



A Positive Space Is A Healthy Place

Making Your Community Health Centre, Public Health Unit or Community Agency Inclusive to Those of All Sexual Orientations and Gender Identities

**The Public Health Alliance for Lesbian, Gay, Bisexual,
Transsexual, Transgender, Two-Spirit, Intersex, Queer and
Questioning Equity**

A workgroup of the Ontario Public Health Association

<http://www.opha.on.ca/resources/docs/SexualHealthPaper-Apr10.pdf>

The committee wishes to thank their employers and OPHA for the staff time and resources to create this manual so that it can be distributed freely. There is no charge for this manual.

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And is dedicated to all those silent in their workplace, with the fervent hope that it may help them find their voice.

In the creation of this manual, concepts and ideas from other work have also been used. We have made every attempt to determine, acknowledge and credit the sources where known.

Please feel free to utilize the ideas and resources and adapt them to your need. We would however appreciate it if you acknowledge the source. Feedback and new ideas are welcome.

For questions and concerns, please contact one of the committee members listed above.

For more background reading, please access our position papers at www.opha.on.ca

How to Use This Manual

This manual has been divided into sections as follows:

Section 1: Introduction to Sexual Orientation and Gender Identity

This section provides background information to increase the knowledge base of those who will be providing Positive Space workshops, and serves as a reference for questions that may arise during training.

Section 2: Positive Space

This section provides information about Positive Space programming.

Section 3: Assessing Your Workplace

This section provides the tools to assess the workplace, its policies, practices and need for further training in cultural competency related to LGBTTTTIQQ inclusivity.

Section 4: Planning Your Workshop

This section provides a number of activities that can be used in delivering a Positive Space Workshop. It is subdivided into three components:

- Education – The Facts
- Raising Awareness / Sensitivity
- Building Skills

The trainer should choose one or more activities from each section to use in the workshop. There are many other activities available in other online and print resources; however, the activities in this manual were chosen based on the committee members' own experiences of doing workshops, and on the intended audience – in this case staff of Public Health Units and Community Health Centres and Community Agencies.

Section 5: Resources

A list of useful resources, and a number of participant handouts are included in this manual.

Index

Introduction to Sexual Orientation and Gender Identity	6
Definitions of Terms related to Sexual Orientation and Gender Identity.....	7
How Heterosexism, Transphobia, Biphobia and Homophobia Hurt LGBTQ People.....	13
10 ways LGBT Oppression Affects Straight People.....	15
Selected Historical Events.....	16
LGBT Symbols of Pride.....	19
Alfred Kinsey and the Kinsey Scale.....	20
Klein Scale.....	24
Legislation.....	29
Gay, Lesbian, Bisexual and Transgender Health Care Consumer’s Bill of Rights.....	31
Positive Space	32
Positive Space and LGBT Cultural Competency in the workplace.....	33
Assessing Your Workplace	38
Creating a Positive space in Public Health Units and Community Health Centres in Ontario.....	39
Personal Assessment Tool.....	41
Workplace Assessment Tool.....	43
Personnel Policies and Practices.....	51
Planning Your Workshop	57
Planning a Positive Space Workshop for your Workplace.....	58
Raising Awareness/Sensitivity	59
LGBT Opinion Poll.....	60
Attitudes Towards Homosexuality.....	63
Heterosexism and Heterosexual Privilege.....	65
Numbers Exercise.....	69
The Name Game.....	70
The Barnyard Game.....	72
Coming Out Stars.....	73
“On Being Gay”.....	78
Journey Through Life.....	80

A Personal Story.....	85
What It's Like to Be Me.....	86
Education: The Facts.....	89
LGBT Bingo.....	90
Definitions Match-up.....	92
Kinsey and Klein – Mini-lecture.....	95
Jeopardy Game.....	96
Building Skills.....	102
Positive Space Case Scenarios.....	103
Responsibilities of a Positive Space Ally	108
Placemat.....	112
Resources.....	113
LGBT Health Resources.....	114
Homosexuality and the Law.....	117
For Service Providers.....	119
What is an Ally?	121
Supporting LGBT Individuals.....	122
Supporting an LGBT Friend.....	124
Talking to Your Child.....	126
Being an Ally for LGBTQ People.....	128

Introduction to Sexual Orientation and Gender Identity

Definitions of Terms Related to Sexual Orientation and Gender Identity

adapted from Chesley et al, 1999, OPHA Position Papers, Rainbow Health Ontario, and other unknown sources

Note: This document is organized as a functional teaching resource as opposed to being in alphabetical order

LGBTTTIQQ:

Acronym for lesbian, gay, bisexual, transsexual, transgender, two-spirit, intersex, queer and questioning.

- The letter “A” may be added, and may refer to asexual or ally.
- “LGBT” is the abbreviated and more commonly used acronym.

Sexual Orientation:

One’s attraction or affection (physical, emotional, romantic) for another person, defined by the sex of that person

- Three sexual orientations are heterosexual, homosexual (gay/lesbian), and bisexual.
- Some are very young when they become aware of their sexual orientation however awareness can arise at any time in life.
- Like being right-handed, left-handed or ambidextrous, sexual orientation is not a choice. It is unknown what determines sexual orientation.

Sexual Identity:

One’s identification of his/her sexual orientation to self and to others.

- Sexual orientation, sexual identity and sexual behaviour are not necessarily congruent, for example not everyone acts on his or her attractions and one can know his/her sexual orientation without ever having had sex.

Heterosexual:

One whose primary sexual orientation is to people of the opposite sex.

Straight:

A term for heterosexual.

Homosexual:

Someone who is physically and emotionally attracted to people of the same sex.

- Because the term is associated historically with a medical model of care and the term homosexual has often been used in derogatory, marginalizing and hurtful ways, most homosexual people encourage the use of the terms lesbian, gay and bisexual.

Gay:

A term for homosexual. This can refer to both males and females, (for example “the gay community”) but is increasingly used to refer to men only.

- Some gay men have reclaimed terms that have long been considered derogatory (such as faggot, fag, homo, pansy, and fruit) and use them proudly.

Lesbian:

A female who is physically and emotionally attracted to other females.

- The term lesbian is derived from Lesbos, a Greek Island home to Sappho, a poet and teacher who loved other women.
- Some women have reclaimed terms that have long been considered derogatory (such as dyke, butch, and lezzie) and use them proudly.

MSM / WSW: (men who have sex with men / women who have sex with women)

Someone who has sex with a person of the same gender

- This person may identify as gay, bisexual, or heterosexual
- This terminology relates specifically to sexual behaviour (which may not always be congruent with sexual orientation)

Bisexual:

Someone who is attracted physically and emotionally to persons of the same and opposite sex.

- Bisexuals are not necessarily attracted equally to both men and women and not always attracted to both men and women at the same time.
- Bisexuality is often thought of as a “phase” on the way to coming out as gay or lesbian, but for many people, being bisexual is a life-long sexual identity.
- Not all people are comfortable with this term because gender is fluid and more varied than this term presumes.
- Bisexuals may encounter discrimination by heterosexuals, lesbians and gay men.

Asexual:

A word describing someone who is not sexually and/or romantically active or not sexually and/or romantically active or not sexually and/or romantically to other persons.

Gender Identity:

A person’s deep sense of being male, female, neither or both; how we think about and express our gender.

- Gender identity most often corresponds with one’s anatomical gender, but sometimes people’s gender identity doesn’t directly correspond to their anatomy.

Gender Role:

Characteristics attached to culturally defined notions of femininity and masculinity, and the public expression of these characteristics.

Transgender(ed) / Trans / Transperson:

One whose gender identity or expression differs from his or her biological sex regardless of the status of surgical and hormonal gender reassignment processes.

- These terms are often used as “umbrella” terms to refer to anyone who crosses gender roles in one way or another including transsexuals, drag queens / kings, cross-dressers, intersex, two spirit etc. (Also synonymous with “trans community” or “trans population.”)
- Transgender people may choose not to alter their bodies by means of hormones and/or surgery, focusing instead on expanding their gender identity mentally and expressing their gender role through nonbinary (“third gender/third sex”) behaviour.
- Some transgender people choose to use hormones without sex reassignment surgery and may identify as “transgenderists.”
- Some transgender people continue to move through the sexual-gender spectrum to subsequently identify as transsexual.

Transsexual:

One who has an intuitive, life-long conviction that he or she is really of the opposite gender to that assigned at birth.

- A transsexual person experiences acute gender discomfort (“gender dysphoria”) and is typically driven to change their physical sex. This may include sex reassignment surgery (SRS), sex hormone therapy, electrolysis, wearing gender specific clothing and legal name and sex status changes.
- This process of change is known as transitioning.
- Transsexuals may be referred to as female-to-male (ftm; a transman) or male to female (mtf; a transwoman).
- A transwoman should be referred to as ‘she’ and a transman as ‘he’.
- There are many terms transpeople may use to further describe their identities. Some traditionally derogatory terms have been reclaimed by transpeople.
- Some transpeople prefer not to be “out” as trans but rather just blend in as men or women.
- A trans person’s ability to be accepted as their preferred gender (particularly among people who are not aware that the person is transgender) is called “passing.”
- Transpeople may identify as gay, lesbian, straight, bisexual or otherwise. Some identify as transqueers (gay transmen and lesbian transwomen)

Cross Dresser:

One who wears clothing associated with the opposite gender often for recreation or erotic enjoyment.

- This term has replaced the term “transvestite.”
- Cross dressers may be male or female, and can be straight, gay, lesbian or bisexual.

Drag Queen, Drag King:

- One who dresses up in clothing of the opposite gender for fun and entertainment. A male cross-dresser is called a “Drag Queen”, and female is called a “Drag King.”
- Though drag is often associated with gay or trans communities assumptions should not be made as to the person’s sexual orientation or gender identity.

Female / Male Impersonator:

One who dresses as the opposite gender to perform professionally in public.

Two-Spirit:

An English term coined within queer aboriginal populations to describe a person’s spiritual nature as being comprised of both male and female spirits.

- Traditionally, two-spirit people often had elevated status as spiritual healers (shamans) in their communities.
- People who are gay, lesbian, bisexual, transgender, transsexual or who have multiple gender identities may identify as two-spirit. However, people who identify as two-spirit do not necessarily identify with these non-native terms.

Intersex:

A person who has some mixture of male and female genetic and/or physical sex characteristics.

- This term has replace the term “hermaphrodite.”
- Intersex children have often been subjected to surgery and assignment to male or female gender based on medical opinion.
- Many intersex people consider themselves members of the trans community.

Queer:

An umbrella term that encompasses a broad range of sexual and gender identities, behaviours and expressions.

- Previously a derogatory term, this word has been reclaimed and is used proudly by many LGBTTTTIQQ people.
- “Queer” can also express political and cultural statements and attitudes.

GenderQueer:

A recent term coined by young people who experience a very fluid sense of both their gender identity and their sexual orientation.

- They prefer to be open to relocate themselves on the gender and sexual continuums.

Questioning:

People who are questioning their gender identity or sexual orientation.

