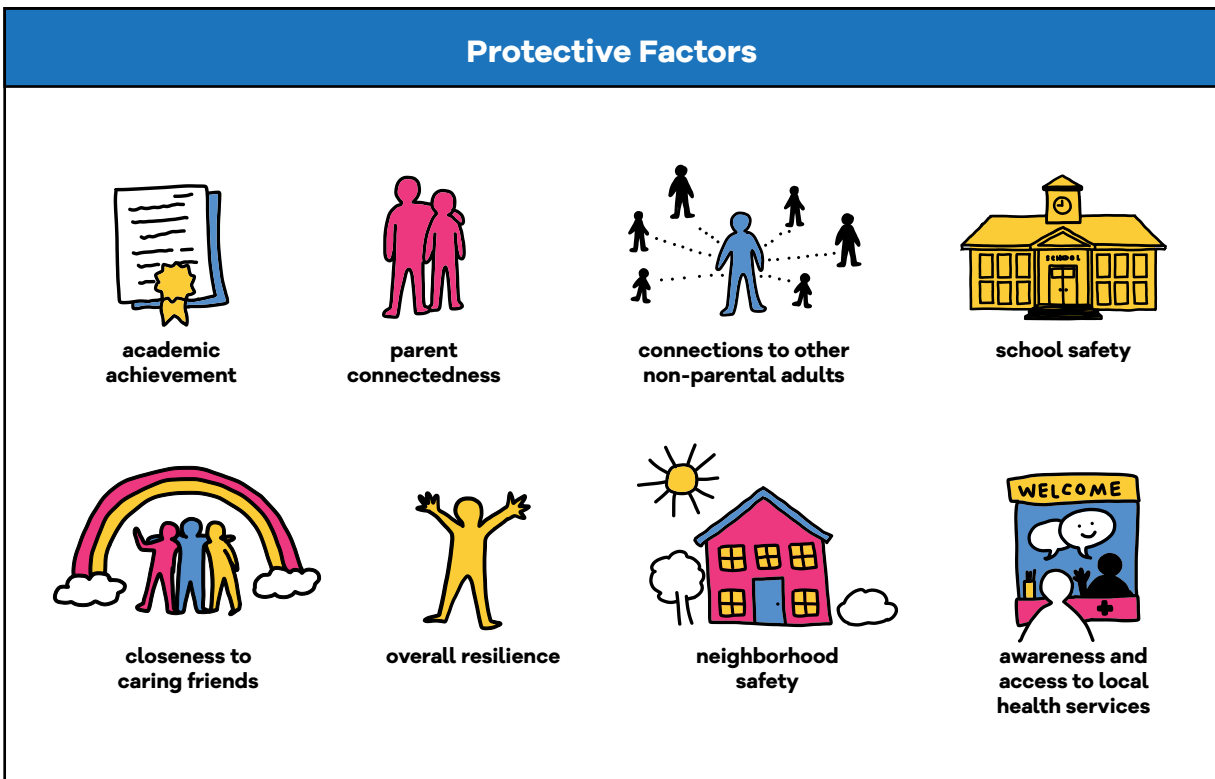


Image adapted from Healthy Families

When implemented, as a process, not an end point, safer spaces have a tremendous impact on all young people, including LGBTQ youth. This section includes statistics that illustrate the impact of safer spaces.

- Transgender youth of color **reported** recognizing and defining their racial/ethnic and gender identities on their own terms as a source of empowerment and pride.²⁴
- Transgender college students **reported** that support and acceptance by family improved their mental health and contributed to a positive sense of self; the types of support that were perceived as positive were asking questions to understand transgender experience and assisting with/affirming participants' transition.²⁵
- Students of teachers that **reported** that their school had more supportive practices had a lower tendency of experiencing homophobic bullying. Supportive practices included adequate counseling, effective confidential support and referral services for students needing support because of substance abuse, violence, or other [challenges], an emphasis on socio-emotional learning, an environment that fostered youth development, resilience, or asset promotion, and provided conflict resolution or behavior management instruction."²⁶
- The presence of Gender and Sexuality Alliances **decreased** the prevalence of hostile school experiences for LGBTQ youth.²⁷
- Supportive school staff is **associated** with lower levels of hostile school experiences for LGBTQ youth.²⁷
- Students in school districts with LGB/LGBT inclusive policies (enumerated sexual orientation and/or gender identity/expression) had **lower** rates of victimization based upon their sexual orientation and gender identity/expression.²⁸
- Students **perceived** their schools as safer for gender nonconforming male peers in schools that included LGBTQ issues in the curriculum and had a GSA.²⁹

2.4 SELF, SOCIAL AND STRUCTURAL STIGMA

“The real radical is that person who has a vision of equality and is willing to do those things that will bring reality closer to that vision.”

- Bayard Rustin, Civil Rights Activist³⁰

LGBTQ youth can experience stigma and discrimination (S&D) on multiple internal and external layers. This section defines and highlights ways that S&D show up internally, socially, and structurally.

Herek (2007) defines LGBTQ/sexual stigma as, “the negative regard, inferior status, and relative powerlessness that society collectively accords to any nonheterosexual behavior, identity, relationship, or community.”³¹ **Internalized stigma** happens when a person consciously or unconsciously accepts the negative ideas and stereotypes others have about LGBTQ people and starts to apply them to themselves. LGBTQ internalized stigma can lead LGBTQ young people to feel shame, isolation, and despair. LGBTQ youth often experience stigma related to their sexual orientation, gender identity, or both. There are multiple layers of LGBTQ stigma including self, social, and structural. Each of these layers can negatively affect the health and well-being of LGBTQ young people.

LGBTQ youth also experience **social stigma**. This occurs when there are negative attitudes and beliefs about a person based on perceived social characteristics that distinguish them from others in society. Social stigmas are commonly related to culture, gender identity, sexual orientation, or HIV status. LGBTQ young people may feel social stigma because of their sexual orientation or gender identity, or both, and may develop behaviors to hide their identities. They may withhold disclosing their LGBTQ identity out of fear of being stigmatized.

In addition, LGBTQ youth experience **structural stigma**. This is experienced when there is an absence of laws that protect LGBTQ youth and/or young people living with HIV from discrimination, such as losing employment or being denied health services due to one’s gender or sexual identity.

An aspect of creating safer spaces for LGBTQ young people is acknowledging and addressing social and structural stigma both in the space you are cultivating and the spaces LGBTQ youth frequent. Also, it is critical to provide a space that promotes affirmation as well as a space where LGBTQ youth feel safe enough to examine internal stigma.

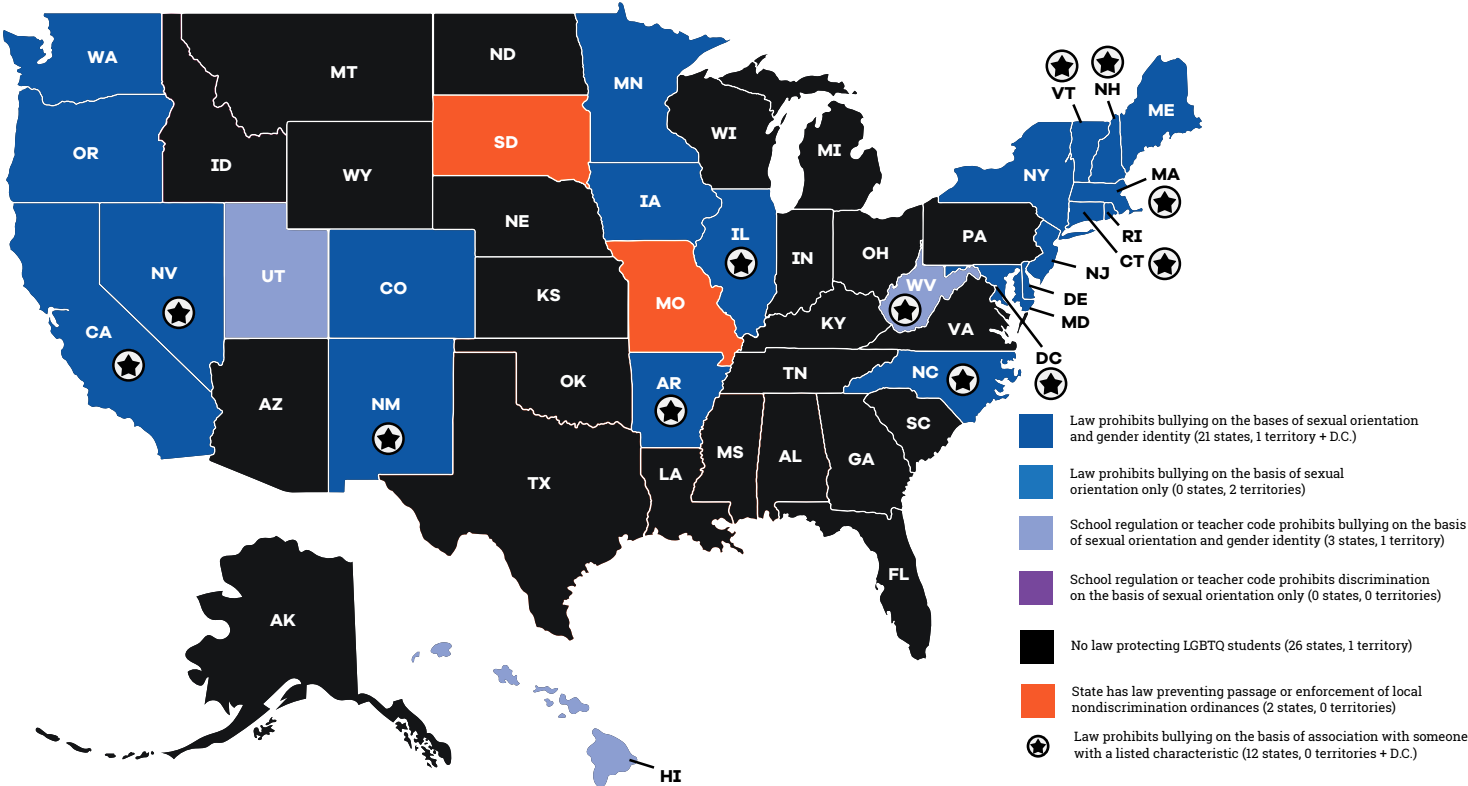
Whether stigma is internally, socially, or structurally regulated, it impacts LGBTQ young people’s abilities to access services, resources, and support that allows them to thrive.

2.5 MAPPING IT OUT: LOCATING LGBTQ YOUTH

Adapted from the Movement Advancement Project, the maps below provide quick and easy summaries of laws that affect LGBTQ young people in the U.S. on a state-by-state basis.

Anti-bullying Laws

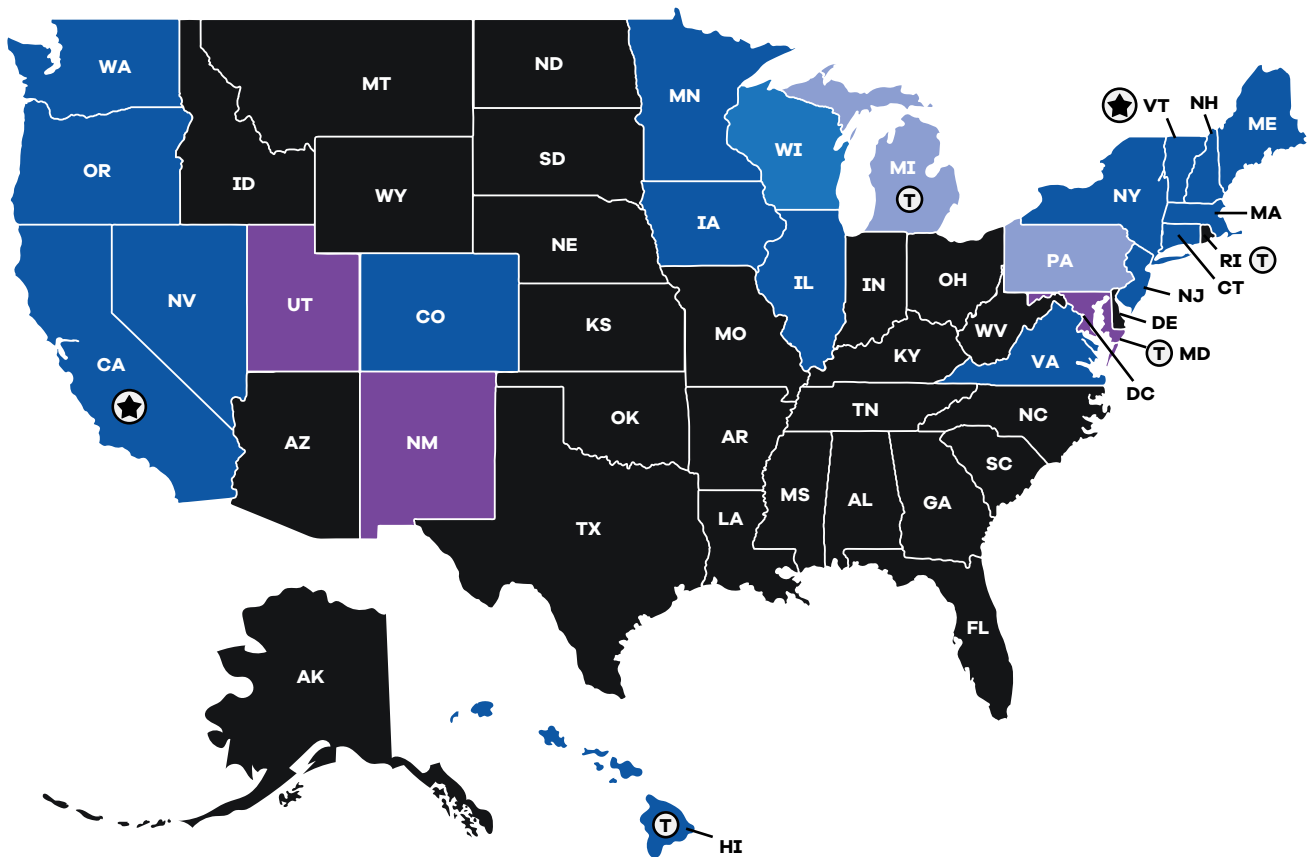
“Anti-bullying laws protect LGBTQ students from bullying by other students, teachers, and school staff on the basis of their sexual orientation and/or gender identity. This map shows state anti-bullying laws that explicitly enumerate sexual orientation and/or gender identity as protected characteristics, as well as states that explicitly interpret existing prohibitions against sex discrimination to include discrimination based on sexual orientation or gender identity. In some states, school regulation or teacher code prohibits bullying on the basis of sexual orientation and/or gender identity. These states are only reflected on this map if these are the only available protections in the state.”³²



Adapted, with permission, from the Movement Advancement Project’s Equality Maps

School Nondiscrimination Laws

“School nondiscrimination laws protect LGBTQ students from discrimination in school, including being unfairly denied access to facilities, sports teams, or clubs on the basis of their sexual orientation or gender identity. This map shows state school nondiscrimination laws that explicitly enumerate sexual orientation and/or gender identity as protected characteristics, as well as states that explicitly interpret existing prohibitions against sex discrimination to include discrimination based on sexual orientation or gender identity. In some states, school regulation or teacher code prohibits discrimination on the basis of sexual orientation and/or gender identity. These states are only reflected on this map if these are the only available protections in the state.”³²

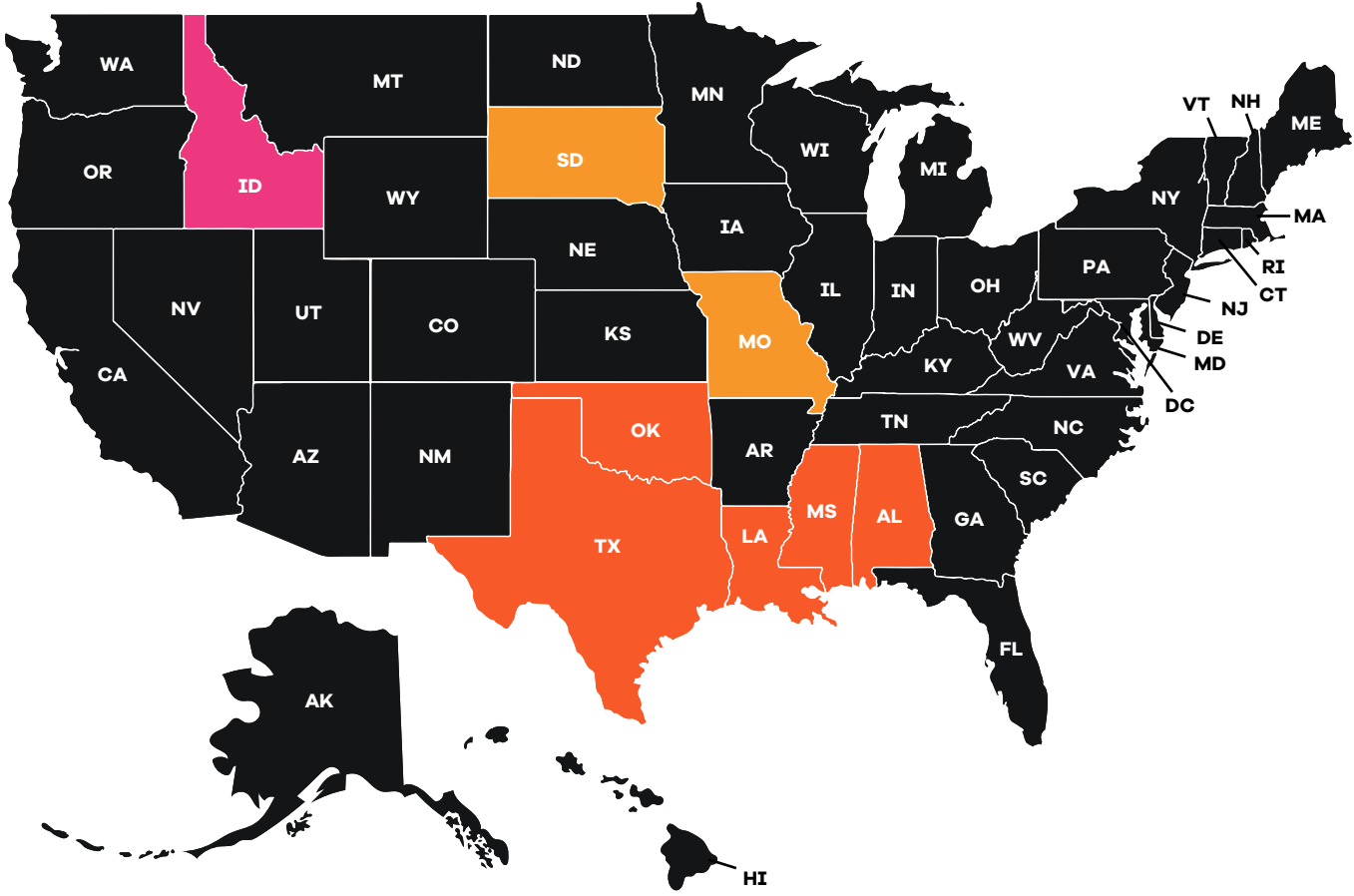


- Law prohibits discrimination in schools on the bases of sexual orientation and gender identity (17 states, 1 territory + D.C.)
- Law prohibits discrimination in schools on the basis of sexual orientation only (1 state, 0 territories)
- State explicitly interprets existing prohibition on sex discrimination to include sexual orientation and/or gender identity (2 states, 0 territories)
- School regulation or teacher code prohibits discrimination on the basis of sexual orientation and/or gender identity (2 states, 1 territory)
- No law protecting LGBTQ students (29 states, 3 territories)
- State has law preventing schools or districts from adding LGBTQ protections to nondiscrimination policies (2 states, 0 territories)
- T State agency issued explicit guidelines for transgender inclusion in school facilities (4 states, 1 territory)
- ★ Law prohibits discrimination in schools on the basis of association with someone with a listed characteristic (2 states, 0 territories)

Adapted, with permission, from the Movement Advancement Project's Equality Maps

Anti-LGBTQ School Laws

“Anti-LGBTQ school laws come in many forms. This map shows (1) “Don’t Say Gay” policies, which restrict teachers and staff from even talking about LGBTQ issues and people, (2) state laws that prevent schools or districts from adding sexual orientation and/or gender identity to their school’s anti-bullying and anti-discrimination policies, and (3) state laws that prevent transgender students from participating in sports according to their gender identity.”³²

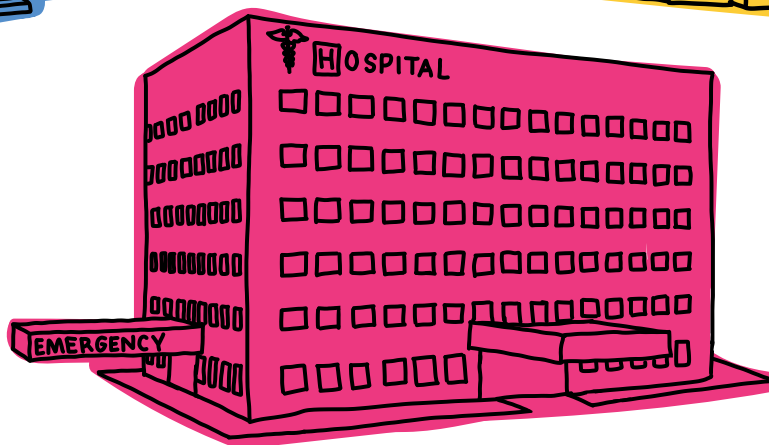
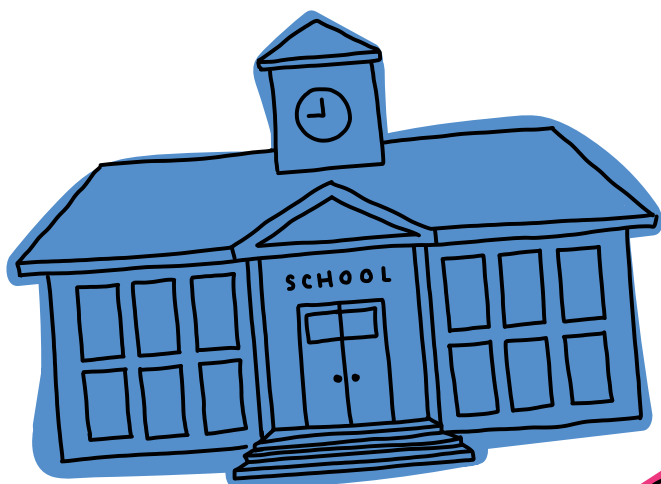


- State has “Don’t Say Gay” regulation (5 states, 0 territories)
- State has law preventing schools or districts from adding LGBTQ protections to anti-bullying and nondiscrimination policies (2 states, 0 territories)
- State has law preventing transgender students from participating in sports consistent with their gender identity (1 state, 0 territories)
- No anti-LGBTQ school law or regulation (42 states, 5 territories + D.C.)

Adapted, with permission, from the Movement Advancement Project’s Equality Maps

2.6 REJECTING STIGMA & DISCRIMINATION: ORGANIZATIONS AS A BRIDGE

Due to stigma and discrimination, LGBTQ young people, especially youth of color, experience a variety of health, mental health, and social challenges such as eating disorders, school difficulties, sexual health disparities, homelessness, violence, and suicide.^{33,34,35,36} This section outlines how LGBTQ youth of color navigate these disparities and ways that organizations can increase their support. Key interviews were conducted with LGBTQ youth activists of color.



Educational Organizations

"I think it's safe to say that many people don't come in contact with positive and constructive education around their sexualities. That was definitely the case for me, and my being queer made it all the more unlikely that I would receive that education. I think that it is a constant goal for me to try to undo the years of shame built up inside me; and to do the same for my peers."

- Daniel Nava Cabral (he/him), Youth Activist

Sexual orientation, gender identity, race, and ethnicity all have an impact on how LGBTQ youth navigate educational organizations. While some experiences have been more supportive than others, there is so much more work to do to ensure that they access an education free of harassment and discrimination. As there are continued attacks on transgender young people's access to bathrooms and participation in sports, many school climates demonstrate an urgent need for safer spaces.

Every other year, GLSEN conducts a survey to assess LGBTQ youth experiences in schools. **The 2019 National School Climate Survey** continued tracking the endemic problem of name-calling, harassment, and violence directed at LGBTQ youth. The most recent survey illustrated that progress on safe schools for LGBTQ youth has slowed for the first time in years. The survey found that:³⁷

- An overwhelming majority (98.8 percent) heard "gay" used in a negative way at school; 75.6 percent heard these remarks often or frequently, and close to 92 percent reported that they felt distressed because of this language.
- Most LGBTQ students reported avoiding school functions (77.6 percent) and extracurricular activities (71.8 percent) because they felt unsafe or uncomfortable.
- Most LGBTQ students (59.1 percent) reported experiencing LGBTQ-related discriminatory policies or practices at school.

Educational organizations also fail LGBTQ students by not offering inclusive curricular resources, including **sex education**. The 2019 GLSEN survey found that:

- Only 19.4 percent of LGBTQ students were taught positive representations about LGBTQ people, history, or events in their schools; 17 percent had been taught negative content about LGBTQ topics.
- Only 8.2 percent of students reported receiving LGBTQ-inclusive sex education.
- 48.9 percent of students reported that they could find information about LGBTQ-related issues in their school library.
- About half of students (49.2 percent) with internet access at school reported being able to access LGBTQ-related information online via school computers.

These alarming statistics continue to remind us that LGBTQ students continue to be deprived of equal educational opportunities in schools across the nation. LGBTQ students deserve fairness and equality at school. Through an abundance of research, we are continuously informed that LGBTQ youth are resilient and thrive when schools affirm and support them.^{38,39,40}

Gender and Sexuality Alliances (GSAs)

Gender and Sexuality Alliances (GSAs), formerly called Gay-Straight Alliances, are student-run organizations that bring together LGBTQ, cisgender, and straight youth to build community and organize for safer and supportive environments at school and in their communities. The GSA Network notes that “GSAs have evolved beyond their traditional role to serve as safe spaces for LGBTQ+ youth in middle schools and high schools, and have emerged as vehicles for deep social change related to racial, gender, and educational justice.”⁴¹

Research continues to illustrate that the presence of a GSA has a positive and lasting effect on student health, wellness, and academic performance.⁴² It can also protect students from harassment based on sexual orientation or gender identity, and improve school climates for all students in the long term.⁴³ To understand the need for GSAs, Tyunique, a youth activist based in Philadelphia, Pennsylvania, was interviewed. When hearing directly from young people, especially Black and Brown youth that are leading change in their communities, we can reaffirm our commitment to supporting the voices and experiences of all young people.

Tyunique Nelson (they/them/theirs) is a 22 year-old nonbinary Black queer young person. They are a member of Advocates’ YouthResource Leadership Program (YouthResource) and Free the Pill. They support LGBTQ youth of color in their ability to thrive.

What drew you to starting a GSA?

Tyunique: “After having negative experiences with counselors and some teachers, I knew that LGBTQ youth in my school needed a space to not only be themselves, but work towards positive change within the school and larger community. To be honest, I initially did not know what a GSA was, I just had a teacher that was a great ally who told me about GSAs and how I could create a space for LGBTQ youth.

First, it started out as a LGBTQ student support group, which included activities and opportunities for students to socialize. Next, when people felt more comfortable we moved on to educating teachers and staff about how they could better support LGBTQ students. I learned that teachers and staff already had professional development so I thought that this topic perfectly aligned with their work. In addition, I had already been conducting sensitivity and competency trainings with a Philadelphia-based nonprofit.

I truly saw that starting a GSA was a great opportunity to support my peers that were going through additional challenges and barriers beyond their LGBTQ status.”

Describe some ways that GSAs better support LGBTQ youth.

Tyunique: “I think that GSAs are a first step in shifting the culture around respecting and supporting LGBTQ youth. GSAs are both a safe space and a brave space. They give young people a safe space to explore and self determine their identities, while also providing opportunities for young people to be brave and tackle the issues that LGBTQ youth face.

A GSA can be anything the members of the group see fit. It can be an art club, a social support club, a space to share new music from LGBTQ artists, a social justice organizing space - whatever your group decides!

For me, our GSA opened up a whole new world of LGBTQ identities. Before joining I thought that lesbian, gay, bisexual, and trans people were the entire community. After joining I learned that LGBTQ identities are truly limitless. I learned about intersex people and non binary people and the differences between sex and gender. I learned what all of the different flags meant. Being in the group helped me have a better understanding of my community. It also helped me see the beauty and diversity in our community that I didn't know existed.

Looking back, I would consider our members my first chosen family members. GSA was a place where we could all be ourselves and support one another.

In addition to GSAs, how can educational organizations better support LGBTQ youth?

Tyunique: “Educational organizations can include LGBTQ curricula, hire LGBTQ educators, adopt policies that support trans and queer young people’s positive experiences in schools, and show their support for LGBTQ young people even before a homophobic or transphobic incident appears in their learning environment.

In order for educational organizations to better support LGBTQ youth, a systematic shift must occur. Educational organizations must do all that they can to support the livelihood of LGBTQ young people at every turn. This includes adopting a variety of policies such as non-discrimination policies, inclusive bathrooms/locker room policies, non-gendered dress code policies, policies around using a young person’s correct name and pronouns, and any other barriers that young people say they are facing.⁴⁴ It is imperative that LGBTQ youth are included in discussions around policy change. Young people are already empowered and well aware of the issues they face daily and it is your job as an accomplice to make sure that young people are brought to the table to share their own stories and express their own needs.

In addition, organizations should reexamine their zero tolerance policies, which further criminalize students, especially youth of color. These policies, in addition to the presence of police and security guards, have been shown to increase anxiety and advance/amplify the school-to-prison pipeline. The American Civil Liberties Union (ACLU) defines the school-to-prison pipeline as “a disturbing national trend wherein children are funneled out of public schools and into the juvenile and criminal justice systems.”⁴⁵ These policies and practices include overuse of harsh school disciplinary procedures including suspension, seclusion, restraint, and expulsion; increased policing and surveillance that create prison-like environments in schools; referrals to law enforcement and the juvenile justice system, and an alienating and punitive high-stakes testing-driven academic environment that diverts students from the intended purpose of the public education system and deposits them in the correctional system. It has

continuously been shown to disproportionately impact youth of color, including LGBTQ youth.”