- They may choose to explore other options in terms of gender and sexual identification and presentation.
- In some cases they may experience confusion and/or conflict.

Homophobia / Biphobia / Transphobia:

Irrational fear, dislike or hatred of homosexuals / bisexuals/ transpeople, often exhibited as prejudice, discrimination, jokes, name-calling, exclusion, harassment, and acts of violence (known as “bashing”).

- LGBTTTTIQQ people (especially those who have experienced a lot of homophobia in their lives) may internalize feelings of fear or shame, and suffer low self-worth or self-hatred. This is called “internalized homophobia.”
- Some heterosexuals may suffer discrimination because they do not necessarily fit in with socially accepted gender roles – for example a boy who is called gay because he enjoys dancing.

Heterosexism:

The pervasive assumption (expressed overtly and/or covertly) that everyone is or should be heterosexual and that heterosexuality is the only normal, natural sexual orientation.

- Heterosexism excludes the needs, concerns, and life experiences of lesbian, gay and bisexual people, while it give advantages to heterosexual people. It is a subtle form of oppression that reinforces silence and invisibility for lesbian, gay and bisexual people.

Heterosexual Privilege:

The unrecognized and assumed privileges that people have if they are heterosexual.

- Examples: Holding hands or kissing in public without fearing threat, not questioning the normalcy of one’s sexual orientation, raising children without fears that they will experience discrimination because of their parents’ sexual orientation.

Genderism:

The belief that the binary construct of gender (in which there are only two genders, male and female) is the most normal natural and preferred model of gender identity. This binary construct does not include or allow for people to be intersex, transgendered, transsexual or genderqueer.

Coming Out:

1. The developmental process through which LGBTTTTIQQ people recognize their sexual orientation / gender identity and intergrate this knowledge into their personal and social lives

2. Disclosure of one's sexual orientation or gender identity to others.

For example, "I just came out to my parents." "Coming out" is not a single event. In every new social situation and with every new acquaintance, a decision must be made about whether or not to disclose one's sexual orientation / gender identity. AN LGBTTTTIQQ person may never be "out of the closet" in all parts of life.

Gay-positive / Bi-positive / Trans-positive:

The opposite of gay-, bi- or trans-phobia. An attitude that validates, affirms, accepts, appreciates, celebrates and integrates these people as unique and special in their own right.

Ally:

A person who is not a member of a specific group, but who supports that group, challenges discrimination and oppression of that group, and explores his or her own biases.

How Heterosexism, Transphobia, Biphobia and Homophobia Hurt LGBT People

For those not yet out:

- May feel the necessity to lie and pretend that you are something that you are not.
- Can only be affectionate with a loved one when you feel it is “safe”.
- Having to pretend the person that you’re with is not your lover.
- Having people try to “fix you up” with members of the opposite sex.
- Feeling forced to adopt a gender presentation that you are not comfortable with.
- Unsolicited advice such as “you’ll never catch a man/woman if you act/dress like that.”
- Assumptions that you and everyone else are heterosexual.
- Being around people who are free to express their sexuality, while having to hide your own.
- Having a hard time finding/meeting other LGBT people.
- Thinking you are the only one.
- Thinking something is wrong with you.
- Feeling that you don’t fit in or belong
- Not being able to get close to another person because of this “secret”.
- Feeling panic about being found out, and feeling like a coward or a dishonest person.

For those coming out, the possibility and fear of:

- Rejection from friends, family and/or co-workers.
- Rejection of your friends or your lovers.
- Rejection of other things that are important to you – your work, interests, etc.
- People refusing to accept your gender identity or sexual orientation.
- Having to deal with fear and anger toward you from others, including those who have been your best supporters on everything else.
- Losing your job, your living space or financial supports.
- Getting lower grades or poorer performance evaluations than you think you deserve and wondering if your LGBT identity is why.
- Subtle rejection or distance from many people and having to wonder the cause.

For those who are already out:

- Dealing with heterosexism, transphobia and homophobia.
- Dealing with put-downs, slurs, jokes, and being talked about or stared at by others.
- Not getting jobs nor into groups and organizations.
- Being made into a special case – a “good” or “different” LGBT person.
- Any affection you show towards a same-sex person may be seen as a sexual “come on”.
- Encountering verbal or physical abuse/violence against you by total strangers just because of whom you are.
- Encountering emotional abuse in the form of graffiti, jokes and defaced posters

Source: Antigonish Women’s Association,” Positive Space Training Manual”

10 Ways LGBT Oppression Affects Straight People:

- 1.** LGBT oppression forces us to act “macho” if we are a man or “feminine” if we are a woman. This limits our individuality and self-expression.
- 2.** LGBT oppression puts pressure on straight people to act aggressively and angrily towards LGBT people.
- 3.** LGBT oppression can make it hard to be close friends with someone of the same sex.
- 4.** LGBT oppression often strains family and community relationship.
- 5.** LGBT oppression may cause youth to become sexually active before they are ready in order to prove they are “normal”. This can lead to an increase in unwanted pregnancies and Sexually Transmitted Infections (STIs).
- 6.** LGBT oppression prevents vital information on sex, gender and sexuality from being taught in schools. Without this information, youth are putting themselves at a greater risk for HIV and other STIs through sexual activity, injection drug use or unsupervised hormone therapy.
- 7.** LGBT oppression can be used to hurt a straight person if they “appear to be LGBT”.
- 8.** LGBT oppression makes it hard for straight people and LGBT people to be friends.
- 9.** LGBT oppression along with racism, sexism, classism, etc. makes it hard to put an end to AIDS.
- 10.** LGBT oppression makes it hard to appreciate true diversity and the unique traits that are not mainstream or “normal”.

Adapted from Gay Straight Alliance Network.

<http://www.gsanetwork.org/resources/straight.html>, 10 Ways That Homophobia Affects Straight People.

Antigonish Women’s Association, “Positive Space Training Manual”.

www.mysfx.ca/campus/stu-serv/equity/Training%20manual.htm/section2

Selective Historical Events

(adapted from “Equality”, Canadian Human Rights Commission and “Teaching for Diversity and Social Justice”, Adams, Bell, Griffin, p165 – 169.1997, Canadian Human Rights Commission.1996)

Before 2500 B. C.	No concept of sexual orientation and no stigma
1 – 700	Sexual repression. Sexual behaviour to be expressed only in marriage for procreation.
1869	Dr. Karoly Benkert, uses “homosexuality” to describe same-sex acts.
1871	German Criminal Code declares same sex acts between men as a crime, therefore a basis for Nazi persecution.
1900 – 1930	“Gay” is used in the homosexual subculture which is developing in the U.S. and Germany. The new feminists and suffragists are stigmatized as “lesbians”. Doctors treat homosexuality as an illness. Freud discovers female sexuality.
1933 – 1944	Thousands of homosexual men are sent to concentration camps after Hitler assumes power. They are forced to wear a pink triangle to identify them (later reclaimed as a symbol of anti-oppression). Few survive.
1948	Kinsey reveals same sex behaviour is more common than was thought. His seven point continuum describes bisexuality as part of the continuum between heterosexuality and homosexuality.
1952	Homosexuals cannot be in public service occupations in the U.S.
1969	Stonewall Riots, New York City. Homosexuality no longer a crime under the Criminal Code of Canada.
1973	American Psychiatric Association removes homosexuality from its list of mental disorders.
1973	American Psychological Association follows.

1974	Homosexuals are no longer barred as immigrants to Canada under the Immigration Act.
1977	Quebec Government introduces sexual orientation as a prohibited grounds for discrimination.
1977 - 1998	All territories and provinces prohibit discrimination on the basis of sexual orientation.
1988	Lesbians and gay men are cited as the most frequent targets of hate crimes in a report by the U.S. Department of Justice.
1989	Denmark becomes the first country to legalize same-sex marriage.
1992	The Ontario Court of Appeal “reads in” sexual orientation to the Human Rights Act. Michelle Douglas wins her lawsuit against the Canadian Armed Forces, which changes its policy of not hiring and promoting gays and lesbians.
1995	The Supreme Court of Canada (Egan and Nesbitt) confirms that discrimination on the basis of sexual orientation violates the Canadian Charter of Rights and Freedoms.
1998	The Ontario government delists Sexual Reassignment Surgery for Transsexuals as a funded service
1999	Same-sex couples awarded the same benefits as commonlaw heterosexual partners, by the Canadian Supreme Court. Children’s Aid Societies, private adoption agencies and licensed domestic and international adoption agencies are expected to provide adoption services in accordance with both the <i>Canadian Charter of Rights and Freedoms</i> and the <i>Ontario Human Rights Code</i> .
2002	Marc Hall wins the right to take his same sex partner to the prom at a Catholic school in Durham Region.
2003	Ontario legalizes same sex marriage.

- 2004 Six provinces in Canada have now recognized same-sex (equal) marriage.
- 2005 (July) Canada became the fourth country in the world to enact legislation providing for marriage for same-sex couples (the others are the Netherlands, Belgium & Spain).
- 2006
- 2010 Current information about the status of same-sex marriage worldwide can be found at

LGBT SYMBOLS OF PRIDE

PINK TRIANGLE – The pink triangle was used in the Nazi concentration camps during World War II to identify homosexual males. Today, for many, the pink triangle represents pride, solidarity and a promise to never allow another Holocaust to happen.

BLACK TRIANGLE – As the pink triangle was used in Nazi concentration camps to identify homosexual males, the Black Triangle was used to identify lesbians, along with other women such as prostitutes, to signify that they did not conform to the Nazi's ideas of correct "female behaviour".

RAINBOW FLAG – The Rainbow Flag was designed in 1978 in San Francisco by Gilbert Baker. This flag is a symbol of LGBT pride and offers a positive, colourful and optimistic alternative to the Pink Triangle. The colours celebrate the diversity of the LGBT community. It is flown with the red strip on the top.

OTHER RAINBOW SYMBOLS – An inverted rainbow is often displayed to identify a positive space for LGBT people. Rainbow T-shirts, bracelets, necklaces, buttons and other articles also demonstrate LGBT pride.

Alfred Kinsey and the Kinsey Scale

From the website of the University of California at Santa Barbara

<http://www.soc.ucsb.edu/sexinfo/article/kinsey-scale>

Alfred C. Kinsey is one of the most influential researchers who have studied sexuality. His interest in sex research began in 1947 at Indiana University. There, he founded the Institute for Sex Research, now known as the Kinsey Institute. Some of his most influential research was directed to homosexuality. Kinsey believed that homosexuality was much more prevalent than had been previously thought. In fact, his findings indicated that 37 percent of males in the US at that time had one or more homosexual experiences. This finding, however, was heavily criticized due to the fact that Kinsey did not use probability sampling. In other words, his subjects were not randomly selected. Because all of Kinsey's subjects were volunteers and many were prisoners, his findings may have been skewed.