Earlier you mentioned the term accomplice, could you tell me what that means to you?

Tyunique: “Do your part to educate yourself on LGBTQ experiences and supporting LGBTQ youth on your own. You can practice using gender neutral pronouns, learn more LGBTQ identities outside of the acronym, and learn more about current LGBTQ celebrities and pop culture all on your own. This way, every interaction that a LGBTQ person has with you doesn’t have to turn into a teachable moment.

Do some internal work and explore your own relationship to your own sexuality and the gender binary. The binary imposes gender norms on all of us - not just trans and non-binary people. Think critically about how you have been impacted by the binary and you may be more equipped to better support young people coming into their identity. Our world is constantly shifting, so it is important to know that continued, intentional work needs to be done in order to show up effectively.”

How can schools digitally support LGBTQ youth?

Tyunique: “Schools can digitally support LGBTQ youth by making sure that they are showing support for those with LGBTQ identities whenever possible. Many young people may be stuck inside with people, including roommates and family members, that do not affirm their identity, so this is an opportunity to take some time to check in with a young person that you know may not have a homelife that affirms their LGBTQ identity. Make sure that you are still including LGBTQ people as part of your distant/virtual curricula. If you hear a student make a transphobic comment on a video chat or phone call, take a moment to redirect them.

There are lots of organizations posting supportive messaging and programming for LGBTQ young people; make some time to do some intentional research on digital communities for LGBTQ youth that already exist. After you find them, share them with folks who are already out to you.

Continue to prioritize GSA meetings during this time. Some people may need this space more than we know right now. Even if one young person shows up to the space, it's crucial to still host the meeting and continue to advertise widely."

What services can schools offer to better support LGBTQ youth?

Tyunique: "All youth, in addition to LGBTQ youth, need access to school counselors/social workers, opportunities for creative expression, curricula that they can see themselves represented in, and quality sex ed.

Young people need and deserve schools to support not only their academic growth, but their social and emotional well-being. With access to an environment that supports their identities and pushes them to become creative, emotionally sound individuals, they will be on track to thrive in their adult lives. I wish I had learned more about personal finances and having healthy, autonomous interactions when I was in school. I wish I understood that life after K-12 was less about the need to apply the academics I learned and more about having positive interactions with my community.

Quality sex education includes information about sex, sexuality, relationships, contraception and condoms, and how to protect yourself and plan your future. Sex education programs need to be informed by evidence as well as include all the information and skills young people need to make healthy decisions. Providing young people with the skills and tools to make healthy decisions about sex and relationships is far more effective than denying them information and simply telling them not to have sex.

Schools need to continually evaluate their relationship with the LGBTQ youth attending their institution. One professional development training a year is unacceptable. Learning to be a better ally is a lifelong process. Schools need to dedicate time and funds to supporting LGBTQ young people as often as possible. Too often, I meet people that ultimately mean well, but are not willing to commit to an actual plan for change."

This interview mirrors the recent work of several academics detailing the need for GSAs at K-12 schools, colleges, and universities.⁴⁶

Interested in learning more about schools and GSA's? Check out the [GSA Network](#).

Historically Black Colleges and Universities (HBCUs)

Established after the Civil War and before 1964, Historically Black Colleges and Universities (HBCUs) were designed to ensure that Black students felt safe and supported through strategic student development, curriculum, and extracurricular activities.⁴⁷ HBCUs, which were founded by Civil Rights leaders and changemakers, provide Black students of similar backgrounds and cultural experiences an opportunity to thrive. LGBTQ scholars have often illustrated that upon attending HBCUs, LGBTQ students are met with predominantly religious and conservative environments, rigid gender role ideology, and a "fervor with which racial identity is celebrated and emphasized above all other identities."⁴⁸ LGBTQ students and supportive adults have continuously tackled LGBTQ rights at HBCUs.⁴⁹ Recent wins include North Carolina A&T State University's Lesbian, Gay, Bisexual, Transgender, Queer & Ally (LGBTQA) Resource Center opening, Florida Agricultural and Mechanical University's (FAMU) Pride & HBCU LGBTQ+ Student Summit, and the University of the District of Columbia's (UDC) implementation of gender-neutral restrooms. Nevertheless, there is always more work that can be done to ensure that LGBTQ young people thrive. To understand LGBTQ youth experiences at HBCUs, Black LGBTQ students were interviewed.

Ebony Owens (she/her) is a 21 year-old cisgender Black asexual woman from Bloomington, Minnesota. She is a member of Advocates' YouthResource Leadership Program (YouthResource) and attends Clark Atlanta University in Atlanta, Georgia.

Jermay Gray (he/him/his) is a 20 year-old cisgender Black gay male from Jacksonville, Mississippi. He is a member of Advocates' YouthResource and attends Dillard University in New Orleans, Louisiana.

What drew you to attend an HBCU?

Ebony: "After attending a predominantly white high school and dealing with a lot of racism and microaggressions, I wanted to attend an HBCU and be surrounded by more Black people. My school, based in Atlanta, Georgia, also provided me with a full ride. I heard so many good things about Atlanta. I had heard of it being called a "Black Hollywood." It drew me to attend a university in a city known for and full of Blackness."

Germany: "My HBCU, based in New Orleans, Louisiana, provided me with a full ride and it was also an opportunity to attend college out of state. New Orleans, a city known for not only Blackness, but LGBTQ Pride, also drew me to attend the University. Growing up in Jackson, Mississippi, there is a lot of Black representation, but not so much LGBTQ representation, and I wanted to experience both."

How can HBCUs better support LGBTQ youth?

Ebony: "HBCUs can provide affirming curricula, for instance, books and videos that highlight key LGBTQ figures. They can also hire, support, and retain LGBTQ professors. Annual LGBTQ cultural competency training, for the whole campus, can also help deter homophobic and transphobic remarks. An LGBTQ resource center might also be helpful."

Germany: "I agree that resources such as LGBTQ-inclusive syllabi, which recognize more Black LGBTQ people, are helpful. Black LGBTQ people are everywhere and it sometimes feels like there isn't an acknowledgment or effort to be inclusive in most or all organizations. I recently saw an HBCU recognize Pride Month via a post on social media. Digital and physical actions such as these recognize the fact that people at our school are in fact part of that community. It's small ways like a social media post that can make Black LGBTQ students see themselves and feel validated."

What sexual health services or programs can your HBCU offer to better support LGBTQ youth?

Germany: "Health center staff can increase their capacity to have conversations around LGBTQ sex. Conversations are still very heteronormative and lack the inclusion of basic LGBTQ 101, with a particular focus on sex and sexuality. In addition, I've been doing a lot of work to ensure students have access to pre-exposure prophylaxis (PrEP). AIDSvu reports that in 2018 people aged 13-24, in Louisiana, made up only 11.8 percent of total users taking PrEP.⁵⁰ While still working toward this goal, a few common barriers as to why PrEP couldn't be offered on-campus include 1) the lack of funding and 2) misconceptions that by offering the services students would engage in "reckless sex." As studies have shown, these arguments mirror former arguments and misconceptions about birth control access. Young people know that these misconceptions are invalid and further stigmatize us. We deserve access to comprehensive sexual health services. The issue I encountered personally was more in regards to having the manpower (we only have one main nurse that provides care for the most part) to provide PrEP and to maintain the things associated with it (follow-up appointments, etc.) I think there was also a concern about the training required to prescribe PrEP."

Ebony: "At my HBCU, PrEP isn't easily accessible and many students do not know what it is. AIDSvu reports that in 2018 people aged 13-24, in Georgia, made up only 11.8 percent of total users taking PrEP.⁵¹ Plan B is also difficult to access on campus and I have had several peers that attempted to access services and were met with shame by health center staff. There is no reason to hide or hoard crucial resources that young people, especially Black LGBTQ youth, need and deserve. Young people deserve competent health center staff that are willing to offer key services without stigma and discrimination."

These interviews mirror the recent work of several academics detailing the need for HBCUs to continue to support LGBTQ students.^{52,53} Interested in learning more about HBCU's and LGBTQ inclusion?

Check out the Human Rights Campaign's HBCU Project.

Healthcare Organizations

"LGBTQ affirming healthcare, especially for young people, is often few and far between. Lack of access to affirming and accepting healthcare providers has the potential to negatively affect patient/doctor relationships. When LGBTQ youth don't feel safe to discuss their bodies and health in hospital and clinical environments that are free of stigma and judgment, it ultimately puts them at risk for health disparities that other communities don't have to face."

- Mariah Rivera, Youth Activist

Based on sexual orientation, gender identity, race, and ethnicity, LGBTQ youth navigate healthcare organizations in a variety of ways. While some experiences have been more supportive than others, there is so much more work to do to ensure that they access healthcare services free of harassment and discrimination. With continued attacks on transgender young people's access to **gender-affirming services** and **care**, health care professionals and organizations must boldly support, affirm, and provide critical care for LGBTQ youth to manage and maintain their health.

When someone is shamed or denied health care, they seek out other providers – or stop pursuing care altogether. **Research** from the Center for American Progress finds that 18 percent of LGBTQ people believe that if they were refused care at a hospital, it would be "very difficult" or "not possible" to find an alternative provider. Outside of major metropolitan areas, that number spikes to 41 percent.⁵⁴ A recent **report** on anti-LGBTQ discrimination by Human Rights Watch noted that many LGBTQ people in the U.S. are unable to find services in their area, encounter discrimination or refusals of service in healthcare settings, or delay care because of concerns of mistreatment.⁵⁵

In addition to these reports, anti-transgender state **policies** and **federal proposed rules** continue to remind us that LGBTQ young people, especially transgender youth of color, continue to be deprived of equal healthcare opportunities. LGBTQ young people deserve fairness and equality at healthcare organizations. Through an abundance of research, we are continuously informed that LGBTQ youth are resilient and thrive when healthcare organizations affirm and support them.

Mariah Rivera (she/her, they/them) is a 23 year-old white Puerto Rican queer youth activist from West Palm Beach, Florida. She is an alumni of Advocates' YouthResource Leadership Program and continues to support young people's access to safer spaces in Florida.

Are you out to your provider? If so, what was coming out like? If not, discuss why you might not be.

Mariah: "When I was insured and consistently saw doctors, I was not out. My providers were nice people, but the trust was never there. The paperwork never provided a space to disclose gender identity/ sexuality, I believe had those fields been added I would have felt more inclined to share more with my providers. I would have felt safe."

What are some of your experiences when navigating healthcare services?

Mariah: "Navigating healthcare has been really rough for me. Starting when I was young and having my pediatrician recommend my first diet that eventually led to a long history of yoyo dieting. Having the same pediatrician ignore blatant signs of my learning disability for years until I eventually left his care. To most recently trying to navigate public services in an effort to get the medication I need but can't access due to not having insurance."

What draws you to continue to engage in and seek out healthcare services?

Mariah: "Honestly, access to quality healthcare should not be a marker of social class, the act of seeking healthcare should not come with the fear of financial insecurity. Also, the fact that everyone deserves quality healthcare that is both free of judgment and affirming."

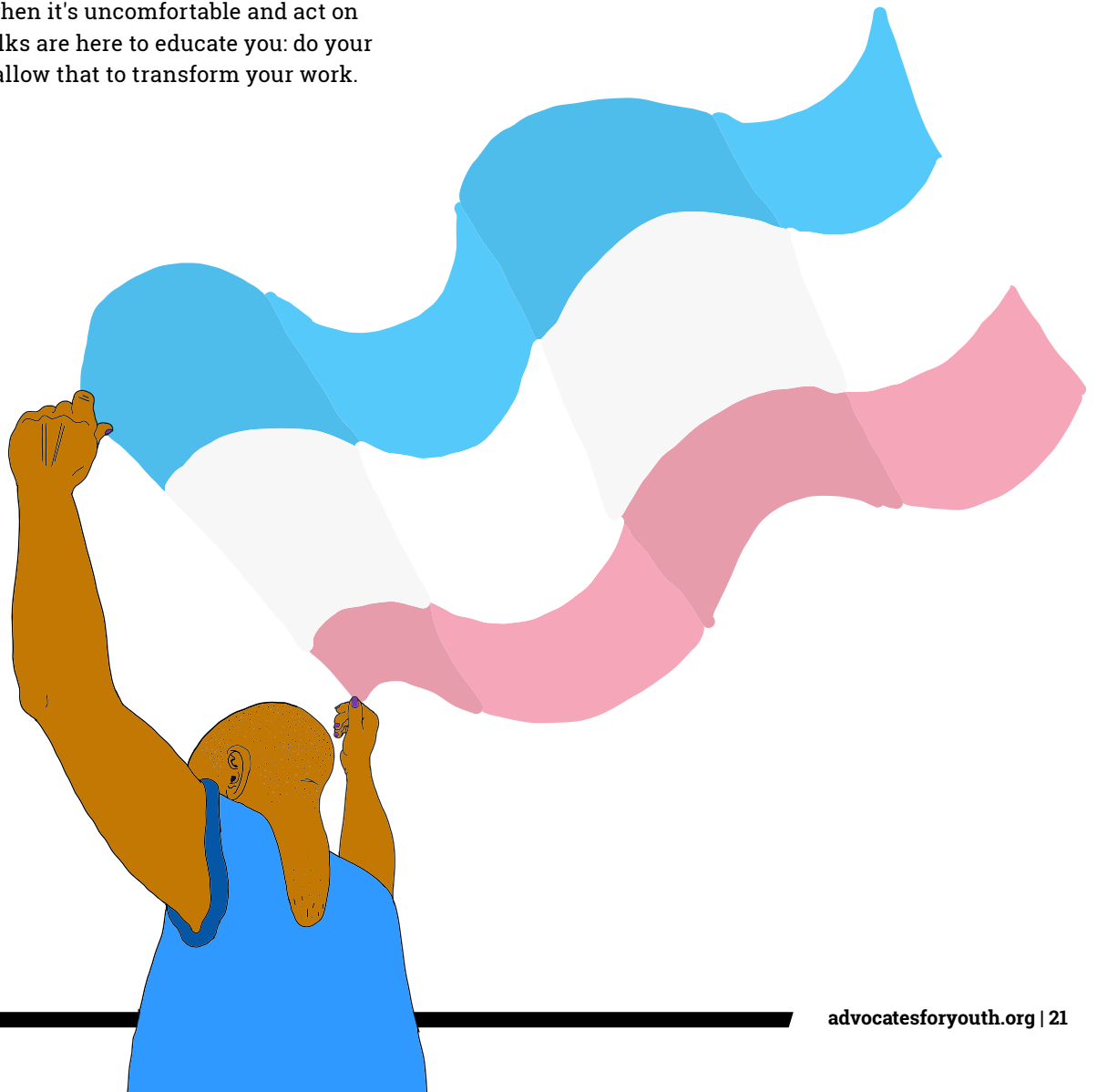
How can healthcare organizations better support LGBTQ youth?

Mariah: "By listening to LGBTQ youth, no one understands our existence and daily life more than us! Learn to leave the preconceived notions at the door and actively address any biases within yourself without exposing them to your patients. Become an active member of your local LGBTQ community center (financially) and don't stop there. Listen to the community even when it's uncomfortable and act on it. Not all LGBTQ folks are here to educate you: do your own research and allow that to transform your work."

Put an option for gender identity and pronouns on forms, ask about sexual orientation. Comfort your LGBTQ youth patients by asking guardians to leave when asking questions about gender and sexuality; by doing that you are prioritizing patient safety and respecting patient confidentiality. Acknowledge LGBTQ folks in your office decor. Normalize our existence within your walls. Not for clout, but to better enhance your doctor/patient relationships."

How can healthcare organizations support LGBTQ youth digitally?

Mariah: "Normalizing pronouns. By having the provider share theirs would be helpful as well as symbols (LGBTQ rainbows, provider wearing a rainbow pin)! It would have made a big difference for me personally."



Nonprofit and Community-Based organizations

"It is never too late for community members to support LGBTQ youth of color, especially youth living with HIV, by putting forth the effort to advocate alongside youth for inclusive comprehensive sex education. Community members can also educate themselves and loved ones on HIV and the impact of stigma. In addition, community members can support youth-led efforts that address sexual health disparities. I feel that young people need to know that they are seen and supported in order to thrive and feel safe in their everyday communities."

- Lisa Watkins, Youth Activist

Based on sexual orientation, gender identity, race, and ethnicity, LGBTQ youth navigate nonprofit and community-based organizations in a variety of ways. While some experiences have been more supportive than others, there is so much more work to do to ensure that they access nonprofit programs and resources free of harassment and discrimination.

Dionte Gill (he/him and she/her) is a 21-year-old Black gender nonbinary activist from Philadelphia, Pennsylvania. He is a member of Advocates' YouthResource Leadership Program (YouthResource) and participates in a variety of nonprofit programs in Philadelphia, Pennsylvania.

Maxine Spencer (she/her) is a 23-year-old Black transgender woman from Memphis, Tennessee. She is a member of Advocates' YouthResource and works at Oasis Center, Inc. in Nashville, Tennessee.

What drew you to attend a youth program hosted by a nonprofit?

Dionte: "I started participating in nonprofit programs after modeling in a fashion show hosted by the Public Health Management Corporation (PHMC)'s Community Approaches to Reducing Sexually Transmitted Diseases (CARs) program. PHMC is a nonprofit public health institute that builds healthier communities through partnerships with government foundations, businesses, and community-based organizations. PHMC was funded by CDC to implement the CARS project. The CARS project works to increase and sustain partnerships that improve the quality of local STD services and promote health equity. One of the first events hosted by the CARs project was a fashion show. I had the opportunity to be one of the models. After this experience, I participated in other programming opportunities that were heavily sexual health related. Through this experience, I was connected to other queer-focused programs. This was important because I was one of the few queer people part of the CARS program."

What drew you to work at a nonprofit organization after college?

Maxine: "When I was a college student, I can remember a time when Just Us, my current employer, conducted a presentation at my campus's annual Drag Show. Just Us, based in Nashville, Tennessee, is a program at Oasis Center dedicated to helping lesbian, gay, bisexual, transgender, and questioning youth to achieve their full potential. The Drag Show has continued to provide funding for Just Us. It has come to the point that I was once in the audience attending the Drag Show and hearing presentations about LGBTQ youth programs, and I am now conducting the presentations."

I wanted to work at an LGBTQ youth-centered non-profit because it is a unique opportunity. I get the chance to hear from the young people about the difference that the programs have made in their lives. I also have the opportunity and the freedom to create programming. I now have the opportunity to build programs that I was never offered, and ensure that they are sustainable. This includes LGBTQ-inclusive work at high schools and supporting LGBTQ+ young adults, especially college students."

How can nonprofits and community-based organizations (CBOs) better support LGBTQ youth?

Dionte: "By offering resources and making them comfortable for young people to obtain. For instance, if a young person walks into an institution and does not see anyone that looks like them, the young person may not feel comfortable using those resources. These resources include access to condoms and contraceptives, clothing, links to people that are hiring young people, etc."

Maxine: "Nonprofits and CBOs can better support LGBTQ youth through changing policies and continuously analyzing procedures and programs to ensure that they are inclusive. For example, before the founding of my organization, there was a lot of research and reviews done to ensure that the office was open and affirming. This included looking at policies such as registration, bathrooms, etc. This included also looking at the physical environment of the organization."

My role includes consistently re-examining and reevaluating policies and programs to ensure that they are up to date, LGBTQ inclusive and youth friendly. It has been helpful to directly ask young people about how they feel about organization policies, procedures, and their impact on them. We have a youth advisory board that supports our policy and procedure review. They are currently reviewing our intake forms to ensure that they are modernized and inclusive."

How can nonprofits and CBOs better support LGBTQ youth digitally?

Dionte: "A strong social media presence is definitely a way to connect with young people. The social media pages and websites should include LGBTQ-inclusive and young-friendly resources that are not hard to get to or hidden within a bunch of links. Personally, I know when I am introduced to a new organization or nonprofit, I really take into account Instagram pages and the number of followers. This shows how many young people are engaged and riding behind and in support of that organization."

Maxine: "Organizations can use their established relationships with young people to ask directly what they want. This allows the organization to provide whatever they are asking for, especially program wise. Around March during the onset of COVID-19, one of my coworkers had asked a youth group what does support for them look like. The young people provided him with a few ideas and supported him in utilizing a digital application that he now conducts programming with them on."

What services can nonprofit or community-based organizations offer to better support LGBTQ youth?

Dionte: "Nonprofits can provide youth drop-in hours physically or virtually. Living in Philadelphia, there are not that many queer-specific or safe drop-ins throughout the city. Most of them are downtown, which creates an access barrier for many young people. Not a lot of drop-ins provide transportation funding or other incentives to retain engagement."

Maxine: "It would be a dream to have medical experts facilitate groups for young people to have conversations about physical and mental health. Everything is somewhat muddy due to the Gateway Bill, which bans medically accurate sexual health conversations and information in schools. Due to these conversations being banned in school, a lot of groups fear backlash even if they were to occur outside of school settings. The climate, due to this stigmatizing bill, remains conservative so it is difficult to organize around this issue. To navigate this, nonprofits can still have medical experts on staff to make recommendations and referrals to external services."

The interviews conducted illustrate a great need for organizations to support LGBTQ youth of color, as well as tangible ways to support these young people. The next section summarizes many of the findings and highlights policies and practices that your organization can implement.

2.7 INTERVIEW WRAP-UPS: 7 THINGS TO CONSIDER WHEN CREATING SAFER SPACES

7 THINGS TO CONSIDER WHEN CREATING SAFER SPACES

1. Include LGBTQ curricula, hire LGBTQ educators, and adopt policies that support trans and queer young peoples positive experiences
2. Participate in LGBTQ-related trainings often
3. Incorporate LGBTQ youth-inclusive resources, images, and posts on social media channels
4. Normalize the usage of pronouns
5. Provide youth drop-in hours physically and/or virtually
6. Changing policies and continuously analyze procedures and programs to ensure that they are inclusive
7. If possible, recruit culturally competent and LGBTQ-inclusive medical experts to facilitate groups for LGBTQ young people to have conversations about physical and mental health

3.0 GET TO WERK: CREATING A SAFER SPACE

“As a result of our work with the Queer and Gender Equity Project, we are creating a team of LGBTQ+ champions in school-based health centers with the goal to have a team member from each discipline join and spearhead future training, resource updates, and support.”

-Suzy Lewis (she/her), Denver Health School-Based Health Center

LGBTQ youth need and deserve support to survive in the face of family rejection and school harassment, against heightened rates of COVID-19, HIV, STI, suicide, and violence victimization, and against racial, cultural, and socio-economic prejudice. Even more, they should be able to thrive as valued members of their communities. Anyone who provides services to young people has an obligation to promote the health and well-being of **all** the youth in the program, including LGBTQ young people. At the same time, providing a safe and supportive space for LGBTQ youth will also help to provide a safe space in which cisgender and straight youth can thrive.

As a reminder, the term safer is used to acknowledge that no space, physical or digital, can be entirely safe for everyone and not everyone experiences spaces in the same way. There are a variety of ways that organizations can work toward safer spaces. The next section of this toolkit outlines key policies and practices organizations can implement to ensure that all young people feel affirmed and validated.

3.1 POLICIES ASSESSMENT CHECKLIST

To ensure a safer environment for LGBTQ youth, the first step is twofold: 1) assess the policies and procedures of your organization; and 2) assess the internal climate of your organization. Assessment will support you in reaching progress toward inclusion of LGBTQ youth in programs.

Policies and Procedures
<ol style="list-style-type: none"> 1. Does your organization have non-discrimination and anti-bullying policies, which include sexual orientation, gender identity, and gender expression? Are these policies digitally and physically publicized? 2. Does your organization provide staff with training resources in issues related to LGBTQ youth, adolescent health, and intersectionality? 3. Does your organization have an official plan, goals, or strategy for reducing health disparities among LGBTQ young people, including youth of color? 4. Does your organization have policies that outline ways to support transgender, nonbinary, and gender non-conforming youth in thriving? These can include inclusive dress codes, gender-neutral restrooms, and pronoun normalization policies. 5. Does your organization have inclusive intake forms that capture a young person's name if it is different from their legally assigned name, pronouns, gender identity, and assigned sex at birth? 6. Are your pronouns included in your email signature? Have you encouraged other staff to do the same?

3.2 SAMPLE POLICIES

Non-Discrimination Policies

LGBTQ-inclusive non-discrimination policies which explicitly mention sexual orientation, gender identity, and gender expression, are crucial for building an organization's foundation for LGBTQ inclusion. Once created, these policies should be made public and promoted within the physical space of the organization and online.

- “(Organization) employees shall protect youth from discrimination, physical and sexual harassment or assault, and verbal harassment by other youth, based on a youth’s [self-identified] sexual orientation, gender identity or expression, or other protected categories.”⁵⁶
- “(Organization) will take all reasonable steps within its control to meet the diverse needs of all youth and provide an environment in which all individuals are treated with respect and dignity, regardless of sexual orientation, gender identity or expression, or other protected categories.”⁵⁷
- “Employees should model positive behavior when interacting with LGBT[Q] youth and remind all youth that anti-LGBT[Q] threats of violence, actual violence, or disrespectful or suggestive comments or gestures, will result in swift action against perpetrators so young people are protected and supported.”⁵⁷

Staff Training

Recurring staff training that centers LGBTQ youth and their intersectional identities is a major way that organizations can equip staff with tools to continue to support LGBTQ youth. Staff training can include topics related to LGBTQ 101, cultural humility, LGBTQ status and the Health Insurance Portability and Accountability Act (HIPAA), and how to collect and record sexual orientation and gender identity data. Sample staff training policies include:

- “(Organization) is committed to advancement and innovation through investing in our employees’ professional development. (Organization) shall allow staff to engage in trainings that center the experiences of young people, especially those from racial, ethnic, gender, and sexual minority backgrounds.”
- “Employees may be required by (Organization) to enroll in certain academic/vocational courses or attend training programs related to lesbian, gay, bisexual, transgender, and queer youth.”

See **Resources** for access to a variety of free training opportunities.

Sample General Programming Policies

“(Organization) shall include LGBT-affirming books, magazines, movies, and other materials in (Organization) library. All youth shall be made aware of these materials and shall have access to them when requested. Where possible, employees shall display materials, such as “safe zone” or “hate-free zone” posters that convey to youth that the facility maintains an LGBT-friendly environment. (Organization) shall ensure that employees are made aware of local LGBT[Q] resources and reach out to the LGBT[Q] community to find organizations the facility can contract with to provide supportive services to LGBT[Q] youth.”⁵⁷

Sample Clothing and Appearance Policies

- “Youth shall be allowed to dress and present themselves in a manner consistent with their gender identity. (Organization) shall allow youth to purchase or shall provide youth with clothing, including undergarments, appropriate for the youth’s gender identity and gender presentation.”⁵⁷
- “Grooming rules and restrictions, including rules regarding hair, makeup, shaving, etc., shall be the same in male and female units. Transgender girls shall not be required to have a male haircut, or to wear masculine clothing. Transgender boys shall not be required to maintain a female hairstyle, to wear makeup, or to wear feminine clothing.”⁵⁷
- “Youth will be made aware that they are always able to wear undergarments and/or clothing of their choice (that makes them most comfortable), regardless of its gender associations.”⁵⁷

Sample Paperwork, Names, and Pronouns

- “Employees, volunteers, and contractors, when working with youth at (Organization) shall use respectful language and terminology that does not further stereotypes about LGBT[Q] people.”⁵⁷
- “Employees, volunteers, and contractors of (Organization), in the course of their work, shall not refer to youth by using derogatory language in a manner that conveys bias towards or hatred of LGBT[Q] people. In particular, employees of (Organization) shall not imply or tell LGBT[Q] youth that they are abnormal, deviant, or sinful, or that they can or should change their sexual orientation or gender identity.”⁵⁷
- “Transgender youth shall be referred to by their self-identified name and the pronoun that reflects the youth’s gender identity, even if their name has not been legally changed. All written documentation about a transgender youth shall use the youth’s self-identified name as well as note the youth’s legal name recognized by the court.”⁵⁷
- “Employees shall not disclose a youth’s sexual orientation or gender identity to other youth at the facility or to outside parties, individuals, or agencies, such as healthcare or social service providers or a youth’s family and friends, without the youth’s permission, unless such disclosure is necessary to comply with state or federal law.”⁵⁷

3.3 PRACTICES ASSESSMENT CHECKLIST

Internal Climate & Practices Part 1

1. Do you have a team or advisory committee focused on supporting LGBTQ youth, including youth of color? Does the team have a focused goal and/or objective? Do you meet at least once a month?
2. Does your website have a section dedicated to LGBTQ Health and young people? Are external LGBTQ health resources listed?
3. Does your organization have visual cues that illustrate LGBTQ youth, including youth of color, are welcome?
4. Have you supported one or more LGBTQ related events or initiatives that center LGBTQ youth of color at your organization?
5. Have you worked with LGBTQ youth of color, LGBTQ organizations, or community members to assess LGBTQ needs or address LGBTQ youth of color related concerns?
6. Have you provided, or are you planning to provide, your organization's employees with training in LGBTQ health?
7. Do the LGBTQ youth, staff, and volunteers in your organization or program know that you care about them—individually and as whole people?
8. Have you created a safe space where all youth can openly ask questions about and discuss issues like sexual health, body image, relationships, and gender?
9. Do you know the interests, abilities, hobbies, and skills of each young person in your program?
10. Do you offer any information about local LGBTQ communities and resources? Do you refer youth to these resources? Are these resources available on your website?