Nearly fifty years after his death, Kinsey's research findings are still being discussed today. One of his theories is that people are not just homosexuals or heterosexuals. Kinsey argued that there is a continuum between pure homosexuality and pure heterosexuality. According to Kinsey, some people might be homosexual and lean slightly towards being heterosexual. Similarly, a person could be heterosexual and lean slightly towards being homosexual.

Kinsey's Heterosexual – Homosexual Rating Scale

From the website of The Kinsey Institute for Research in Sex, Gender and Reproduction www.indiana.edu/~kinsey/research/ak-hhscale.html

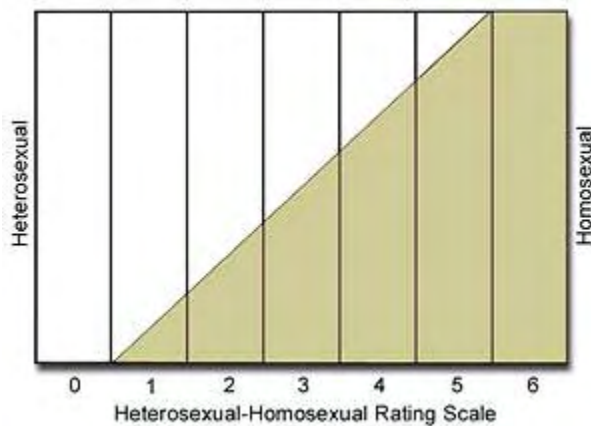
Development of the Scale

“Males do not represent two discrete populations, heterosexual and homosexual. The world is not to be divided into sheep and goats. It is a fundamental of taxonomy that nature rarely deals with discrete categories... The living world is a continuum in each and every one of its aspects, (p 639).

While emphasizing the continuity of the gradations between exclusively heterosexual and exclusively homosexual histories, it has seemed desirable to develop some sort of classification which could be based on the relative amounts of heterosexual and homosexual experience or response in each history... An individual may be assigned a position on this scale, for each period in his life... A seven-point scale comes nearer to showing the many gradations that actually exist". (pp. 639, 656)

Kinsey, et al. (1948). *Sexual Behavior in the Human Male*.

Kinsey Scale



- 0- Exclusively heterosexual with no homosexual
- 1- Predominantly heterosexual, only incidentally homosexual
- 2- Predominantly heterosexual, but more than incidentally homosexual
- 3- Equally heterosexual and homosexual
- 4- Predominantly homosexual, but more than incidentally heterosexual
- 5- Predominantly homosexual, only incidentally heterosexual
- 6- Exclusively homosexual

(Kinsey 1948), p. 638

Problems with the Kinsey Scale

From the BBC website: www.bbc.co.uk/dna/h2g2/A570098

These days, the Kinsey Scale is under fire for being accurate only in a broadly illusory sense. It's certainly interesting how people interpret the scale differently. Is somebody who is a 5 on the scale homosexual or bisexual? What about a person who ranks a 1? Are they bisexual or heterosexual? Interestingly, many people harbour double standards for gay-leaning versus straight-leaning persons. Arguably, this fact may say more about a society's double standards than it does about gay or straight people.

Bisexuality is sometimes misunderstood as being a perfect 3 on the Kinsey scale, but very few people could then rightly be called bisexual. Clearly, keeping up perfect gender symmetry over a lifetime would be taxing and would furthermore require an accountant's accuracy. There are even people who define most of humanity as bisexual, leaving only the perfect 6s and perfect 0s as straight or gay. Again, this isn't particularly fair since it is entirely common to experiment in one's youth until one's orientation is entirely understood. And anyway, there should be at least a little wiggle room for everyone to try different experiences a time or two in their life.

Another problem with Kinsey's use of his own scale was that his studies used past sexual behaviour as the only criteria. A virgin would have no rating at all according to Kinsey because they have had no sexual experiences. Also, a person with only one sexual experience would be automatically placed in the 0 or 6 column. If that person then goes on to primarily have relations with the gender opposite to their first encounter, the initial designation would seem to be a misreading in retrospect.

Also, Kinsey's assumption was that all sexual experiences are undertaken for pleasure and therefore have a direct bearing on sexual orientation. In reality, we know that sexual experiences are undertaken for other reasons. For instance, a lesbian might have an opposite-gender experience in order to procreate. A prostitute might have sex with someone for money whom they would not ordinarily pair up with. People are also sometimes coerced into sex while inebriated or under the influence of drugs that they might refuse while sober. The most distressing violations of Kinsey's assumption are cases of rape and paedophilia. Clearly, Kinsey's methods are only valuable over the course of a lifetime, with a few practical modifications, or with a reasonably large sample of people.

The alternative usually suggested is to include other factors besides past sexual behaviour. These might include sexual fantasies, feelings of romantic love, past relationships and/or dating experiences, and even one's self-identification on the sexual orientation front. The problem is that researchers tend to disagree on which factors should be included and which should not. Some suggested factors require subjective interpretation, which opens the study to personal bias. Furthermore, the factors selected have a huge sway on the researchers' results.

Kinsey's Findings

Kinsey's studies found that about 10% of people (13% of men and 7% of women) in his American studies were homosexual. This was a big change in understanding, since most psychologists and researchers before Kinsey's time assumed that much less than 1% of humans had ever engaged in homosexual experiences. Same-gender sexual experiences had been taboo in Western society since the Middle Ages, and the relatively recent Victorian era rendered almost all sexual topics taboo. While psychologists occasionally spoke to clients who admitted to same-gender acts within the privacy of the doctor-patient relationship, other people tended to avoid such discussions for fear of social condemnation. After Kinsey's studies caused widespread discussion on many previously taboo subjects, it became clear that many socially and mentally healthy people have also had same-gender sex experiences.

However, due to the logistical problems outlined above, other estimations on the percentage of homosexual people have ranged everywhere from 2% to 30% in seemingly valid studies. Meanwhile, estimations of bisexuality are even more variable to the point where the studies can only be cynically diagnosed as completely unreliable. Further complicating things, studies conducted in the same manner with the same variables have shown shifting results as American society has become more accepting of same-sex relationships. It is safe to say that nobody knows for sure what percentage of people are gay, bisexual, or straight.

A Sexual Orientation Worksheet (Klein Scale)

By Ben Roe

If you want to explore your own sexual orientation, here is a simple research instrument that was used by Fritz Klein and others. It is a refinement of the Kinsey Scale which ranked behavior and "psychologic reactions" on a scale from 0 to 6, with 0 being exclusively heterosexual, 6 being exclusively homosexual, and 3 being equally homosexual/heterosexual.

Klein wanted to test his idea that sexual orientation was a "dynamic, multi-variable process," so he developed the Klein Sexual Orientation Grid. He thought that an individual's sexual orientation was composed of sexual and non-sexual variables which differed over time. There are

“three variables which directly describe the sexual self (attraction, fantasy, and behavior), three which describe aspects considered crucial to the composition of sexual orientation (emotional preference, social preference, and heterosexual or homosexual lifestyle), and also the variable of self-identification.”

This form can be used privately for your own reflection or in a sharing group, or in less personal educational settings. You may make a copy of the Grid with the scales and explanatory text and then fill it out. Following the presentation of the instrument is a series of things to think about or explore in a group.

The following text closely follows that of the Klein article.

Klein Sexual Orientation Grid

Variable	Past	Present	Ideal
A. Sexual Attraction			
B. Sexual Behaviour			
C. Sexual Fantasies			
D. Emotional Preference			
E. Social Preference			
F. Self-Identification			
G. Hetero/Gay Lifestyle			

Scale 1

Other sex only	Other sex mostly	Other sex somewhat more	Both sexes equally	Same sex somewhat more	Same sex mostly	Same sex only
1	2	3	4	5	6	7

Scale 2

Hetero only	Hetero mostly	Hetero somewhat more	Hetero/ Gay	Gay somewhat more	Gay mostly	Gay only
1	2	3	4	5	6	7

A. Sexual Attraction

In this grid, you will be choosing three numbers, one for each of three aspects of your life: your past, your present, and your ideal. Beginning with your past (up to a year ago), ask yourself where you fit on this scale and select the number that best describes you. Write this number in the corresponding box marked "past" on the line for Variable A (Sexual Attraction) on the grid. Then select a number that describes your present sexual attraction using the preceding year as the time period you consider. For a number of people it is the same number; for others it is different. Write this number in the box marked "present" on the line for Variable A. Now ask yourself which number you would choose to be if it were a matter of choice or will. Remember there are no right or wrong numbers. When you finish writing this last number in the box marked Ideal for Variable A on the grid you should have completed the three boxes for Variable A.

B. Sexual Behavior

Here we look at actual behavior as opposed to sexual attraction. With whom do you have sex? Use the scale to rate yourself. As with the previous scale, choose a number for past, present, and ideal sexual behavior, then enter the numbers on the grid, this time under Variable B.

C. Sexual Fantasies

The third variable is sexual fantasy. Whether they occur during masturbation, while daydreaming, as part of our real lives or purely in our imaginations, fantasies provide insight. Rate yourself on the scale, and then enter the numbers on the grid.

D. Emotional Preference

Our emotions directly influence, if not define, the actual physical act of love. Ask yourself if you love and like only the opposite sex or if you are also emotionally close to the same sex. Find out where you fit on the scale; rate yourself as with the other scales. Enter the numbers on the grid.

E. Social Preference

Though closely allied to emotional preference, social preference is often different. You may love only women but spend most of your social life with men. Some people, of all orientations, only socialize with their own sex, while others socialize with the opposite gender exclusively. Where are you on the scale?" Choose three numbers as you have on the other scales.

F. Self-Identification

Your sexual self-identification is a strong variable since self-image strongly affects our thoughts and actions. In several cases, a person's present and past self-identification differs markedly from their ideal. Choose three numbers on Scale 2 and fill in the numbers on the grid.

G. Heterosexual/Homosexual Lifestyle

Some heterosexuals only have sex with the opposite sex but prefer to spend the majority of their time with gay people. On the other hand, homosexual or bisexual persons may prefer to live exclusively in the gay world, the heterosexual world, or even to live in both worlds. Lifestyle is the seventh variable of sexual orientation. Where do you tend to spend time and with whom? Choose three numbers on Scale 2 as you have on the other scales and enter them on the grid.

Bobbi Keppel is a social worker who used this grid in educational workshops. She and Alan Hamilton write, "New concepts and new research offer opportunities to change the way people understand and conceptualize sexual orientation."^[4] They have found that using this type of exercise has helped people "to ask questions and discuss sexual orientation more easily." In their paper, they present the grid as a set of scales which form a 3-dimensional stack of cards or block. (She also adds "Political Identity," "Physical Affection Preference," and "Community Affiliation" as additional scales, replacing "Hetero/Gay Lifestyle.")

They write that it is helpful to start with an introduction of the Kinsey Scale as the first opportunity to reconceptualize sexual orientation. This scale was the main influence towards reconceptualization of sexual orientation for many years. Klein, Sepekoff and Wolf's work offered the opportunity to broaden understanding even further.