Internal Climate & Practices Part 2

1. If you offer information about sexual and reproductive health, is it LGBTQ friendly? Is the information appropriate for all the program's youth? Is it culturally responsive? How do you know?
2. Do you ask youth to fill out evaluation forms that measure the quality of your services—qualities such as youth-friendliness, cultural appropriateness, and safety? Do young people have the opportunity to provide anonymous feedback? Does your website include an anonymous feedback form?
3. Do you employ young people as staff and pay them well? Do any of these young people self-identify as LGBTQ?
4. Is staff of similar racial, ethnic, and cultural make-up to the young people served by the program? Does any staff self-identify as LGBTQ?
5. Do you have a youth advisory board or another initial manner to involve young people in planning and evaluating programs? Do you involve LGBTQ young people?
6. Have you intentionally created a youth-friendly space? Is it friendly as well to LGBTQ youth, particularly young people of color? How do you know?
7. Does your program or organization have a broad commitment to social justice? If so, how? Has the organization demonstrated public commitment to the LGBTQ community, including Black and Brown LGBTQ communities?
8. Does your program or organization conduct conversations with young people in the program about racism, sexism, homophobia, transphobia, and other forms of cultural oppression? Do you ask the young people to generate ways to solve, limit, or minimize the problems caused by cultural oppression? How do you support young people with their efforts?
9. Does your organization physically and/or digitally commemorate LGBTQ Awareness Days?

Revised and adapted with permission of Health Initiatives for Youth, San Francisco, California
Revised and adapted from the Human Rights Campaign's Healthcare Equality Index (HEI), Washington, D.C.

3.4 SAMPLE PRACTICES

LGBTQ Youth Services and Support (In-person or digital)⁵⁸

Intake and Program Registration Forms

- Forms, including electronic health records, offer explicit options to capture a young person's current gender identity if it differs from the sex they were assigned at birth
- A two-question process is used to collect gender identity information (i.e. first asking current gender identity and then asking sex assigned at birth)
- Forms, including electronic health records, offer young people the option to note their pronouns
- Forms, including electronic health records, offer young people the opportunity to input their chosen name if it differs from their legal name
- Forms, including electronic health records, offer young people the opportunity to input their sexual orientation if they choose to volunteer that information
- Forms, including electronic health records that offer explicit options for recording same-sex parents and other diverse families

Services

- A written strategy or plan for reducing health disparities among LGBTQ young people and/or incorporate LGBTQ youth into a plan for reducing disparities faced by young people
- An internal planning or advisory committee focus on LGBTQ youth
- LGBTQ-knowledgeable and friendly staff or providers known as such to interested young people or provide a confidential way to make LGBTQ-specific referrals
- Provide some LGBTQ-specific clinical service (trans-specific services, sexual health support groups for LGBTQ youth)
- Have an externally promoted LGBTQ-focused office, advocate, or LGBTQ-specific patient navigator or staff
- Create or distribute a LGBTQ youth health education brochure or other print materials

Transgender, Nonbinary, and Gender Nonconforming-Specific Services

- A written policy (or **policies**) that specifically outline procedures and practices aimed at eliminating bias and insensitivity and ensuring appropriate, welcoming interactions with transgender youth⁵⁹
- Offer some transgender-specific **clinical services**⁶⁰
- Have an externally promoted multidisciplinary **gender clinic** or transgender youth program⁶¹
- Offer **gender-inclusive restrooms** in public areas and have clear posted signs indicating a policy that allows individuals to use the restroom that aligns with their gender identity⁶²

LGBTQ Youth and Community Engagement (In-person or digital)

- Does your organization annually participate in or support one or more LGBTQ-related events or initiatives in its service area?

Revised and adapted from the Human Rights Campaign's Healthcare Equality Index (HEI), Washington, D.C.

Sample LGBTQ-inclusive Terms to Normalize

Gendered	Gender Neutral or Inclusive
Boyfriend, girlfriend, husband, wife	Partner, spouse, significant other
How may I help you sir, ma'am?	How may I help you?
How are you guys, girls?	How are you all doing? How is everyone?
Can you see if he signed in?	Can you see if they've signed in?
What is your real name?	Could your record be under a different name?
Ladies, gentleman, sir, girls, guys	Friends, folks, everyone, you all
Girls and boys, you guys	Youth, students, young people
Mom, dad, mother, father	Name, patient, guardian, caregiver
Husband/wife	Partner, spouse, significant other, loved one
Maternity, paternity	Parenthood, natality, pregnancy, parental
Aunt/uncle	Parent's sibling, cousin

Gendered	Gender Neutral or Inclusive
Boy, girl, daughter, son	Kid, child, newborn, baby
Breasts	Chest
Breastfeeding	Lactation, nursing
Vulva	External pelvic area
Vagina	Internal genitalia, genital opening, frontal pelvic opening
Penis	External genitalia
Uterus, ovaries	Internal reproductive organs
Pap smear	Cancer screening
Bra, panties, boxers, briefs	Underwear
Period, menstruation	Bleeding
Motherhood, fatherhood	Parenthood

problem	correction	reason
Transgendered	Transgender	Only adjectives that are derived from nouns and/or verbs end in "ed"
Intersexed	Intersex	See above
Transexual	Transgender	An outdated word, can be offensive
A transgender/transgenders	A transgender person, transgender people	Transgender is not a noun
Sex change/Sex reassignment/Gender reassignment	Gender affirming surgery	Focuses on affirming one's identity

It is important to note that it is also problematic to assume that biological sex refers to sex assigned at birth. It is only acceptable to use the term biological sex when referring to one's current sex. For more information, refer back to Key Terms. The next section includes advice on creating inclusive programs and examples of digital and in-person safer spaces.

3.5 CREATING INCLUSIVE PROGRAMS

Whether or not you are aware of any LGBTQ youth in your program, it is essential to create a safer space for young people who are, who believe that they might be, or who have friends or family members who are lesbian, gay, bisexual, transgender, queer, or questioning. In addition to LGBTQ young people experiencing violence, bullying, and verbal harassment, when they are left out there are detrimental consequences, not limited to their school attendance and academic performance.³⁵ The organization's responsibility is to all of the youth in the program. Even if some youth-serving professionals feel uncomfortable about issues related to sexual orientation, gender identity, gender expression, race, and ethnicity, you owe it to the young people you serve to educate yourself and to help connect youth to the organizations, role models, and resources they deserve.

Creating programs that are inclusive of and sensitive to LGBTQ youth is not difficult, but it does require conscientious attention and thorough training for all staff. It is also important to note intersectionality of identities greatly impacts youth's ability to connect with programming; representation matters. The following suggestions will help to create inclusive programs.

- Assess values and beliefs, your own and staff's, regarding sexual orientation, gender identity, gender expression, race, and ethnicity. Taking stock will help you to address your own internal/implicit biases, prejudices, privilege, identify areas for personal growth, and enable you to serve all youth, including LGBTQ youth, in an open, honest, respectful manner.
- Make it clear that racist, sexist, transphobic, and homophobic sentiments and actions have no place in the program. Post the policy in-person and online. Develop clear guidelines for disciplinary actions. When training students or staff to lead or facilitate workshops, include opportunities to practice responding to unacceptable language and behaviors. At the same time, work proactively to address stereotypes and misperceptions that may exist among the youth and staff in your program.
- Consider posting Safe Zone stickers or LGBTQ-inclusive images around the physical environment. In the digital environment, consider including LGBTQ-inclusive images on social media, your website, or in your background for webinars.
- Normalize mentioning your pronouns during introductions, in your email signature, and included in your username in webinars. Also, be sure to encourage staff to have program participants introduce themselves. There may be participants who have nicknames or a name that was not legally assigned to them.
- Use inclusive language. Discuss 'partners' instead of always assuming a young person's prospective date or partner holds a certain gender identity. If you are doing role-plays, use gender neutral names such as Jaden, Jamie, Angel, and Taylor.
- Ask, and compensate, LGBTQ young people and adults to participate in panel discussions or as speakers to share some of their experiences. This will create a safe space and opportunity for youth to talk openly about homophobia, transphobia, racism, sexism, and other forms of oppression.



- Build youth-adult partnerships into the program. Make sure that youth leaders include some who identify as LGBTQ. Programs are more effective and sustainable when young people are partners in the programs' design, development, operations, and evaluation. For more information, see Resources.
- Consider working with students to begin GSAs in area schools, if such alliances do not already exist. For more information, see Resources.
- Hire adults who are LGBTQ and who reflect the racial and ethnic make-up of the community being served to work in the program as full or part-time staff, interns, or volunteers.
- Include local groups that serve LGBTQ people in physical and digital referral and resource lists. Make sure your referral and resource lists are easily available to all program youth.
- Know when and where to seek support. Be aware of appropriate referral agencies for crisis intervention, mental and physical health services, etc. Be aware of your personal and organizational limits, and accept that your organization may not always be the best one to assist a young person in some situations. For assistance, see Resources.
- Incorporate comprehensive sex education. If you offer sex education or address issues such as STD and HIV prevention, treatment, and care or reproductive health, then your program should include information about both contraception and abstinence. Bolster your knowledge on advancements in the field such as access to pre-exposure prophylaxis (PrEP). PrEP is an HIV prevention method in which individuals not living with HIV take a daily medication to reduce their risk of contracting the virus. When discussing abstinence, do not talk about 'abstinence-until-marriage.' Like straight and cisgender young people, LGBTQ youth search for intimacy and emotional closeness and may long for a committed relationship. In a society where gender diverse relationships are ignored or frowned upon, the concept of 'abstinence-only-until-marriage' completely ignores the needs of LGBTQ youth.
- If possible, add a gender-neutral or single-stall bathroom.

Revised and adapted from Transitions volume 14, issues 4, Washington, D.C.: Advocates for Youth, © 2002.

3.6 SAMPLE SAFER SPACES

Youth-serving professionals usually believe that every young person is of great value. Valuing young people provides an ethical imperative to acknowledge and serve LGBTQ youth equally and positively along with cisgender and straight youth and those who conform to society's gender norms.

Creating safer spaces at your organization can support LGBTQ youth to thrive and survive. There is no one-size-fits-all approach to developing safer spaces that uplift LGBTQ young people. Some examples of safer spaces, supported by resources from this Toolkit and Advocates' Queer and Gender Equity Project (QGE) are described below.

California Latinas for Reproductive Justice (CLRJ) is a statewide organization based in Los Angeles. The organization is committed to honoring the experiences of Latinas to uphold their dignity, bodies, sexuality, and families. Advocates supported CLRJ in including three bills in their 2020 policy priority platform that were supportive of LGBTQ youth. The organization also submitted support letters to various committees and to the governor in support of bills such as **SB 159**: Preexposure and postexposure prophylaxis, **SB 233**: Decriminalization of sex work under specific circumstances, and **SB 495**: LGBTQIA Anti-discrimination in Custody Decisions. The organization also increased inclusion via board recruitment by welcoming two new board members that identify as queer or gender-nonconfirming. Lastly, the organization increased collaboration with local LGBTQ partner organizations.

Annex Teen Clinic is a health center based in Robbinsdale, Minnesota. The Teen Clinic provides sexual healthcare services for adolescents ages 12-25 including pregnancy testing, family planning, emergency contraception, counseling, and testing and treatment for STIs. Advocates supported the Teen Clinic to expand partnerships with youth justice organizations outside of sexual health. In addition, the organization was able to reach more LGBTQ youth of color through a youth-led marketing campaign around HIV, AIDS, and PrEP.

Denver Health School-Based Health Center is an organization, based in Denver, Colorado, that forms a large network of health centers located inside Denver Public School (DPS) campuses. The organization offers medical, mental health, dental, health education and family planning, as well as insurance enrollment and advising services. Advocates' Queer and Gender Equity Project supported the organization with a foundation to implement LGBTQ+ professional development, support, and advocacy, including by sharing some of the resources in this toolkit. In addition, the agency was able to create an organization-wide team of individuals dedicated to improving policies and practices to support LGBTQ young people.

Quest for Change (Quest) is a youth-serving nonprofit organization based in Albany, Georgia. The organization provides a variety of prevention and education programs to build, strengthen, and empower youth and their families. With support of the Queer and Gender Equity Project, Quest implemented gender-neutral restrooms at the organization, ensured that all staff included their pronouns in email signatures, normalized the importance of pronoun usage during sex education lessons, and began to conduct LGBTQ 101 trainings for other youth-serving organizations.

3.7 DIGITAL SAFER SPACES

As more youth programs are moved online, organizations have continued providing safer and affirming spaces for young people to build community and connect to supportive services. In addition to programs supported via Advocates for Youth, I have highlighted a few additional online programs and activities below:

Q Chat Space is a digital LGBTQ center where teens ages 13-17 join live-chat, professionally facilitated, online support groups. The program gives youth safe opportunities to connect with each other, in spaces moderated by trusted adults, and within a structure that encourages compassionate interactions and discourages bullying and harassment. Q Chat Space was founded by CenterLink, an American member-based coalition of community centers serving LGBTQ people.

Project Silk Lehigh Valley is an LGBTQ inclusive drop-in program that is youth-led, adult-supported, and offers free health services like HIV/STI testing, healthy food and snacks, active recreation, peer supports, and discussions on a variety of health and social topics. Project Silk Lehigh Valley also provides daily youth programs for LGBTQ youth ages 14-21. Based in Allentown, Pennsylvania, the organization continues to **digitally support** LGBTQ youth through weekly events, a virtual camp, etc.

Supporting and Mentoring Youth Advocates and Leaders (SMYAL) supports and empowers lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth in the Washington, D.C., metropolitan region. Committed to social change, SMYAL builds, sustains, and advocates for programs, policies, and services that LGBTQ youth need as they grow into adulthood. SMYAL uses webinar tools to host daily chat rooms, online drop-ins, and support groups for transgender and nonbinary young people.

Lesbian, Gay, Bisexual, Transgender, Queer, and Intersex Life (LGBTQI) at Vanderbilt University is a cultural center, a place of affirmation for individuals of all identities, and a resource for information and support about gender and sexuality. LGBTQI Life serves all members of the Vanderbilt community, including students, faculty, staff, and alumni, by creating educational, cultural, and social opportunities. The office also supports and advises LGBTQI-related campus groups and activities. To support LGBTQ students, the organization has used **social media** to promote affinity groups and couch conversations. It is important to note that this organization includes "I" for Intersex. Intersex can be defined as an umbrella term that describes people born with any of 30 different variations in sex characteristics including chromosomes, gonads, sex hormones, or genitals.

3.8 FIVE THINGS TO CONSIDER WHEN CREATING DIGITAL SAFER SPACES

Five Things To Consider When Creating Digital Safer Spaces

- 1** Include your pronouns in your email signature, and if possible, in your username when hosting webinars.
- 2** Update webpages and social media to include and promote information about LGBTQ youth, especially on key LGBTQ awareness days and weeks such as Coming Out Day (October 11), Transgender Awareness Week (November 13-19), Transgender Day of Remembrance (November 20), LGBT Health Awareness Week (last week of March), Pride Month (June).
- 3** Incorporate LGBTQ-inclusive symbols (rainbows, pins, etc.) in your physical surroundings while on webinars.
- 4** Share resources and articles on LGBTQ issues related to young people.
- 5** Name that, although digital, the space (whether webinar or meeting) is intended to be a safer space inclusive of everyone and their identities.

3.9 CULTURAL RESPONSIVENESS

Increasingly today, people come into regular contact with individuals from different cultures and it's important to learn to talk with people who may not share a common language, background, and/or worldview. Each of us participates in at least one culture, and most of us are products of several cultures. For example, youth in one program might be mostly individuals born in the United States, Westerners, Latinx, and Roman Catholic and participants in each of those four cultures. In another program, youth might be mostly first-generation Americans as well as the children of immigrant families from various countries in Asia, Latin America, and/or Africa. These youth would share a culture common to first-generation Americans and, at the same time, belong to the cultures and religions of their families' disparate homelands.