The element of time is more explicit in the Klein Grid, and the addition of the Ideal allows consideration of intention and the future. Taking all of the scales or grid locations as a whole gives a picture of one's sexual orientation over time and can be helpful in discussing the concept as well as "identifying commonalities and differences."

If you are doing this exercise alone, try to reflect on how your "constellation" of ratings differs from that of someone you know well, a close friend or partner. If you are in a small study group with a high enough level of trust, those who are comfortable sharing their choices may do so. It will become clear that even those who share the same self-identification differ in their makeup in interesting ways. Similarities will also emerge, not only between those who share self-identifications but between those who identify differently.

Keppel and Hamilton write, "Sexual identity (how people think of themselves) sometimes has little to do with their sexual behavior. Three different people may have the same distribution of sexual behavior in the past and/or present, but have three different sexual identities: homosexual, bisexual, or heterosexual." Those who identify as heterosexual may not have the exact same behavior, or those who identify as bisexual may not have the same lifestyle, as another example.

Be observant of how people's identity, behavior, or fantasies may change over time. Research such as Klein's and the experience of many people shows significant fluidity in self-identification. Keppel and Hamilton observe,

Many people were sure that they would be, for instance, heterosexual all their lives, but discovered later that they no longer were. It there behooves one to treat others as one would like to be treated, regardless of one's current sexual identity, as one's sexual identity may change.

As you reflect on any fluidity in your own ratings (or those shared with you), also reflect how your particular self-identification and self-understanding was valid for you at each particular time of your life.

Also note how one's community of support (or lack thereof) can influence one's self-identification or identity. Someone may identify as homosexual or heterosexual, for example, where there is no support for being bisexual. Some may even identify as heterosexual where there is no support for being bisexual or homosexual.

One of the main outcomes of using this grid can be to illustrate that there is not just one sexual orientation: heterosexual; that there are not just two sexual orientations, heterosexual and homosexual; and even that there are not just three sexual orientations, heterosexual, homosexual and bisexual, but indeed a whole range of complex, interacting, and fluid factors in our sexuality.

If you use this grid in a larger group, it may be helpful to have people share in groups of 6 or 8, or perhaps only take the worksheet home to fill out and think about.

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<http://members.tde.com/ben/kleingrid.html>

LEGISLATION

Sexual Orientation

What Protection Exists Under the *Ontario Human Rights Code*?

“The Ontario *Human Rights Code* (the “Code”) is a law that provides for equal rights and opportunities and recognizes the dignity and worth of every person in Ontario. The *Code* makes it against the law to discriminate against someone or to harass him/her because of sexual orientation or same sex partnership status. “Same–sex partnership status” means living with a person of the same sex in a conjugal relationship.

This right to be free from discrimination and harassment applies to employment, facilities, accommodation and housing, contracts and membership in unions, trade or professional associations.

This means that a person cannot be treated unequally or subjected to harassment in these areas because he or she is gay, lesbian, heterosexual or bisexual. It is also illegal to discriminate because someone is in a same-sex relationship.”

Harassment

Harassment and inappropriate comments and behaviour are often rooted in one person’s attempt to exert power over another. The comments or behaviour are known or should be known to be hurtful to another. A person could be targeted because of known or perceived sexual orientation or gender identity. Even if sexual orientation is not mentioned in the jokes or comments, the language or behaviour directed to the individual could still be considered harassment.

Poisoned Environment

A poisoned environment exists when there is unequal treatment for one person or a group. It can affect a person’s sense of safety and work performance. The impact on the individual, rather than the number of times the behaviour occurs, determines whether the environment is poisoned.

An individual who hears or observes unequal treatment towards another also experiences a poisoned environment. This person may be upset about the treatment of another, especially if management does not react affirmatively in a timely manner. That individual may also fear being targeted in some way and productive work performances and relationships may suffer.

For more information:

1. Ontario Human Rights Code

http://www.ohrc.on.ca/en/issues/sexual_orientation

<http://www.ohrc.on.ca/en/resources/Policies/SexualOrientationPolicyEN>

http://www.ohrc.on.ca/en/issues/gender_identity

<http://www.ohrc.on.ca/en/resources/policies/PolicyGenderIdent>

2. Canadian Charter of Rights and Freedoms

<http://www.efc.ca/pages/law/charter/charter.text.html>

Gay, Lesbian, Bisexual and Transgender Health Care Consumer's Bill of Rights

Gay, lesbian, bisexual and transgender people of all ages have the right to full and equal access to all health care services, in a supportive environment, where it is safe for them and for their families to be out to their providers if they choose to do so. They have the right to health care services that are comprehensive, medically appropriate and culturally competent. In order to ensure their access to quality health care, gay, lesbian, bisexual and transgender people of all ages have the right:

- (1) to confidentiality of their medical records, including confidentiality about their sexual orientation and gender identity;
- (2) to have their families recognized, acknowledged and respected by all health care providers;
- (3) to be treated in a health care environment that uses culturally appropriate language, including culturally appropriate intake and other written forms;
- (4) to have case management and treatment plans that include and address sexual orientation and gender identity where it is a necessary and appropriate issue in client care;
- (5) to be included and have their needs addressed in prevention and other public health programs;
- (6) if a minor, to safe and confidential medical treatment, to be informed of their legal rights, and to be advised of the possibility and possible consequences of mandated reporting.

Developed by The GLBT Health Access Project, Massachusetts Department Of Public Health

Positive Space

Positive Space and LGBT Cultural Competency in the Workplace

What is Positive Space?

“Positive Space” is a program that was developed at the University of Toronto in 1996 and has spread to most universities in Canada. Positive Space refers to an agency that is open and welcoming, as well as equitable and accessible to persons of all sexual and gender diversities, both to clients and employees of the agency. The term also refers to an agency in which all staff have been trained to understand the issues around sexual and gender diversity and are familiar with human rights, diversity and resources.

What is LGBT Cultural Competency?

Cultural competence is a framework for working in cross-cultural situations. By being culturally competent, people have the ability and willingness to interact effectively with individuals and groups of the same and different cultures. Cultural Competence can also be defined as “an individual’s ability to respect each person’s uniqueness” (Fusti et al, 2003). This same framework can be applied to diversity related to sexual orientation and gender identity.

Why should we consider providing sexual diversity training independent of diversity training?

Awareness of different kinds of diversity is important in any organization, as is training to raise awareness and change behaviour. The focus of this manual is sexual diversity. Sexual diversity recognizes differences in sexual orientation, expression, gender roles, and gender identity. All of these components are integral parts of a person. There are many processes and experiences common to all minority groups and these include such things as stereotyping, tokenism, attribution effects and discrimination. Other common processes and experiences are being excluded from formal and informal developmental relationships and networks as well as harassment. There are some processes and experiences that are unique to sexual diversity (Ragins, 2004).

Challenges Unique to LGBT People

Bell Rose Ragins (2004) identifies three challenges unique to LGBT persons; these are challenges not experienced by other minority groups.

1. *Sexual orientation as an invisible stigmatized identity*

When stigma is invisible, many challenges are created. One challenge involves disclosure. When a person discloses their sexual orientation, the individual may only disclose to a select few. Once one person is told however, there is no control over where the information goes.

Another issue with disclosure is disclosure disconnect. This occurs when people are out at home and not at work or vice versa. This disconnect can lead to sexual identity conflict. When sexual orientation is invisible, others in the workplace may assume all staff is heterosexual. LGBT employees are then at risk for indirect discrimination. There is also the risk of backlash when minority sexual orientation is revealed or discovered. Other employees, who do not appreciate what it is like for LGBT employees, may feel deceived or misled.

“Coming out never feels voluntary when people ask about your personal life.”

“What compelled me to come out was a feeling of severe anguish and desperation; I had nothing to lose.”

2. *Negative Co-worker reactions*

People who perceive sexual orientation to be a choice or lifestyle, or who have a strong emotional reaction to it may add to negative reactions to LGBT employees. Discrimination and exclusion may follow. The work environment may be negative or even toxic to LGBT individuals. If someone has not yet disclosed sexual identity, this individual may not be willing to do so in this kind of toxic environment.

“When the staff is homophobic, it is still tolerated in some ways. People say that’s their religion or ‘they don’t understand’. We would not accept an employee being racist – why do we excuse it when they are homophobic?”

“I had one anti-homophobia session where I was verbally harassed.”

3. Social Support and challenges in Identity Development

In the case of other minorities, support is often received from family and friends in the development of their identity. This may not be the case for LGBT individuals. Often their family may reject them and shame them. Society may not support their identity development either. Often social and educational institutions become places for further rejection and even hate crime.

“The onus is on me to continue education. The onus should not be on the one who is marginalized and experiencing the difficulty.”

Why be a LGBT Culturally Competent Organization?

Besides being a human rights issue and the fact that it is a fair and just thing to do, there are other reasons to have a workplace that is LGBT culturally competent. A supportive work environment can improve recruitment and retention of employees (HRC/Business Case, 2003). This issue is significant as it allows companies to attract the best personnel. Retention can be cost effective; the cost of recruiting new employees has been estimated to be as high as \$75,000 (Kirby and Richard, 2000).

When staff know the workplace is supportive of diverse sexual orientations and expressions, they are better employees. According to Winfield and Spielman (2001, p. 17) “In order for people to be the best they can be, to live and work up to their potential, they must be able to freely be who they are and use to the fullest extent possible the hand that they are dealt...If we are spending more time hiding our orientation from our co-workers than we are thinking about the tasks at hand, then we are short-changing not only our employers and our team-mates, we are also short-changing ourselves.”

In LGBT culturally competent organizations, productivity is increased. If employees are obliged to keep their sexual orientation secret because of the workplace climate, motivation and productivity may suffer (HRC/Business Case 2003). According to Dansky, Weech-Maldonado, De Souza and Dreachslin “culturally diverse organizations outperform their more homogeneous counterparts” (2003, p.243). Winfield and Spielman capture the effect on employees who do not work in LGBT culturally competent organizations when they state, “The lack of trust that results from lack of honesty and continual suppression of a person’s self will affect the productivity of the work group and eventually the entire organization” (2001, p.40)

LGBT culturally competent workplaces have a positive impact on LGBT employees' attitudes and morale. Employees who feel comfortable being "out" in the workplace may be more committed to the organization and experience less conflict and role ambiguity (Griffith and Hebl, 2002). Where diversity is valued, there is less discrimination and that can lead to a positive impact on attitudes and morale (Ragins and Cornwell, 2001).

Workplaces where LGBT cultural competence is valued are at a competitive advantage compared to those workplaces that do not value this kind of diversity. Within diverse organizations, there are many more perspectives to draw from and creativity and innovation may also be increased (Kirby and Richard, 2000). Companies that value diversity can also gain a competitive advantage, as they are better able to tap into other markets.

Supporting LGBT cultural competence is about more than policies, although policies are an important part. The company must demonstrate it values all employees, by encouraging staff to bring same sex partners and spouses to company events and celebrating the events in the lives of LGBT staff that one would celebrate with heterosexual staff (weddings, children, etc.). By valuing all staff, workplaces demonstrate a deeper commitment to diversity. Completing training and becoming a LGBT culturally competent organization provides the privilege of self-identification as a "Positive Space". A "Positive Space" sticker or logo can then be displayed at the agency or in the areas of the agency that are Positive Spaces.

How to Achieve LGBT Cultural Competency

1. Form a group of individuals interested in promoting GLBT cultural competency. It may include allies of GLBT individuals, GLBT staff, and ideally someone in a management role.
2. Use the assessment tool included in this binder to identify what you need to continue to do and what you need to change.
3. Provide training activities as part of yearly training and new staff orientation.
4. Display the rainbow triangle/sticker where appropriate, after staff is trained and able to provide service to clients and other staff in a GLBT culturally competent manner.

We wish to thank the employees of Ontario Health Units who allowed us to use their experiences in the italicized quotes above.

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Assessing your Workplace

Creating a Positive Space in Public Health Units, Community Health Centres and Community Agencies in Ontario

“Positive Space is a program that was developed at the University of Toronto in 1996 and has spread to most universities in Canada. “Positive Space” refers to an agency that is open and welcoming, as well as equitable and accessible, to persons of all sexual and gender diversities, both as clients and employees of the agency. It also refers to an agency in which all staff have been trained to understand the issues around sexual and gender diversity and are familiar with human rights, diversity, and resources.

Recognizing the value and importance of staff diversity lays the foundation for an organization that calls itself a “Positive Space.” Inclusive personnel policies and practices create the framework to support a Positive Space.

Developing behaviours, attitudes, policies and practices that enable Public Health Units, Community Health Centres (CHCs) and Community Agencies to provide safe, welcoming and appropriate health and social services to gay, lesbian, bisexual, transsexual, transgender, two-spirit, intersex, queer and questioning persons is another component of Positive Space.

Pride symbols, such as a Pride flag are often displayed to demonstrate that a workplace is a “positive space.” However, there are some responsibilities that accompany the displaying of a Pride symbol:

- Providing a welcoming and inclusive atmosphere for people of all sexual orientations and gender identities
- Providing a venue for inquiry and expression of sexual orientation and gender issues
- Providing referrals to community resources for issues pertaining to sexual orientation and gender identity
- Advocating for youth, parents, employees and community members on matters related to gender identity and sexual orientation

In addition, the Public Health Alliance for Lesbian, Gay, Bisexual, Transsexual, Transgender, Two- Spirit, Inter-sex, Queer and Questioning Equity, a workgroup of the Ontario Public Health Association recommends that workplaces also need to assess their level of cultural competence regarding LGBTTTTIQQ persons in order to call the workplace a “Positive Space.”

Cultural competence is both individual and organizational. We recommend that employees of an agency work towards individual competence, while the organization puts in place policies and procedures that endeavour to achieve organizational cultural competence.

The next section of this manual includes a Personal Assessment Tool, developed by the workgroup and a Workplace Assessment Tool adapted from the GLBT Cultural Competence Project, Ottawa 2004. Together these tools present a framework for use in workplaces in order to assist them to develop cultural competency around LGBTTTIQQ issues, and thus become “Positive Spaces.”

LGBT Inclusivity - Personal Assessment Tool

This tool was created by the Public Health Alliance for Lesbian, Gay, Bisexual, Transsexual, Transgender, Two-Spirit, Intersex, Queer and Questioning Equity for the use by staff in Public Health Units and Community Health Centers. It is not “scored” because all of us need to assess ourselves continually because we exist in a heterosexist* society. We are all a “work in progress” and it is alright to say “no” or “not sure”. No one has achieved complete freedom from heterosexism. Please adapt it with credit and circulate and use it far and wide.

Please answer “Y” for Yes, “N” for No, “IP” for In Progress or “NS” for Not Sure

I have an equal rights statement posted in my work area (e.g. “positive space” sticker).	Y N IP NS
I am honest about the limits of my understanding of sexual orientation and gender diversity.	Y N IP NS
I endeavour to use inclusive language such as “partner” instead of “girlfriend/boyfriend” or “wife/husband”.	Y N IP NS
When providing individual or group services, I use questions and comments that are inclusive of all sexual orientations and gender identities.***	Y N IP NS
I treat people of all sexual orientations and gender identities as individuals with many roles and identities.	Y N IP NS
I ask questions to understand the personal lived realities of others.	Y N IP NS
I review forms, histories, posters, etc. regularly for inclusivity and appropriate language.	Y N IP NS
I keep a list of resources for people who are lesbian, gay, bisexual, transsexual, transgender, two-spirit, intersex, queer or questioning.	Y N IP NS
I post positive images and posters of sexual orientation minorities and gender diverse people.	Y N IP NS
I am comfortable working with co-workers of all sexual orientations and gender identities.***	Y N IP NS
I am comfortable working with clients and communities of all sexual orientations and gender identities.***	Y N IP NS
I would feel comfortable if my manager were lesbian, gay, bisexual, transsexual, transgender, two-spirit, or intersex.	Y N IP NS
I utilize opportunities for ongoing training on sexual orientation and gender identity issues.	Y N IP NS
I understand how homophobia, biphobia, transphobia** and monosexism**** relate to other oppressions such as racism and sexism.	Y N IP NS
I monitor my attitudes, values, behaviours and practice for discrimination based on sexual orientation or gender	Y N IP

identity.***	NS
I examine my own beliefs for heterosexism.*	Y N IP NS
I recognize that a person's appearance, actions or words may not be reflective of that person's sexual orientation or gender identity***, and I avoid making assumptions based on these characteristics.	Y N IP NS
I understand that people may engage in sexual activity that is not consistent with their sexual identity.	Y N IP NS
I monitor my values and language for generalizations, re: sexual orientation and sexual identity.	Y N IP NS
I can recognize discrimination by association. (e.g. discrimination against heterosexuals who support the rights of sexual minorities)	Y N IP NS
I have been/or would be accepting of an LGBTTTTIQQ person coming out to me.	Y N IP NS
I am aware of the laws and personnel policies concerning sexual orientation and gender diversity.	Y N IP NS
I am aware that the presenting problems of lesbian, gay, bisexual, transsexual, transgender, two-spirit, intersex, queer and questioning clients may not be related to sexual orientation or gender identity.***	Y N IP NS
I utilize an anti-oppression framework in my practice. (e.g. acknowledging the privilege society bestows on some groups)	Y N IP NS
I monitor my own and others' double standards, qualifying statements and value judgements.	Y N IP NS
I advocate for policies that include non-discrimination related to sexual orientation minorities and gender diverse persons.	Y N IP NS
I encourage education about sexual orientation and gender identity*** in my workplace.	Y N IP NS
I work to safeguard the rights of sexual orientation and gender diverse minorities.	Y N IP NS
I confront statements and jokes that discriminate or make fun of gays, lesbians, bisexuals, transsexuals or two-spirit people.	Y N IP NS
I challenge gender stereotypes.	Y N IP NS

* heterosexism – the assumption that all people are or should be heterosexual. Heterosexism is often a subtle form of oppression that silences and makes invisible sexual orientation and gender identities minorities and gives privilege to heterosexuals.

** homophobia, biphobia, transphobia – prejudice, discrimination or oppression against sexual minorities such as gays, lesbians, transsexuals, transgenderists, two-spirit people or those who are attracted to more than one sex/gender

*** gender identity – a person's identification of being male, female, intersex, masculine, feminine, transgender or transsexual****

monosexism – commonly held set of beliefs that exclusive heterosexuality or homosexuality are superior to a bisexual or pansexual orientation

Workplace Assessment Tool

Please answer “Y” for Yes, “N” for No and “IP” for In Progress

1. GOVERNANCE:

There are actively “out” Board of Govenors or Board of Health Members.	Y N IP
LGBTTTIQQ members are actively recruited by the Board of Governors or Board of Health.	Y N IP
A non-discrimination statement is visibly posted in all areas of the workplace, stating that equal care will be provided to all, regardless of age, race, ethnicity, physical ability or attributes, religion, sexual identity and gender identity.	Y N IP
Members of the Board of Governors or Board of Health are encouraged to participate in training on LGBTTTIQQ issues to enhance their knowledge of this community.	Y N IP
The Board of Governors or Board of Health consults with stakeholders in the LGBTTTIQQ community during strategic planning.	Y N IP
The Board of Governors or Board of Health advocates on equality issues on behalf of the LGBTTTIQQ community.	Y N IP
The Board of Governors or Board of Health has a process that informs Board members of the agency’s accountability for any employee and client complaints related to discrimination/ harassment related to sexual orientation and gender identity.	Y N IP

2. ADMINISTRATION:

The agency has openly “out” LGBTTTTIQQ managers, supervisory and front line staff.	Y N IP
The agency creates a safe and supportive environment for LGBTTTTIQQ staff to use their expertise to enhance the agency’s cultural competency on LGBTTTTIQQ issues, without being stereotyped as a one-issue person.	Y N IP
Managers are provided training on LGBTTTTIQQ issues and on how to work with the LGBTTTTIQQ community organizations.	Y N IP
Managers ensure staff is implementing the agency’s mission and value statements related to diversity, including sexual orientation and gender identity, regardless of personal values and beliefs of staff.	Y N IP
Managers have the knowledge and skills to address homophobic, biphobic and transphobic comments verbalized by other staff and people who use the agency/centre.	Y N IP
Managers ensure the orientation of new staff includes information and training about the needs of LGBTTTTIQQ clients and available community resources.	Y N IP
The agency considers the needs of the LGBTTTTIQQ community members during program planning, such as the inclusion of LGBTTTTIQQ clients into existing mainstream services and the need for exclusive LGBTTTTIQQ programs.	Y N IP
The agency consults with LGBTTTTIQQ community members about the provision of services needed throughout your agency.	Y N IP
The management has links and contacts on LGBTTTTIQQ issues both within the organization and with community partners.	Y N IP

3. PERSONNEL POLICIES AND PRACTICES:

3.1 Staff Recruitment:

Personnel policies and practices comply with the Canadian and provincial human rights code.	Y N IP
The agency advertises employment opportunities in LGBTTTTIQQ media and through information networks or organizations representing LGBTTTTIQQ people.	Y N IP
The agency recognizes a positive attitude towards LGBTTTTIQQ people as criteria for working in the agency.	Y N IP
All interview guides have a question to assess competency re: diversity issues, including LGBTTTTIQQ.	Y N IP
Staff members reflect the LGBTTTTIQQ community.	Y N IP
“Out” LGBTTTTIQQ staff are employed at all levels of the organization.	Y N IP

3.2 Staff Retention:

The agency is committed to creating an atmosphere of support for LGBTTTTIQQ staff throughout its programs and activities.	Y N IP
The agency has clearly written non-discrimination and harassment policies that explicitly include sexual orientation and gender identity.	Y N IP
The agency recognizes, supports and acknowledges staff members who are actively demonstrating LGBTTTTIQQ cultural competency in their practices.	Y N IP
LGBTTTTIQQ cultural competence skills are included in all job performance evaluations.	Y N IP