Young people also share "youth culture." For instance, this youth culture is shared through language, music, customs, and the experience of not being able to be fully autonomous. This is only a sample of the cultures to which each person belongs. It is important to understand this because culture and cultural issues matter. It is also important to understand that each culture has its own language and its own spoken and unspoken rules. These rules define what is and is not acceptable within that culture. The first step to dealing with people of different cultural backgrounds is to be clear about your own cultural background and how it defines and limits your worldview. Below you will find that being culturally responsive means that you hold certain beliefs, attitudes, knowledge, and skills, and put these into practice.

Beliefs and Attitudes

- You are aware of and sensitive to your own cultural heritage and respect and value different cultural heritages.
- You are aware of your own values and biases and how they may affect your perceptions of other cultures.
- You are comfortable with the fact that there are differences between your culture and other cultures' values and beliefs.
- You are sensitive to your own personal biases, racial and ethnic identity, and other cultural factors that might require you to seek the help of someone from a different culture when you interact with another person of that culture.

Knowledge

- You understand the power structure of society and how less powerful groups are treated, especially LGBTQ young people of color. You acquire knowledge about the particular group(s) with which you work.
- You are aware of the institutional barriers that prevent members of disadvantaged groups from benefiting from organizational and societal resources.

Skills

- You use a wide variety of verbal and nonverbal responses when dealing with differences, and you give and receive verbal and non-verbal messages appropriately and accurately.
- You intervene promptly and appropriately on behalf of people when they receive negative attention due to their sex, culture, race/ethnicity, religion, sexual orientation, or gender expression.

So, how does cultural responsiveness apply to working with LGBTQ youth?

1

Be Clear about Your Own Attitudes and Biases.

Become educated about sexual orientation and gender identity/gender expression as well as about culture, homophobia, transphobia, racism, and sexism. Learn what you need to learn in order to deal fairly with all the youth in your program.

Ask yourself:

- Describe two issues related to race that need to be addressed at the organization.
- What race-related issues make me feel uncomfortable to discuss?
- What are three emotions I feel when race is discussed within the organization?
- What do I need to do and/or know in order to deal comfortably and respectfully with race-related issues?
- Describe two issues related to sexuality (here specifically, sexual orientation, gender identity, gender expression, and sexual relationships) that need to be addressed at the organization.
- What sexuality-related issues make you feel uncomfortable to discuss?
- What are three emotions you feel when sexuality is discussed within the organization?*
- What do I need to do and/or know in order to be able to deal comfortably and respectfully with sexuality-related issues?

2

Understand How Racism, Homophobia, and Transphobia Affect LGBTQ Youth.

Learn as much as possible about the connections amongst racism, homophobia, transphobia, and the health of LGBTQ youth. Prejudice and discrimination have a powerful impact on vulnerable youth.

Recognize that:

- LGBTQ youth, especially young people of color, face persistent inequality, violence, and invisibility in American culture.
- Prejudice and rejection lower the self-esteem of young people and leave them with fewer resources and skills to face normal developmental challenges. For high self-esteem, young people need to feel that they belong (peer identification), and they need positive role models. Young people whose self-esteem has been lowered by racism, homophobia, and/or transphobia may be unwilling to take important steps to protect their health and their future.

Ask yourself:

- What central values guide the mission, programs, and daily work of this organization?
- Describe three ways the organization intentionally supports LGBTQ youth of color.
- Describe three ways the organization could improve its support for LGBTQ youth of color.

3

Take Action to Ensure a Safer Space for the LGBTQ Youth of Color in Your Program.

- Work to ensure the safety of all the youth in your program, irrespective of whether you know that any LGBTQ youth are participating in it.
- Assess the cultural fairness of your program. Assess the environment in the organization, including its:
 - Mission, vision, values, and activities;
 - Levels of cultural justice among board members, staff, and volunteers;
 - Policies and procedures on discrimination and harassment;
 - Staff training;
 - Cultural match between the program and the participants; and
 - Reading levels and appropriateness of the program's materials.

Ask yourself:

- Is staff representative of the target population in regard to race, ethnicity, sexual orientation, and gender identity, and gender expression?
- Who (age, race, gender, sexuality) conducts community outreach, health education lessons, etc.?
- Describe the community outreach efforts.
- In what ways has the organization supported staff assessing their attitudes towards adolescents and adolescent relationships, particularly with regard to race, sexual orientation, and gender identity/gender expression?

4

Support Youth and Staff in Your Agency to Be Activists and Advocates for LGBTQ Youth of Color.

- Encourage youth and adults in your program to take positive and continuing action to ensure that everyone feels safe and supported.
- Take action to ensure that policies are appropriate; staff receives training and support regarding cultural justice; and youth know what to do if they encounter or witness homophobic, racist, or sexist words and actions.
- Support peer education and leadership by youth. Young people exert a powerful effect when they speak out for themselves, define the issues that matter to them, and craft an agenda to address those issues. By drawing on the lessons of other social movements, LGBTQ youth and their allies can create initiatives that address inequities.
- Create opportunities for youth to talk openly and frankly about racism, sexism, homophobia, class discrimination, and other forms of oppression.
- Create a place where young people can feel comfortable talking about their individual identity, experiences, hopes, and fears.
- Offer interactive and experiential exercises, such as case studies and role-playing, to help young people think through the barriers and obstacles created by oppression.

Ask yourself:

- Do gay, lesbian, bisexual, transgender, and questioning youth feel safe in this program? Do cisgender and straight youth feel safe?
- Do youth in the program receive respect for their talents and abilities? Do they respect others for their talents and abilities?
- Are youth fully and actively involved in creating safer spaces?
- Are youth fully involved in identifying the issues that affect them and in providing leadership to achieve social justice?

Cultural responsiveness is about recognizing and dealing with the broad social, economic, and political framework within which young people live. Focusing on the right of all youth to be treated with dignity and respect can also empower young people, including LGBTQ youth and their allies, to demand and to receive respect, to treat others respectfully, and to envision a more hopeful future.

3.10 ADDRESSING HARASSMENT

It is vital to stop harassment immediately. Racist, sexist, transphobic, and homophobic words and actions are bullying. Bullying hurts the person targeted, the witnesses, and the bully. Act right away! Do not let harassment—verbal or physical—go on for even a minute. Make it clear that Harassment Is Never Okay!

1. Stop the Harassment!

- Interrupt the comment. Halt the physical harassment.
- Make sure everyone in the vicinity can hear you. You want everyone—all the youth and adults nearby—to know that all young people are safe in this place.
- Do NOT pull the bully aside for a confidential discussion—stopping the harassment should be as public as the harassment has been.

3. Publicly Broaden the Response.

- Identify the offense and its consequences: “Name calling is hurtful to everyone who hears it.” “Physical attacks on anyone are totally unacceptable and can result in the attacker being put out of the program.”
- Make it clear that the entire organization, agency, program, etc., is solidly opposed to such behavior: “In this program, we do not harass other people. Period.” “In this organization, any physical attack, for any reason, on someone else is totally unacceptable. Any repetition will have serious consequences for you.”

2. Identify the Harassment.

- “You just put someone down regarding (sex, race, ethnicity, sexual orientation, gender identity or expression, age, health status, etc.)” Or, “You just shoved someone.”
- Put the spotlight on the bully’s behavior. Do NOT say anything to imply that the person being harassed belongs to the group just named. Everyone needs to understand that what was said or done is unacceptable.

4. Request a Change in Future Behavior.

- Personalize the response for the bully: “Chris, please think about what you say. This language isn’t what we would have expected of you.” “Jaime, by pushing someone, you are being a bully. I thought you enjoyed participating in this program. But, by your action, you’ve put yourself on the sidelines for the rest of today.”
- Quietly, check in with the person who was harassed: “Are you okay? Do you want to talk with me or someone else? Let’s go find a quiet place to chat.”
- Quietly reassure the person who was harassed: “Please let me know if this happens again, and I will take further action. Everyone should feel safe and be safe here. What happened was totally unacceptable, and you are very important to all of us.”

Adapted and reprinted with permission of GLSEN Colorado from How to Address Harassment in the Hallways in 3 Minutes; <http://www.glsen.org>

3.11 MEETING THE NEEDS OF LGBTQ YOUTH OF COLOR

"I've never been interested in being invisible and erased."

- Laverne Cox

Good programs that support youth of color already fully integrate the culture of these young people into their activities, language, and materials. They already acknowledge and incorporate culturally specific values, attitudes, beliefs, and knowledge about health, sexuality, and relationships. But these programs may not yet acknowledge the presence and needs of LGBTQ youth among those they serve.

Programs are most likely to be effective in also meeting the needs of these youth of color when they:

- Use language that is inclusive and non-pejorative with regard to sexual orientation and gender identity.
- Involve youth, including LGBTQ youth, in planning, running, and evaluating the programs.
- Focus on the assets of each teen participant, irrespective of sexual orientation and gender identity.
- Address the needs of the whole young person.
- Ask young people how they self-identify and use these terms.
- Offer activities and opportunities that are inclusive as to gender and sexual orientation.
- Build skills.
- Acknowledge culturally specific values, attitudes, and beliefs.
- Consider the social and cultural factors that influence behaviors.
- Hold discussions that explore the added impact of racism on LGBTQ youth of color.
- Provide peer support to change peer norms, especially those regarding sexual orientation, gender identity, and gender expression.
- Acknowledge when culture and sexual orientation cause conflicts for LGBTQ youth and recognize and confront cultural biases regarding sexual orientation and gender identity within the program.
- Respect terms and acknowledge that there are some terms and phrases created for use by and for only those communities.

3.12 MEETING THE NEEDS OF TRANSGENDER, NONBINARY, AND NONCONFORMING YOUTH

"I was a radical, a revolutionist. I am still a revolutionist..."

I am glad I was in the Stonewall riot. I remember when someone threw a Molotov cocktail, I thought, "My god, the revolution is here.

The revolution is finally here!"

**- Sylvia Rivera,
Gay Liberation and Transgender Rights Activist**

In recent years, many programs for LGBTQ youth have witnessed an increased presence of transgender, nonbinary, and nonconforming youth. Youth who do not conform to prevalent gender norms, usually represented as feminine women and masculine men, often experience severe harassment, discrimination, ostracism, and violence. Transgender, nonbinary, and nonconforming youth are increasingly claiming their right to define and express themselves in new ways. These new ways include—but are not limited to—hormone treatment, gender affirmation surgery, and name affirmation. Professionals who work with LGBTQ youth, in particular, increasingly observe the diverse ways in which these youth choose to identify, including making the choice not to identify.

Youth-serving professionals, parents, families, peers, and community members can play key roles in supporting the healthy development of transgender, nonbinary, and nonconforming youth. Respecting **all** means taking responsibility for providing them with a safe and supportive environment.

- **Don't make assumptions!** Do not assume that you know a young person's gender, or that a youth has gender identity issues, just as you would not make assumptions about a young person's sexual orientation. Exploring gender is a healthy expression of personal development. Self-identification or self-acknowledgement is a crucial first step in a young person's identity development and self-expression.
- **Create a safe space for open discussion.** Work towards creating an affirming environment that supports non-stereotypical gender expression and offers safe space for open discussion. Use inclusive, affirming, non-presumptuous, nonjudgmental, and gender-neutral language. Create organizational norms on behavior and language with youth.
- **Be informed and don't be afraid to examine your own beliefs.** Most of us are socialized to buy into and reinforce rigid gender roles. Our personal experience and cultural background may also have an influence in what we define as masculine or feminine and the binary of what is "male" and what is "female." We must examine and interrogate all binary categories and our expectations that they are not to be changed or expanded. Most of us are socialized to buy into and reinforce rigid gender roles. Our personal experience and cultural background may also have influence in what we define as masculine or

feminine and the binary of what is "male" and what is "female." We must examine and interrogate all binary categories and our expectations that they are not to be changed or expanded. Recognize your level of comfort with different types of gender expression and how this can affect your interactions with youth.

- **Seek to fully understand gender identity.** Each person's gender identity is natural to that person. Gender identity and sexual orientation are a part of each of us and often develop uniquely. Across human experience, gender may be experienced as a continuum. That is, some people do not experience gender solely as female or male. It is important for youth-serving professionals to educate themselves on gender identity, sexual identity, adolescent development, and sexual and social stereotypes. Moreover, sexuality and gender expression are only two of the aspects integral to a whole person. It is important to maintain a balanced perspective in addressing the multifaceted issues of youth development.
- **Honor confidentiality.** When a young person shares personal information about gender identity, you have achieved the trust of that young person. A breach of this confidence can have multiple implications for both the young person who confided in you and the safer space you are trying to cultivate for all students. If it truly becomes necessary to share the information, first get the young person's permission.
- **Know when and where to seek help.** Be aware of appropriate referral agencies for crisis intervention, mental and physical health services, emergency assistance, etc. Transgender youth are often subject to abuse, homelessness, suicide, harassment, and physical violence. Be aware of your personal and organizational limits and accept that your organization may not always be the best one to assist a young person. It is also important to ensure that agencies you refer to are able to handle the unique needs of transgender, nonbinary, and nonconforming young people.
- **Provide training for staff, board, volunteers, and youth.** Up-to-date training is necessary to help staff develop sensitivity, competency, and skills to interact with youth and to prevent anyone from being derogatory to transgender people. Be sure to provide transgender youth with information that can help ensure their physical safety.
- **Protect from harassment!** Immediately protect transgender youth from harassment in any form, whether perpetrated by other youth, staff, or others. Make it clear that harassing and/or abusive behavior toward anyone will not be tolerated.
- **Provide single occupancy bathrooms, if possible.** Many individuals are uncomfortable with someone with a masculine gender expression using the women's restroom, and vice versa, while transgender youth will feel they are using the appropriate bathroom. Every person has the right to use the bathroom, irrespective of gender identity. Consider providing single occupancy bathrooms, if possible. In addition, make sure the bathrooms are clearly marked as "all gender restroom" or "single stall restroom" so that there is no confusion.
- **Acknowledge when culture and sexual orientation cause conflicts** for LGBTQ youth and recognize and confront cultural biases regarding sexual orientation and gender identity within the program.
- **Respect terms** and acknowledge that there are some terms and phrases created for use by and for only those communities.

These tips are from a resource manual on gender identity and transgender youth issues, written by Charlene Leach and published by the National Youth Advocacy Coalition. The tips first appeared in *Transitions*, volume 14, issue 4, © Advocates for Youth, 2002.

3.13 ADDRESSING THE CHALLENGES TRANSGENDER, NONBINARY, AND NONCONFORMING YOUTH FACE

Transgender, nonbinary, and nonconforming young people face several unique challenges caused by the highly gendered societies in which they live. Overall, society in the United States relies on rigorously maintained concepts of gender and gender expression. This creates specific challenges for transgender youth.