3.3 Staff Training:

The agency provides all staff with LGBTTTTIQQ competency training to work effectively with LGBTTTTIQQ staff, clients and community partners.	Y N IP
The agency provides all staff, including The Board of Governors or Board of Health members, with LGBTTTTIQQ sensitivity training.	Y N IP
The agency provides staff with training to recognize bias in organizational and other resource materials.	Y N IP

3.4 Dealing with Incidents of Homophobia, Heterosexism, Biphobia and Transphobia:

The agency has a clear policy statement that encourages inclusive language, behaviours or practices related to sexual orientation and gender identity.	Y N IP
The practice of the agency encourages inclusive language, behaviours and practices related to both sexual orientation and gender identity.	Y N IP
The agency has clear written procedures and practices to deal with incidents of homophobia, biphobia or transphobia.	Y N IP

4. COMMUNICATION:

Promotional materials for agency services and programs are LGBTTTTIQQ inclusive.	Y N IP
The agency has a list of LGBTTTTIQQ media and networks that is developed and used.	Y N IP
The agency includes articles about LGBTTTTIQQ issues and programs in newsletters and reports.	Y N IP
The agency has LGBTTTTIQQ materials, such as newspapers, magazines and brochures in the waiting areas.	Y N IP
The agency displays LGBTTTTIQQ positive signs, such as the Pride flag.	Y N IP
Agency services are advertised through LGBTTTTIQQ organizations and networks.	Y N IP

5. COMMUNITY RELATIONS AND HEALTH PROMOTION:

The agency participates in networks to increase and promote cultural competence.	Y N IP
The agency participates in community networks/coalitions to strengthen and integrate services available to members of the LGBTTTTIQQ community.	Y N IP
The agency participates in community network/coalitions to advocate for LGBTTTTIQQ issues.	Y N IP
The agency includes LGBTTTTIQQ people and their families in all outreach and health promotion activities.	Y N IP
The agency utilizes the expertise of the LGBTTTTIQQ community members to plan, deliver and evaluate programs and services, particularly those directed to the LGBTTTTIQQ populations.	Y N IP

6. SERVICE DELIVERY:

6.1 Confidentiality:

Staff explains to clients how their confidentiality will be protected and who will have access to information.	Y N IP
Staff gives the option of not answering a question if confidentiality cannot be protected, or the client does not wish to respond.	Y N IP
Staff is explicit about how sexual orientation, gender identity and sexual behaviour will be documented.	Y N IP
Staff has the information needed to provide appropriate, safe and confidential care to youth.	Y N IP

6.2 Intake Process and Forms:

All staff members have the knowledge and skills to use LGBTTTTIQQ culturally appropriate language.	Y N IP
Intake forms provide for optional self-identification in all categories of gender identity, sexual orientation, marital and partnership and family status and the option for further written or oral explanation.	Y N IP
Questions about families allow for alternative families, including same sex parents or more than two parents.	Y N IP
Intake forms and consent forms include an explanation about how confidentiality will be protected and who has access to social and medical records.	Y N IP
Intake forms/process offers the client the opportunity to discuss concerns about questions on the intake form.	Y N IP

6.3 Assessment and Work with Clients:

Staff is aware that the presenting problems of LGBTTTTIQQ clients are not always related to sexual orientation or gender identity.	Y N IP
Service providers are aware of the societal prejudice and discrimination that LGBTTTTIQQ members experience and are able to assist them in overcoming internalized negative attitudes toward their sexual orientation or gender identity.	Y N IP
Service providers disclose their own sexual orientation if appropriate and relevant.	Y N IP
Service providers include violence screening questions in all assessments in a gender-neutral way without assuming an opposite sex partner.	Y N IP
Staff assess for prevalent risk factors in the LGBTTTTIQQ community such as social isolation, harassment, depression, suicide ideation, substance use.	Y N IP
The agency has a resource list for appropriate referrals for LGBTTTTIQQ health concerns.	Y N IP
Students who are placed with the agency have an opportunity to learn about LGBTTTTIQQ issues.	Y N IP

Staff members feel free to ask LGBTTTTIQQ clients about an aspect of their lives they may not fully understand.	Y N IP
Service providers feel comfortable in discussing sexual health issues involving LGBTTTTIQQ clients and use language and questions that include men who have sex with men, women who have sex with women and people who have sex with both men and women.	Y N IP
Staff are aware that the concept of “coming out” is a life long process for LGBTTTTIQQ people.	Y N IP
Service providers are aware of the term two-spirit, a translation of an aboriginal term for people who have the spirit of a man and of a woman.	Y N IP
Service providers are aware of the myths and misconceptions around bisexuality.	Y N IP
Service providers are aware of the issues faced by transsexuals, including how to obtain sex reassignment surgery, hormones, etc.	Y N IP
Services are aware of options for LGBTTTTIQQ clients to become parents, such as LGBTTTTIQQ positive adoption agencies, artificial insemination, etc.	Y N IP

6.4 Group Work with Clients:

Service providers establish group norms that facilitate the safety and inclusion of participants from diverse communities such as the LGBTTTTIQQ community.	Y N IP
In working with groups, staff creates a climate that allows for voluntary self-identification and self disclosure for LGBTTTTIQQ clients.	Y N IP
Service providers intervene when homophobia, biphobia or transphobia threatens members’ safety or integrity.	Y N IP

7. PHYSICAL ENVIRONMENT:

The agency has a non-discrimination statement that is displayed in a visible area for all staff and clients to see. This statement includes gender identity and sexual orientation.	Y N IP
Posters showing LGBTTTTIQQ people are displayed in a visible area for clients and staff to see.	Y N IP
The agency displays the Rainbow flag in visible areas.	Y N IP
LGBTTTTIQQ-specific media including any local papers, brochures, newsletters are displayed in waiting areas.	Y N IP
The agency includes one gender-inclusive washroom that is clearly labelled for both staff and clients.	Y N IP

8. ORGANIZATIONAL CULTURE:

The agency is responsive to the issues of LGBTTTTIQQ cultural diversity and designs programs and services that reflect this client population.	Y N IP
The agency has openly identified LGBTTTTIQQ clients.	Y N IP
The agency has openly identified LGBTTTTIQQ Board of Governors or Board of Health members, staff members, volunteers and management.	Y N IP

PERSONNEL POLICIES AND PRACTICES

The LGBTTTTIQQ Positive Space Workplace Assessment Tool lists indicators related to personnel issues in the categories: Staff Recruitment, Staff Retention, Volunteer Recruitment, Staff and Volunteer Training, Dealing with Incidents of Homophobia/Heterosexism, Biphobia, or Transphobia. These indicators may be formal written practice or current policy; ideally Health Units, CHCs and Community Agencies have both policies and practices to ensure continuity.

Key indicators from the Workplace Assessment Tool lists:

- Recruitment efforts that reach out to the LGBTTTTIQQ communities
- Interview guides for staff, volunteers and placement students that incorporate screening and questions around positive attitudes towards LGBTTTTIQQ persons.
- Anti-discrimination and anti-harassment and diversity policies that include both sexual orientation and gender identity.
- Use of gender-neutral language such as employee, client, community member or person instead of he/she in policies.
- Positive Space indicators included as part of diversity skills for all staff during Performance Evaluation.
- LGBTTTTIQQ employees are subject to the same terms and conditions of employment, including the same benefits and compensation as all other employees.

Examples of “Positive Space” policies and procedures: some of the language that should be included in personnel policies and practices

1. PERSONNEL

1.1 Diversity and Employment Equity

Policy:

The organization is committed to provide services that respond to the diverse needs of the community and support employment equity legislation to ensure equality of treatment and opportunity for all employees and job applicants regardless of age, culture, economic status, gender, *gender identity*, physical ability, race, *sexual orientation* or any other factor unrelated to job performance.

Procedure:

The diversity and employment equity will be taken into account when staffing at all levels of the organization

1.2 Advertising and Recruitment

Policy:

The recruitment process shall be in compliance with the Human Rights Regulations of the Province of Ontario, unless an official request has been made and is granted by the Commission in the interests of a particular *gender* or race.

Procedure:

Efforts will be made to advertise within the catchment area and in the linguistic, ethnic, cultural and LGBTTTTIQQ community.

1.3 Candidate Resume Selection

Policy:

Candidates shall be considered and interviewed based on position requirements.

Procedure:

The Human Resources Manager will ensure that selection procedures do not inadvertently exclude diverse candidates. Diversity reflects age, culture, economic status, gender, gender identity, physical ability and sexual orientation.

1.4 Interviewing

Policy:

Interviews will be conducted to ensure that the most appropriate candidate is selected for the position.

Procedure:

The interview guide will contain questions to assess LGBTTTTIQQ cultural competency.

1.5 Orientation and Training of Staff

Policy:

All new staff must have a formal orientation to their specific program and to the agency as a whole.

Procedure:

The Human Resources Manager will ensure that new staff attends “core” training sessions. Core training includes: Anti-Racism Training, LGBTTTTIQQ Sensitivity and Understanding Violence Against Women.

1.6 Harassment

Policy:

Discrimination on the grounds of ability, family status, gender, *gender identity*, income, race, or sexual orientation.

1.7 Bereavement Leave

Policy:

Bereavement leave may be approved in the case of the death in the employee’s immediate family. “Immediate family” includes: *partner*, child, mother, father, bother, sister, etc.

1.8 Performance Appraisals

Policy:

All employees will receive a performance appraisal by their direct supervisor at the conclusion of their probation and annually thereafter completed by their anniversary date.

Procedure:

The performance appraisal will include an assessment of competence related to providing service to diverse populations. Diverse populations can include individuals and groups of different ages, cultures, economic status, genders, gender identities, physical abilities, races and sexual orientations.

An example would include a section in a performance appraisal titled “**Working with Diverse Individuals and Groups**” and could include such indicators as: *Is sensitive to the special issues and needs of diverse populations. Always uses inclusive language, behaviours and practices and educates others to do the same.*

Under the “Core Elements” of all staff performance appraisals is:

Professional Responsibility and Development

- Demonstrates competence in working with diversity among clients and other staff

For staff that work directly with clients and the community, their performance appraisals should also include as a core element:

Knowledge of priority populations:

- *Has knowledge of the special health and social service needs of priority populations (low income, seniors, LGBTTTTIQQ, socially, emotionally and physically disadvantaged, minority populations, etc.)*
- *Has knowledge of the risk factors (environmental, social/psychological and medical) of priority populations*
- *Has awareness and sensitivity to accessibility issues for these populations*

2.0 Diversity and Employment Equity

Policy:

The organization is committed to provide health and social services that respond to the diverse needs of our community. This will be accomplished by:

- Offering programs and services that are welcoming and accessible to people who face barriers due to background, ethnicity, language, culture, religion, gender, gender identity, sexual orientation, age, disability or economic status.
- Actively recruiting a diverse work force with a variety of life experiences and backgrounds that reflect the different communities we serve;
- Encouraging community members from diverse backgrounds to participate as Board members and program volunteers

Procedure:

An agency may include a statement on diversity:

Diversity Statement

We believe that diversity enriches the communities in which we live and work. The agency celebrates diversity and is committed to creating an inclusive environment where everyone is treated with dignity and respect, regardless of background, ethnicity, language, culture, religion, sexual orientation, gender, gender identity, age, disability or economic status. The agency will work to promote equal opportunities and an environment that is free from discrimination and harassment.

Harassment Prevention

Policy:

Each individual has the right to work in a professional atmosphere that promotes equal opportunities and prohibits discriminatory practices. The agency is committed to providing an environment in which all individuals are treated with respect, dignity and worth. Harassment is considered improper conduct and the agency will take responsibility for ensuring a work environment free of harassment. Each employee of the agency has a role to play in ensuring there is no harassment. The agency is committed to dealing effectively, quickly and fairly with any situation involving claims of harassment that are brought to its attention.

2.2 Anti-Discrimination

2.3

Policy:

The agency is an anti-discriminatory organization committed to the principles of equality, where any client, program, community member, volunteer or staff person sees himself/herself valued in the organization.

Planning Your Workshop

Planning a Positive Space Workshop for your Workplace

If you are not familiar with the process of planning a workshop, section 3.1 of “The Positive Space Workshop Facilitator’s Manual” (available online at <http://www.mystfx.ca/campus/stu-serv/equity/Training%20Manual.htm>) provides a useful framework for planning your workshop.

The manual also includes a needs assessment questionnaire which may be useful in determining the requirements of your group participants.

Raising Awareness/Sensitivity

Name of activity: LGBT Opinion Poll

Objectives:

- to demonstrate to the group what their values and attitudes as a group are

Time:

30 minutes

Materials Required:

- one opinion poll statement sheet for each participant
- one pen/pencil for each participant
- 3 signs for posting – agree, disagree, unsure

Strategy:

1. Post 3 signs around the room in areas easily accessible and where people can gather.
2. Give each participant an opinion poll statement sheet. Request that they not put their name on their sheet. Explain #3 & #4. Have them complete the sheet.
3. Collect, shuffle and randomly redistribute the statement sheets so participants do not have their own sheet.
4. Explain that participants will now respond according to the sheet they were just given, not according to their own response.
5. Read one statement. Participants walk to the sign that reflects the answer on the response sheet they are holding.
6. Starting with one group, ask participants standing there why they think someone would respond that way. Then ask other 2 groups, one by one. Challenge them to defend another person's opinion. Sometimes participants need to be reminded to be non-judgmental/respectful – someone in the group responded that way.
7. Repeat steps 4 & 5 until all statements have been discussed.

Debrief:

- Discussion for each question.

Source/reference: OPHA Public Health Alliance for LGBTTTTIQQ Equity 2006

LGBT Opinion Poll

Please indicate whether you agree (A), disagree (D) or are unsure (U) about each of the following statements:

Sexual behaviour is the same as sexual identity.	A D U
I feel comfortable with gay/lesbian couples showing affection in public.	A D U
It is not possible to be bisexual and monogamous.	A D U
It is okay for a trans woman to go to a shelter that is for women only.	A D U
Transsexuals are cross dressers.	A D U
Bisexual people are just confused and are really either straight or gay.	A D U
A lesbian couple can raise happy, healthy children.	A D U
I would feel uncomfortable at a lesbian/gay social event.	A D U

LGBT Opinion Poll Discussion Points

1. Sexual behaviour is the same as sexual identity.

- sexual behaviour speaks to actions
- sexual identity speaks to self concept
- they can be the same or different

2. I feel comfortable with gay/lesbian couples showing affection in public.

3. It is not possible to be bisexual and monogamous

- myth
- as capable as any other group

4. It is okay for a trans woman to go to a shelter that is for women only.

Most homeless shelters are segregated by sex, and, most shelters, if they accept transgender residents, require that they be housed with members of the sex they were assigned at birth. Transgender women who identify and live as women but were born male report that male residents harass, sexually proposition, and sometimes even assault them. Transgender men who identify and live as men but were born female are sometimes placed in men's shelters that do not have privacy in bathrooms (no stall doors) or in showers. Gender-based dress codes are also a significant problem, especially for transgender youth in shelters who can face discipline for simply dressing according to their own gender identity.

5. Transsexuals are cross dressers.

- cross dressers are people who dress in the clothes of the opposite gender, usually for erotic reasons, often identify as straight
- a transsexual is a person who has an intuitive, life-long conviction that he or she is really of the opposite gender than that assigned at birth and who feels impelled, as far as it is practical, to make her/his body and lifestyle conform to her/his felt gender

6. Bisexual people are just confused and are really either straight or gay.

- myth
- a legitimate orientation

7. A lesbian couple can raise happy, healthy children.

- research has shown that there is no difference in the ability of gay, lesbian and heterosexual parents to raise healthy, happy children

8. I would feel uncomfortable at a lesbian/gay social event.

Name of activity: Attitudes Towards Homosexuality

Objectives

- to identify and explore one's own and society's attitudes towards homosexuality
- to identify steps public health and community health staff and agencies can take to address the negative levels of attitude

Time: 30 minutes

Materials Required:

- one "Attitudes Toward Homosexuality" sheet for each participant

Strategy:

1. Distribute "Attitudes Towards Homosexuality" sheets to participants.
2. Ask participants to read the levels and think about their own level.
3. In small groups, ask participants to determine the level(s) they would place their workplace.
4. Ask small groups to identify concrete steps their workplace could take to attain a higher level of attitude.
5. Ask each small group to share 2 steps with the large group.
6. Collect all steps to share with all staff.

Debrief:

Were there any surprises when people thought about their own level? Their workplace?

Source/reference:

1. Dorothy Riddle, Tuscon Arizona
2. Designing and Delivering HIV/AIDS Training: A Facilitator's Guide. Canadian Public Health Association, March 2003

Attitudes Towards Homosexuality

The Riddle Scale, developed by Dr. Dorothy Riddle, is a model used to understand people's responses towards homosexuality. The scale includes four negative and four positive levels of attitude towards lesbians and gay men.

Negative Levels of Attitude

1. **Repulsion:** Gay people are sick, crazy, immoral and sinful, which justifies changing or eliminating them.
2. **Pity:** Gay men and lesbians are somehow born that way and should be pitied. The goal is to help these poor individuals to be as "normal as possible".
3. **Tolerance:** Homosexuality is viewed as a phase of adolescent development that many people go through and most people "grow out of." Thus, lesbians and gay men must be protected and treated as children. They should not be given positions of authority because they still are working through adolescent behaviours.
4. **Acceptance:** Still implies there is something to accept, characterized by such statements as "You're not a gay to me, you're a person." "What you do in bed is your business", "That's fine as long as you don't flaunt it." ("Flaunt" usually means say or do anything that makes people aware.) This attitude ignores the pain of invisibility, the stress of closet behaviour and denies the social and legal realities with which gay people live.

Positive Levels of Attitude

1. **Support:** Gay men and lesbians deserve legal and human rights. People should treat others fairly, regardless of one's own comfort with homosexuality.
2. **Admiration:** Acknowledges that being lesbian/gay in our society takes strength. This also includes looking at oneself and working on one's own homophobic and heterosexist attitudes.
3. **Appreciation:** Values the diversity of people and sees lesbians and gay men as a valid part of that diversity. This attitude also includes a willingness to combat homophobia in oneself and in others.
4. **Nurturing:** Lesbians and gay men are indispensable in our society. This includes viewing them with genuine affection, acting as an advocate.

Name of activity: Heterosexism and Heterosexual Privilege

Objectives:

- Understand the concepts of heterosexism and heterosexual privilege
- Raise awareness of the subtle and not-so-subtle ways in which LGBTTTTIQQ people experience oppression

Time: 10-20 minutes

Materials Required:

The following handout “Heterosexual Privilege”. (This may be modified or abbreviated to best suit the group).

Strategy:

Elicit from participants their understanding of the term “heterosexism.” Heterosexism may be defined as the assumption that only heterosexual relationships are normal and that they should therefore be privileged. It is the belief that only heterosexuality is natural and universal -- that it's the foundation of society, the basis for all social relationships, “the norm”.

Because of this socially pervasive assumption, heterosexuals experience expected societal privileges which are not extended to non-heterosexuals.

Heterosexual privilege can be processed by:

- eliciting examples from the group
- reading aloud excerpts of or all of the following handout
- providing participants with a copy of the handout to read during the session or as a take-home handout

Heterosexual Privilege

This article is based on “White Privilege: Unpacking the Invisible Knapsack” (Peggy McIntosh, 1988). It was written by students at Earlham College, and modified January 2006 by Karla Stewart, Simcoe Muskoka District Health Unit.

The following are but a few examples of the privilege which straight people have. Lesbian, gay, bisexual, and queer-identified folk have a range of different experiences, but cannot count on most of these conditions in their lives.

On a daily basis as a straight person,

- If I pick up a magazine, watch movies or TV shows, go to the theatre or play music, I can be certain my sexual orientation will be represented.
- I have positive role models of my sexual orientation
- I grew up thinking my romantic feelings towards others were perfectly normal and healthy.
- In everyday conversation, the language my friends and I use generally assumes my sexual orientation. For example, “sex” referring to only heterosexual sex or “family” meaning heterosexual relationships with kids.
- I was able to put pictures of my “crush” up in my locker when I was in high school, and talk to my friends about him / her.
- I do not have to fear revealing my sexual orientation to friends or family. It's assumed, and it has never been associated with a closet.
- I do not have to fear that if my family or friends find out about my sexual orientation there will be economic, emotional, physical or psychological consequences.
- When I talk about my heterosexuality (such as in a joke or talking about my relationships), I will not be accused of pushing my sexual orientation onto others.
- I am not accused of being abused, warped or psychologically confused because of my sexual orientation, or of wanting to recruit others (particularly children) into my lifestyle.
- I am never asked to speak for everyone who is heterosexual.
- I am not asked why I chose my sexual orientation, or why I made my choice to be public about it. I don't have to defend it, and nobody tries to convince me to change it.
- I do not need to worry that people will harass me or assault me because of my sexual orientation
- I can go for months without being called straight, nobody calls me straight with maliciousness, and people can use terms that describe my sexual orientation as a positive (e.g. "straight as an arrow", "standing up straight" or "straightened out") instead of a negative (ie. "ewww, that's gay" or being "queer").