Challenges

- Deliberately incorrect and disrespectful use of names and pronouns: When a transgender youth identifies as a particular gender (irrespective of sex assigned at birth), it is respectful to the young person's human dignity to use the name chosen and the pronouns appropriate to that particular gender. To intentionally use a prior name and other pronouns is to be deliberately disrespectful. Transgender youth can understand and sympathize with some confusion, so long as there is continuous, good faith progress in using the proper name and pronouns.
- Lack of access to appropriate restroom facilities: Transgender people often lack safe access to public restrooms. They may be assaulted if they use the restroom that conforms to their gender identity or forced to use a restroom that does not conform to their gender identity.
- Lack of access to appropriate locker room facilities: Transgender people often have no safe access to locker room facilities that conform to their gender identity.
- Rigid dress codes that differ for males and females: Wherever dress codes are enforced, they may create challenges for transgender youth.
- Confidentiality: Transgender youth may have unsupportive families and may even face violence and/or ejection from their home if their gender identity or gender expression is disclosed to the family.
- Lack of role models; lack of accurate information: Transgender youth often feel alone in the world. Few programs for youth employ transgender people; few libraries offer information about sex assigned at birth and gender, gender identity, or being transgender.

Solutions to the Challenges

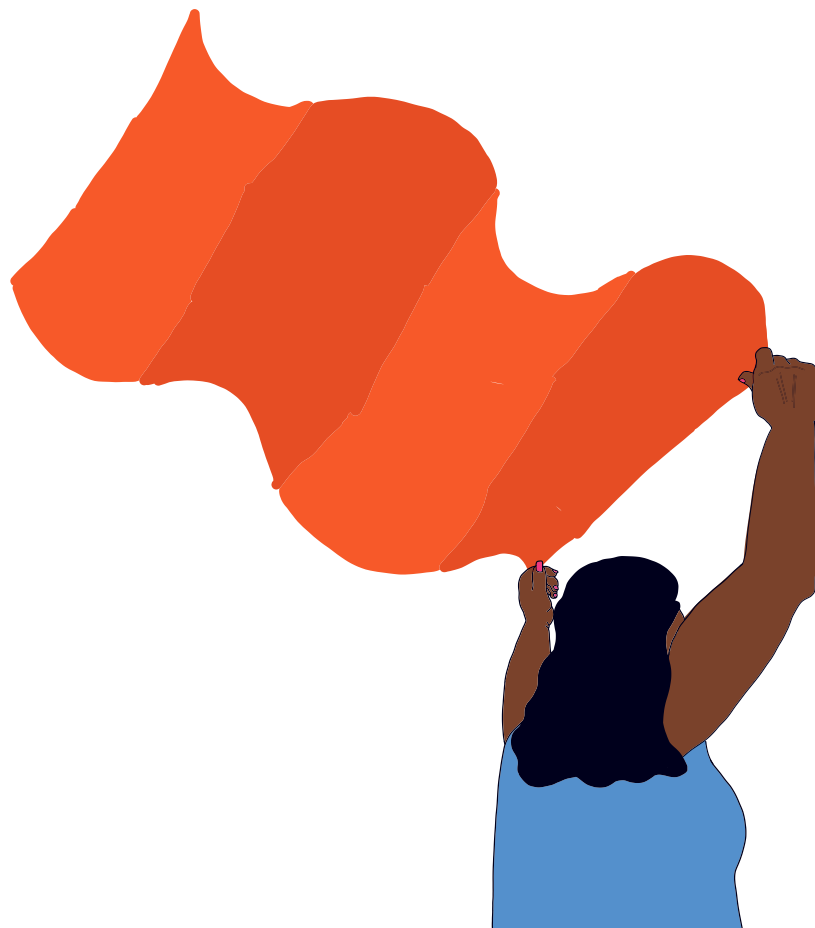
- **Names and/or pronouns:** Use the name and/or pronouns appropriate to the young person's chosen gender identity. Remember that it is everyone's essential dignity to be called by our chosen name, and it is everyone's right to be recognized as the person we see ourselves to be. Please apologize if you use the wrong pronoun or the wrong name.
- **Access to restroom facilities:** Educate staff and youth about gender identity. Make sure that everyone understands that transgender youth want to use the restrooms that conform to their gender identity; they have no interest in spying on others using those restrooms. If possible, designate inclusive restrooms (toilet facilities that anyone may use, irrespective of gender identity or gender expression).
- **Access to locker room facilities:** Educate staff and youth about gender identity. Make sure that everyone understands that transgender youth want to use the locker room facilities that conform to their gender identity; they have no interest in spying on others using the locker room.
- **Dress code:** Make sure that the dress code, if any, in your program respects youth's rights to dress in accordance with their gender identity.
- **Confidentiality:** Make sure that the program maintains confidentiality with regard to the gender identity, gender expression, sexual orientation, and sexual behavior of all the youth in the program.
- **Role models and accurate information:** Make sure that everyone in the program is aware that there is great human diversity regarding gender, including male and female certainly, but also going beyond these two genders. Search out transgender support groups and LGBTQ youth-serving organizations in your area. Make sure that these groups and organizations are included on your resource lists. Make sure your resource lists are available to all the youth in the program.

Adapted with permission from the Transgender Law Center, Transgender and Gender Non-conforming Youth: Recommendations for Schools; San Francisco, CA: The Center, © 2003; <http://www.transgenderlawcenter.org/>

3.14 CREATING SAFER SPACES RED FLAGS

Every now and again an organization may have intended to implement a safer space component that backfired. When this is the case, assess if the implementation is one that can be changed with a bit of training or rewriting a policy. In terms of feedback from young people, key leadership should work with program staff to re-evaluate safer space goals when staff:

- Tokenize one young person as the expert of any and all LGBTQ experiences
- Pit young people against each other (demonstrating favoritism or a lack of spreading out opportunities, including speaking engagements, to more youth)
- Unrealistically expect LGBTQ young people to be “on” and a representation of the community 100 percent of the time when this can be very draining or may not even be a role that they would like to take on
- Expect that because a young person is passionate about issues related to LGBTQ identities, that they should pursue a career in activism or identity-based work



4.0 STRIKE A "POSE:" A SNAPSHOT OF LGBTQ ACTIVITIES

The following workshops aim to provide support for education, healthcare, and community-based organizations who are interested in building safer and inclusive environments for LGBTQ young people. The workshops include interactive activities that promote discussions and practical ways for everyone to participate and invest in creating and maintaining safer spaces for LGBTQ young people."



4.1 CREATING A GROUP AGREEMENT

Purpose: To establish an agreed-upon code of behavior for the group so that each participant feels safe and able to rely on others in the group

Materials: Newsprint and markers (in-person); screen sharing abilities and Microsoft Word (digital)

Time: 20 minutes

Planning Notes: Review the recommended ground rules given below

Procedure:

1. Explain to the participants that, because they will be discussing sensitive issues, the group should agree on some ground rules. Ask them to come up with their own ground rules, ones that they will all agree to observe. List those ground rules on newsprint. Ask the participants for clarification, when needed, to be sure that everyone understands all the ideas. Suggest any of the recommended ground rules (below) that the young people didn't offer because they are important for establishing safer spaces.
2. Keep your list of ground rules posted prominently throughout all the activity sessions dealing with safer spaces. Refer to the ground rules if someone is not adhering to them and remind everyone of their agreement to follow the rules. Eventually, the participants will begin to remind one another of the rules if behavior occurs that is disrespectful or disruptive.

Recommended Ground Rules:

- **Respect:** Give undivided attention to the person who has the floor (permission to speak).
- **Confidentiality:** What we share in this group will remain in this group. Exceptions to this rule include if it is shared that an individual has threatened to harm themselves or others, discloses past abuse, etc.
- **Right to Pass:** It is always okay to pass (meaning "I'd rather not" or "I don't want to answer").
- **Openness:** We will be as open and honest as possible without disclosing others' (family, neighbors, or friends) personal or private issues. It is okay to discuss situations, but we won't use names or other ID. For example, we won't say, "My older brother ..." Instead we will say, "I know someone who ..."
- **Taking care to claim our opinions:** We will speak our opinions using the first person and avoid using 'you'. For example, "I think that kindness is important." Not, "You are just mean."
- **Sensitivity to Diversity:** We will remember that people in the group may differ in cultural background, sexual orientation, and/or gender identity or gender expression and will be careful about making insensitive or careless remarks.
- **Acceptance:** It is okay to feel uncomfortable; adults feel uncomfortable, too, when they talk about sensitive and personal topics, such as sexuality.
- **Have a Good Time:** It is okay to have a good time. Creating a safer space is about coming together as a community, being mutually supportive, and enjoying each other's qualities.

4.2 THE IDENTITY GAME

Objective: By the end of this activity, group members will be able to think about what part of their identity they are most comfortable and uncomfortable with.

Materials: Printed list of identities (in-person), tape (in-person), list all of the identities on one slide in a Powerpoint presentation or Word document (digital)

Time: 20 minutes

Procedure:

1. Tape identities (each on a separate sheet) around the room. (In-person)
 - Show the slide which includes all of the identities, they can be separated via bullet points or separate boxes (digital)
2. Tell participants to stand and read off the following parts of “identities”: (In-person)
 - Show the slide which includes all of the identities, they can be separated via bullet points or separate boxes (digital)
3. After reading each identity, participants will be provided a prompt and then asked to stand under (in-person) or identify (digital) the identity they feel most comfortable with.
4. Script: There is no “right” or “wrong” answer. Just because you choose one part of your identity DOES NOT mean that you are ashamed of the other parts of your identity. You are just choosing the identity you feel aligns with the prompt I am giving you.
5. **Prompt Number One:**
 - **Script:** Stand under (in-person) or identify (digital) the identity you feel the “safest” in. Safest can mean comfortable, safe, no worrying, familiar – however you define “safest.”
6. Once all participants have stood under (in-person) or identified (digital) their identities, going from left to right, ask participants if they are comfortable sharing why they stood where they stood (in person) or identified that identity (digital). Remind participants of group agreements.
7. **Prompt Number Two:**
 - **Script:** Stand under (in-person) or identify (digital) the identity you feel the least “safest” in. Least safest can mean uncomfortable, unsafe, annoying, unfamiliar – however you define “least safest.” Again, choosing an identity DOES NOT mean that you are ashamed of it, it just means that this part of your identity does not provide you the same kind of safety that other parts of your identity may provide you. Once all participants have stood under (in-person) or identified (digital) their identities, going from left to right, ask participants if they are comfortable sharing why they stood where they stood (in person) or identified that identity (digital). Remind participants of group agreements.

8. Once all participants have stood under (in-person) or identified (digital) their identities, going from right to left, ask participants if they are comfortable sharing why they stood where they stood (in person) or identified that identity (digital). . Remind participants of group agreements.
9. After participants have answered, the facilitator will direct them to have a seat. (in-person)
10. Group will process activity by answering the following questions:
 - a. What was it like to participate in that activity?
 - b. What was it like to make choices around identity?
 - c. Were there any realizations or anything you learned about yourself or your Identity?
11. Script: Identity is complex. This means we are not just one thing. Our personalities and entire being is impacted and influenced by the world and how we show up in the world. Some of us may act one way with family and act a different kind of way with friends. This is ok. We did this activity as a way to explain how one part of our identity informs/influences other parts of our identity
12. Ask if participants have any questions.

Identities List	
<ul style="list-style-type: none">• Sexual orientation• Education• Political Affiliation• Religious Affiliation• Gender Expression• Gender Identity• Socio-Economic Status• Immigration Status	<ul style="list-style-type: none">• Health Status• Appearance• Race• Ethnicity• Age• Native language• Physical Ability/Disability

4.3 MESSAGING

Objective: By the end of this activity, group members will be able to reflect on their upbringing and the messages they received about various parts of their own identities and others.

Materials: Printed list of questions per prompt (in-person), list of questions in a Powerpoint slide or Word document per prompt (digital)

Time: 30-35 minutes

Procedure:

1. Tape prompt questions (each prompt separate sheet) around the room. (In-person)
 - Each prompt should have its own slide which includes 3 questions (digital)
2. Ask participants to work with a partner or group in exploring each prompt (in-person).
 - Create breakout rooms or social distance opportunities (phone calls, video chat) for participants to discuss prompt questions (digital)
3. **Script:** This activity will allow you to reflect on your upbringing and the messages you received about various parts of your identities and others.
4. **Prompt Number One:**
 - a. Growing up, what messages did you receive about gender?
 - b. Did those messages make sense?
 - c. How do those messages show up in your work?
5. Allow participants about 10 minutes total to discuss this prompt.
6. **Prompt Number Two:**
 - a. Growing up, what messages did you receive about sexual orientation?
 - b. Did those messages make sense?
 - c. How do those messages show up in your work?
7. Allow participants about 10 minutes total to discuss this prompt.
8. **Prompt Number Three:**
 - a. What messages did you receive about race?
 - b. Did those messages make sense?
 - c. How do those messages show up in your work?
9. Allow participants about 10 minutes total to discuss this prompt.
10. After participants have answered, the facilitator will direct them to return to the larger group.

11. Group will process activity by answering the following questions:
 - a. What was it like to participate in that activity?
 - b. What was it like to reflect on messages you received at a young age?
 - c. Were there any realizations or anything you learned about yourself or your upbringing?
12. **Script:** Through socializations around gender, sexuality, and race, we all learn about differences, including social and cultural expectations. Our upbringings can have a great influence on how we think and act on conventional social norms and stereotypes. Knowing early on that children receive messaging about identities such as gender, sexuality, and race it is interesting to reflect on how these messages impact our interactions across differences.
13. Ask if participants have any questions.
14. Mirroring the identity activity, feel free to add additional prompts to include identities such as immigration, education, etc.

Below are a few tips for facilitators who may or may not have facilitated conversations around race, gender, and sexuality:

- Mentally prepare yourself
- Create an affirming learning face
- Encourage participants
- Non-judgmental
- Be Sex Positive
- Facilitate not dominate
- Manage Disclosure
- Youth/Adult Partnership Approach
- Be Flexible

4.4 PROVIDING INCLUSIVE SERVICES AND CARE FOR LGBTQ PEOPLE: A GUIDE FOR HEALTH CARE STAFF

Objective: By the end of this activity, health care staff should be better equipped to provide an affirmative, inclusive, and respectful environment for all, including LGBTQ people. This activity can be conducted as a larger group, between partners, or with small groups.

Materials: Printed scenarios and questions (in-person), each scenario and questions are included on a Powerpoint slide or Word document (digital)

Time: 30-35 minutes

Procedure:

1. Tape scenarios and their questions (each prompt separate sheet) around the room (in-person) Each scenario should have its own slide. Questions can either be in the same slide or a different one (digital).
2. **Script:** This activity will allow you to reflect on what might happen at a healthcare facility where staff are unfamiliar with best practices for managing their interactions with LGBTQ people.
3. Read aloud and project **Scenario One: Luis**
 - a. At the Family Health Center, Luis, a cisgender teenage boy, completes an intake form and hands it to Mary, the receptionist. Mary looks over the form and says with a smile to Luis "I'm sorry, but we do need you to fill out your mother's and father's names. Why don't you just tell them to me and I can fill it out for you?" Luis looks away and, in a low voice, says, "I have two dads. Their names are Carlos Montoya and David Sandoval." Before she can catch herself, Mary becomes flustered and blurts out, "Oh! You don't have a mother?" Mary's exclamation arouses attention in the waiting area. Luis's face turns red and he starts heading out the door.
 - b. Ask participants the following case question, **What could Mary have done differently to prevent this situation?**
4. Allow participants about 10 minutes total to read, discuss, and answer the scenario question.

5. **Script:** Mary's assumption that Luis had a mother and a father, and her surprise when she learned he had two fathers, are good examples of mistakes in communication. Mary meant no harm, and would certainly deny holding any prejudice against LGBTQ people. Besides, Luis might not be LGBTQ himself. But every patient is unique, and no one knows for sure when a patient, or someone who is related to a patient, may be LGBT. Mary needed to learn two things: first, it would have been better if she had asked the question in gender neutral terms, such as: "Luis, may I have the names of your parent, parents, or legal guardian?" And second, she needed to be ready for the answer. Expressing surprise about people who are different may seem like a difficult habit to break, but treating everyone with respect requires exactly this sort of behavioral change. The lesson for health care staff, therefore, is to always practice good customer service, and to never assume that someone, or their family members, are heterosexual.

6. Read aloud and project **Scenario Two: Carmen**
 - Carmen is having her annual physical exam with Dr. Jones, an openly gay physician. Dr. Jones recently skipped his health center's training on LGBTQ care because he believed he already knew everything about LGBTQ health. Dr. Jones asks Carmen, "Are you sexually active with men, women, or both?" Carmen says, "I am sexually active with one woman." Hearing this, Dr. Jones skips the questions about condom use. Unbeknown to Dr. Jones, Carmen's partner is a transgender woman.

7. Ask participants the following case question, How does this case demonstrate the importance for every team member to receive training in LGBTQ health care delivery?

8. Allow participants about 10 minutes total to read, discuss, and answer the scenario question.

9. **Script:** It is impossible to ever become a true "expert." Everyone can benefit from training, no matter how experienced we are. Though Dr. Jones identifies as gay, he cannot possibly know everything there is to know about LGBTQ people. In this case, he did not consider the possibility that Carmen's partner was transgender.

10. Ask participants the following case question, How could the doctor rephrase his question to ensure effective communication?

11. **Script:** Rather than asking whether Carmen was sexually active with men, women, or both, Dr. Jones could ask: 1) "Can you tell me more about who you are having sex with?" or 2) "What kind of body parts are you having sex with?" 3) "Who are your partners? How did you meet them? What language do you and they use to talk about your bodies? What body parts are involved during sexy times?" Dr. Jones could then follow-up with questions about the couple's sexual activities. If Carmen did not understand why these questions were being asked, the doctor could clarify by saying "It is important for me to know what type of sex you are having, so that I can ask about protection and recommend appropriate screening tests."

12. Allow participants about 10 minutes total to read, discuss, and answer the scenario question.
13. After participants have answered, the facilitator will direct them to have a return to the larger group if this activity was conducted in small groups or pairs.
14. Group will process activity by answering the following questions:
 - a. What was it like to participate in that activity?
 - b. What was it like to reflect on LGBTQ experiences in healthcare?
 - c. Were there any realizations or anything you learned about LGBTQ inclusivity in healthcare settings?
15. **Script:** Many LGBTQ people have difficulty finding health care where they feel included and accepted. Negative encounters can occur with any staff member LGBTQ people meet, from the time they arrive for a visit until the time they leave. Creating an affirming and inclusive environment for LGBTQ people requires a combination of understanding them as a population, while treating each LGBTQ person as a unique individual. Finding this balance may seem complicated at first, but in fact it is no different than the procedures we follow with any patient. Effectively serving LGBTQ people requires us to understand the cultural context of their lives, and to modify our procedures, behavior, and language to be inclusive, non-judgmental, and helpful at all times. By taking these steps, health care staff can help ensure that LGBTQ people receive the level of care that everyone deserves.
16. Ask if participants have any questions.

5.0 ADVOCATES FOR YOUTH RESOURCES

This section includes a variety of resources that may increase your support for LGBTQ young people. Please share widely.

The All Student Count Coalition (ASCC) has a network of national and state organizations led by Advocates for Youth. The ASCC recently launched their **On All Sides: How Race, Ethnicity & Gender Influence Health Risk for Transgender Students of Color** report. In 2017, history was made when for the first time on a population-based survey, the Youth Risk Behavior Surveillance System (YRBSS) asked students whether they identify as transgender, and 2,555 young people said yes. More than half of these respondents also identified as students of color.

AMAZE harnesses the power of digital media to provide young adolescents around the globe with medically accurate, age-appropriate, affirming, and honest sex education they can access directly online—regardless of where they live or what school they attend. AMAZE also strives to assist adults—parents, guardians, educators and health care providers around the globe—to communicate effectively and honestly about sex and sexuality with the children and adolescents in their lives.

Kiki's with Louie is a YouTube series featuring honest, deep conversations about the most challenging issues facing queer youth: relationships, sexuality, health, culture, and more.

I Think I Might Be are resources written by LGBTQ young people, and provide answers for young people thinking about their sexual orientation and young people who find that the gender they were assigned at birth does not fit them.

Rights, Respect, Responsibility (3Rs) is the first-ever free K-12 sexuality education curriculum fully mapped to the National Sexuality Education Standards.

5.1 GENERAL RESOURCES

30+ Examples of Cisgender Privileges

Adolescent Health Initiative: LGBTQ Friendly Services Starter Guide

Basic Learning Activities: LGBTQ Awareness

Supporting & Caring for Transgender Children

Transgender Identities and Rights

Books:

Giovanni's Room by James Baldwin (1956)
 Sister Outsider: Essays and Speeches by Audre Lorde and Cheryl Clarke (2007)
 My Princess Boy by Cheryl Kilodavis (2010)
 The Other Side of Paradise: A Memoir by Staceyann Chin (2010)
 We the Animals by Justin Torres (2011)
 Redefining Realness: My Path to Womanhood, Identity, Love & So Much More by Janet Mock (2014)
 Since I Laid My Burden Down by Brontez Purnell (2017)
 Tomorrow Will Be Different: Love, Loss, and the Fight for Trans Equality by Sarah McBride (2018)
 The House of Impossible Beauties: A Novel by Joseph Cassara (2018)
 All Are Welcome by Alexandra Penfold (2018)
 Julián Is a Mermaid Hardcover by Jessica Love (2018)
 I Can't Date Jesus: Love, Sex, Family, Race, and Other Reasons I've Put My Faith in Beyoncé by Michael Arceneaux (2018)
 Like a Love Story by Abdi Nazemian (2019)
 Real Queer America: LGBT Stories from Red States by Samantha Allen (2019)
 Hurricane Child by Kacen Callender (2019)
 It Feels Good to Be Yourself: A Book about Gender Identity by Theresa Thorn (2019)
 The Tradition Paperback by Jericho Brown (2019)
 No Ashes in the Fire by Darnell L. Moore (2019)
 We Are Everywhere: Protest, Power, and Pride in the History of Queer Liberation by Matthew Riemer and Leighton Brown (2019)
 Patsy by Nicole Dennis-Benn (2020)
 Lot by Bryan Washington (2020)
 All Boys Aren't Blue: A Memoir-Manifesto by George M. Johnson (2020)
 The Black Flamingo by Dean Atta (2020)

Movies:

Paris Is Burning (1991)
 Hairspray (2007)
 The Bold World by Jodie Patterson (2010)
 Pariah (2011)
 Blackbird (2014)
 Tangerine (2015)
 Gender Revolution: A Journey With Katie Couric (2016)
 Booksmart (2019)
 Moonlight (2016)
 Love, Simon (2018)
 We the Animals (2018)
 Gay Chorus Deep South (2019)
 Disclosure: Trans Lives on Screen (2020)

Series:

The Wire (2002)
Noah's Arc (2005)
Ugly Betty (2006)
True Blood (2008)
Glee (2009)
RuPaul's Drag Race (2009)
Orange is the New Black (2013)
Broad City (2014)
Schitt's Creek (2015)
Dear White People (2017)

POSE (2018)
My House (2018)
Black Lightning (2018)
Chilling Adventures of Sabrina (2018)
Euphoria (2019)
Special (2019)
Tales of the City (2019)
Hollywood (2020)
"We're Here" (2020)

5.2 EDUCATIONAL RESOURCES

[A Guide for Understanding, Supporting, and Affirming LGBTQI2-S Children, Youth, and Families](#)
[Beyond the Binary: A Tool Kit for Gender Identity Activism in Schools](#)
[Model District Policy on Transgender and Gender Nonconforming Students](#)
[GLSEN Educator Resources](#)

5.3 HEALTHCARE RESOURCES

[Advancing Effective Communication, Cultural Competence, and Patient- and Family-Centered Care for the Lesbian, Gay, Bisexual, and Transgender \(LGBT\) Community: A Field Guide](#)
[American Medical Association: Creating an LGBTQ-friendly Practice](#)
[Creating Equal Access to Quality Health Care for Transgender Patients: Transgender-Affirming Hospital Policies](#)
[Do Ask, Do Tell: A Toolkit for Collecting Sexual Orientation and Gender Identity Information in Clinical Settings](#)
[The Fenway Guide to LGBT Health, 2nd Edition](#)
[Human Rights Campaign: Healthcare Equality Index \(HEI\)](#)
[Healthy People 2020: Lesbian, Gay, Bisexual, and Transgender Health](#)
[The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding](#)
[When Health Care Isn't Caring: Lambda Legal's Survey of Discrimination Against LGBT People and People With HIV](#)

5.4 NONPROFIT AND COMMUNITY-BASED ORGANIZATION RESOURCES

[Trans in the South Guide](#)

[True Colors Fund: Youth Collaboration Toolkit](#)

5.5 ORGANIZATIONS OF INTEREST

[Center of Excellence for Transgender Health](#)

[Center for Disease Control and Prevention's Division of Adolescent and School Health](#)

[Fenway Institute](#)

[Gay and Lesbian Medical Association](#)

[GLSEN](#)

[GSA Network](#)

[Human Rights Campaign](#)

[The Joint Commission](#)

[Lambda Legal: The National LGBT Health Education Center](#)

[The Trevor Project](#)

[World Professional Association for Transgender Health](#)

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6.1 GLOSSARY

Assigned sex at birth: the sex, usually male or female, assigned to a child at birth, most often based on the child's external anatomy. Also referred to as birth sex or natal sex.

Cisgender: a person whose gender identity and assigned sex at birth correspond (e.g., a person who is not transgender).

Community-Based Organization (CBO): an organization that provides services on a local level.

Conversion therapy: conversion therapy, sometimes referred to as "reparative therapy," is any of several dangerous and discredited practices aimed at changing an individual's sexual orientation or gender identity. Conversion therapists use a variety of shaming, emotionally traumatic or physically painful stimuli to make their victims associate those stimuli with their LGBTQ identities

Gay: a sexual orientation that describes a person who is emotionally and sexually attracted to people of their own gender. It can be used regardless of gender identity, but is more commonly used to describe men.

Gender identity: a person's inner sense of being a boy/man/male, girl/woman/female, another gender, or no gender.

Gender expression: describes the ways (e.g., feminine, masculine, androgynous) in which a person communicates their gender to the world through their clothing, speech, behavior, etc. Gender expression is fluid and is separate from assigned sex at birth or gender identity.

Gender non-conforming: describes a gender expression that differs from a given society's norms for males and females.

Heterosexual (straight): a sexual orientation that describes women who are emotionally and sexually attracted to men, and men who are emotionally and sexually attracted to women.

Homophobia: the fear of, discrimination against, or hatred of lesbian or gay people or those who are perceived as such.

Human immunodeficiency virus (HIV): a virus that attacks the body's immune system, which is crucial to fighting off infections and diseases. The virus, if untreated, can cause someone to develop AIDS.

LGBTQ: an acronym for "lesbian, gay, bisexual, transgender, and queer/questioning."

Lesbian: a sexual orientation that describes a woman who is emotionally and sexually attracted to other women.

Men who have sex with men/Women who have sex with women (MSM/WSW) : categories that are often used in research and public health settings to collectively describe those who engage in same-sex sexual behavior, regardless of their sexual orientation. However, people rarely use the terms MSM or WSW to describe themselves.

Non-binary (ENBY): describes a person whose gender identity falls outside of the traditional gender binary structure.

Post-exposure prophylaxis (PEP): an HIV prevention strategy that involves taking HIV medications immediately after a potential exposure, such as condomless sex without the use of PrEP.

Pre-exposure prophylaxis (PrEP): a medication taken daily that can reduce a person's chances of acquiring HIV by up to 92 percent.

Same gender loving (SGL): a term used as an alternative to the terms gay and lesbian. SGL is more commonly used by members of the Black community

Social stigma: negative stereotypes and social status of a person or group based on perceived characteristics that separate that person or group from other members of a society.

Structural stigma: societal conditions, policies, and institutional practices that restrict the opportunities, resources, and well-being of certain groups of people.

Transgender (Trans): describes a person whose gender identity and assigned sex at birth do not correspond. Also used as an umbrella term to include gender identities outside of male and female. Sometimes abbreviated as trans.

Trans man/transgender man/female-to-male (FTM): A transgender person whose gender identity is male may use these terms to describe themselves. Some will just use the term man.

Trans woman/transgender woman/male-to-female (MTF): A transgender person whose gender identity is female may use these terms to describe themselves. Some will just use the term woman.

Transition: In the youth-serving professional context, a multifaceted, active process that attends to the medical, psychosocial, and educational/vocational needs of adolescents as they move from the child-focused to the adult-focused healthcare system. Transition also refers to the process by which a transgender person begins to express their gender identity through appearance, hormones, surgery, and other interventions..

Transphobia: The fear of, discrimination against, or hatred of transgender or gender non-conforming people or those who are perceived as such.

THE IMPACT OF SAFER SPACES

“We live in a world where physical and psychological safety are scarce for LGBTQ youth, especially youth of color. Therefore, it is everyone’s duty to amplify, uplift, and honor LGBTQ youth so that, one day, we won’t have to create safer spaces because the world will just be safe - for them and for us.”

**- Dr. Jaymie Campbell
Senior Trainer, The Transgender Training Institute**

Advocates for Youth envisions a society in which all young people are valued, respected, and treated with dignity; sexuality is accepted as a healthy part of being human; and youth sexual development is recognized as normal. In such a world, all youth and young adults would be celebrated for who they are and provided with the economic, educational, and social opportunities to reach their full potential. Society would recognize young people’s rights to honest sexual health education, confidential and affordable access to culturally appropriate and youth-friendly sexual health services, and the resources and opportunities necessary to thrive.

This vision is informed by the organization’s core values of **Rights, Respect, Responsibility (the 3Rs)**.

Advocates understands that reproductive and sexual health and rights are inextricably tied to social justice and the fight for liberation. Advocates believes that:

Youth have the inalienable **right** to honest, inclusive sex education; confidential, universal sexual health services; and the economic, political and social power that supports their agency, bodily autonomy, and self determination.

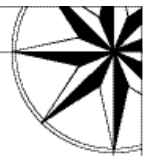
Youth are due **respect**. They are leading the fight for equity and justice. adults must partner authentically with, and center young people in the design, implementation and evaluation of institutions, systems, policies and programs that affect young people’s health and well-being.

Society has the **responsibility** to examine and dismantle systems of oppression that drive sexual health disparities and other inequities and to instead support programs, policies, institutions and systems that promote equity and justice for all young people, their families and communities.

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