- I'm not grouped because of my sexual orientation.
- People do not assume I am experienced in sex or am sexually promiscuous (or that I even have sex!) merely because of my sexual orientation.
- I can choose to not think politically about my sexual orientation.
- I can easily find a religious community that will not exclude me for being heterosexual.
- I can count on finding a therapist or doctor willing and able to talk about my sexuality.
- I can be sure that if I need legal or medical help my sexual orientation will not work against me.
- I can walk hand-in-hand in public with my partner, or kiss him / her goodbye at the airport and not have people stare at us, talk about us, or harass, insult or assault us.
- I can talk freely to others about my relationship with my partner, our vacation or our plans for the future.
- I can marry my partner without public controversy, and enjoy all the social, legal and financial benefits that go along with being married.
- My partner and I can find appropriate anniversary cards for each other in any store.
- My partner and I can attend family functions together, and my partner is included in family photographs.
- My partner and I can easily find appropriate housing, and we can expect that our neighbours will be friendly or at least neutral toward us.
- My partner and I can comfortably purchase a "couples membership" at a gym or fitness centre.
- I am easily able to find sex education literature for couples with my sexual orientation.
- My partner and I can adopt children, or have children by in vitro fertilization or artificial insemination, without being criticized and without our motives being questioned.
- My partner and I can parent our children without threat of intervention by child protection agencies based on our sexual orientation.
- I do not have to worry about telling my co-workers about my sexuality. It is assumed I am a heterosexual.
- I can be pretty sure that my co-workers will be comfortable with my sexual orientation.
- I can go home from work without feeling excluded, fearful, attacked, isolated, outnumbered, unheard, held at a distance, stereotyped or feared because of my sexual orientation.
- I can be sure that reference materials used in my work setting reflect the existence of people with my sexual orientation.

- I am guaranteed to find people of my sexual orientation represented in my workplace.
- I can be open about my sexual orientation without worrying about my job.
- I am not identified by my sexuality in my workplace (e.g.: “that heterosexual nurse”).
- If my partner were to die, I would have paid bereavement leave from my job. My name would automatically be included in the obituary as his/her survivor.

Name of Activity: Numbers Exercise

Objective: To sensitize participants to the social isolation that many people feel who are in the minority because of sexual orientation and/or gender identity.

Time: 10 minutes

Materials:

Cards with pairs of numbers (i.e. 2 cards with the number “1” written on them, 2 cards with the number “2”, etc.) on the other side of each card will be the following instructions:

- Do not let anyone else see this side of your card.
- Find the person who has the same number as you.
- Tell the person about the most recent movie you saw.
- Do not speak to anyone else.

2 cards will have different numbers on them and will have the following instruction on the other side:

- Join one of the groups.
- Tell them about the most recent movie you saw.

Strategy:

- Hand the cards out and allow the group 5 minutes to find each other and complete the instructions.
- Ask people who were in pairs how they felt during the exercise.
- Have the group reassemble.
- Have them read the instruction on their card.
- Ask the “isolated” people to talk about how they felt and have them read the instructions on their card.

Source:

TV Ontario 1988

Name of activity: The Name Game

Objectives: to identify labels and stereotypes of the LGBT community to identify themes, issues and fears that emerge from these issues

Time: 15– 20 minutes

Material Required: flip chart, markers

Strategy & Debrief:

Step 1

- Draw a circle on the flipchart with “LGBT” in the centre
- Ask the group to define this acronym
- Brainstorm names & stereotypes that individuals have heard. Encourage the negative words too.
- Write the words around the circle & draw spikes to connect them to the circle. Discuss the meaning of any words of which the participants are uncertain. E.g. fag, queer, pouf, dyke, butch, fence-sitter, on the down low

Step 2

- On a second piece of paper, write the word “heterosexual” in the circle.
- Repeat the process

There will be fewer words but a few may be “straight” “breeders” or “het”

Step 3

Discuss how language shapes our thoughts & feelings about sexual orientation & gender identity using the following questions. (Make sure to correct misinformation.)

1. Are more words used to describe LGBT people or heterosexual people? Why?
2. Are there more positive words for LGBT people or for heterosexual people? Why?
3. Are there themes that emerge? (You may highlight the themes with colours.) (Note “masculine” vs. “feminine”, messages about women as a greater number than about men, more words for gay men than lesbians)
4. What norms or rules do we receive from society about the traditional roles of men and women? Connect homophobia to sexism. (e.g. follow traditional roles, men are allowed to be sexual).
5. What have we learned about how we are to look and behave to avoid labels & discrimination? (e.g. look like & act like the sex you are as determined by your culture)

Step 4

Using a different coloured marker, cross out LGBT and write ME. Brainstorm feelings the group would have if faced with these stereotypes and discrimination.

Step 5

If it fits with your next objective, brainstorm how an individual might feel in your workplace.

Step 6

Discuss how language is being “reclaimed”. Point out that these terms should be used cautiously by people who are not part of these communities. (e.g. queer, dyke, fag).

Source/Reference:

adapted from:

The Positive Space Workshop Facilitator’s Manual. “The Name Game” 2005, p. 35, 36

Breaking Barriers through Education “The Porcupine Game” March 2000, Appendices

Name of Activity: The Barnyard Game

Objective: The group experiences what it is like to be in a minority group

Time: 10 minutes

Materials Required: none

Strategy:

- Have people stand in a circle.
- Explain that you are going to whisper an animal in their ear.
- Randomly whisper “cow” in most people’s ear, whisper “pig” in less than most, “cat” in only a few and “bird” in only one person’s ear.
- Ask the group to close their eyes and make the sound of the animal. Ask them to walk around and link arms with other like animals.
- Allow them to do this for a few minutes or until you notice the like animals are all together.
- When done, ask the group to discuss their experiences being their particular animal. Start with the largest group.

What was it like when you found out there were a lot of cows? How did you feel when you found your first cow? How did you feel when you found your first pig? How did you feel when you found your first cat? What was it like when you realized there were only a few other cats? When you realized you were the only bird, how did it make you feel?

Explain that being the bird or cat can be somewhat representative of being LGBT. They are sometimes tempted to join the majority in order to feel less alone or isolated and more accepted.

Source: unknown

Name of activity: Coming Out Star

Objectives:

- to “walk in the shoes” of a LGBT person who is “coming out”
- to understand the reality of loss for LGBT people

Time: 45– 60 minutes

Materials Required:

- one 5-point star for each participant in 4 different colours – equal numbers of blue, yellow, red and green
- pen/pencil for each participant

Strategy:

Have participants arrange all the chairs in a circle.

Script for the following steps follows.

1. Prepare the stars for the activity.
2. Lead participants through the challenges involved in “coming out”.
3. Discuss people’s reactions to the risks and losses associated with coming out.

Debrief: see step 3 of strategy

Source/reference:

Positive Space Training Manual, Antigonish Women’s Association and the Office of Equity and Community Issues, St. Francis Xavier University

Coming Out Stars Script.

Step 1: Prepare the stars for the activity.

Pass out blue, yellow, green and red stars, one for each person. Try to distribute approximately the same number of stars for each colour.

Tell participants how to prepare their stars. Say:

1. Write your name in the middle of the star.
2. Think about a friend who is very close to you, who you care about very much. Write your friend's name on one of the points.
3. Think of a specific family member (chosen or biological) you turn to in times of need or for advice, someone who cheers you up when you're sad, or who has made a big impact on your life. Write this person's name on a star point.
4. Think of a community group that you belong to, a religious community, a neighbourhood etc. Write the name of this group on a star point.
5. Identify your ideal job – this may be where you work now or where you would like to work in the future. Write the name of your ideal job on a star point.
6. Think about some of your hopes and dreams. These may be personal, educational, career goals, etc. List a few hopes and dreams on the last point.

Step 2: Lead participants through the challenges involved in “coming out”.

Say: All of you are LGBT. You have known about your sexual orientation for some time, but you have kept that information secret until now. Starting today, you are going to “come out” and share that information with others. Let's find out what happens to you.

1. You have decided that it will be easiest to **come out to your friends first**, since they have always been there for you in the past and you trust them.
 - If you have a **blue** star, your friend has no problem with your news. He/she thanks you for being honest and acts no differently towards you, accepting you for who you are. Do nothing with your star.
 - If you have a **yellow or red** star, your friend is hesitant and annoyed you've waited so long to tell her/him. But, you are confident that he/she will eventually accept you and understand that being LGBT is a part of who you are. If you have a yellow or red star, fold back the point of your star with your friend's name.
 - If you have a **green** star, your news is met with anger and disgust. This friend who has always been at your side tells you that being LGBT is wrong and that he/she cannot associate with anyone like that. If you have a green star, please tear off the point with your friend's name and drop it to the ground. This friend is no longer part of your life.

2. Most of you have had good luck with your friends and you decide that **your family** probably deserves to know. You turn to your closest family member.

- If you have a **blue** star, you are embraced by this family member. He/she is proud that you have decided to come out and tells you that he/she will always be there to support you. Do nothing to your star.
- If you have a **red** star, the conversation does not go exactly as you had planned. Questions are asked as to how this could have happened, but following a long discussion your family member becomes a bit more at ease with your news. Fold back the point of your star with the name of your family member. This person will be an ally, but only with time.
- If you have a **yellow or green** star, your family member rejects the thought of being related to a person who is LGBT. Much like some of our friends, your family member is disgusted. Some of you who have yellow or green stars are thrown out of your house and become part of the 20 – 40% of homeless youth who identify as LGBT. If you have a green or yellow star, please tear off the point of your star with the name of your family member and drop it to the ground.

3. Having told your friends and family, members of **your community** soon begin to become aware of your LGBT identity.

- If you have a **red or blue** star, your LGBT identity is accepted by your community. Do nothing with your star.
- If you have a **yellow** star, you receive a mixed response. Some people in your community accept you. Some don't know what to think. You remain a part of the community and, with time, you will fit in as you once did. If you have a yellow star, please fold back the point with the name of the community group.
- If you have a **green** star your community reacts with hatred. They tell you that someone like you does not belong in the community. Those who had supported you in times of need no longer speak to you or acknowledge you. If you have a green star, tear off the point with the name of the community group and drop it to the ground.

4. You have heard that rumours are starting to circulate **at work** regarding your LGBT identity. In the past you confronted these rumours, but in this instance, you do not have the chance.

- If you have a **blue** star, your co-workers begin to approach you and let you know that they have heard the rumours and that they do not care, they will support you. Your bosses react the same way, letting you know that you do good work and that's all that matters. Do nothing with your star.
- If you have a **red** star, the atmosphere in your workplace becomes interesting. Everyone appears to think you are LGBT, even though you have not confirmed the rumours. Some people speak to you less than they did before, but nothing changes drastically. Do nothing with your star.
- If you have a **green or yellow** star, you continue to work as though nothing is happening, ignoring the rumours that have spread throughout the workplace. One day, you come in to find that your workspace has been packed up. You are called into your boss' office and she explains that you are being fired. When you ask why, she tells you that lately your work has been less than satisfactory and that she has to make some cutbacks in your area. If you have a green or yellow star, please tear off the point with the name of your ideal job and drop it to the ground.

5. Now... your future lies ahead of you as a LGBT individual. Your **hopes and dreams**, your wishes for the perfect life... for some of you these are all that remain.

- If you have a **red, blue or yellow** star, these hopes and dreams will keep you going. Most of you have met with some sort of rejection since beginning your coming out process, but you have managed to continue to live a happy and healthy life. Our personal hopes and dreams become a reality.
- If you have a **green** star, you fall into despair. You have been met with rejection after rejection and you find it impossible to accomplish your lifelong goals without the support and love of your friends and family. You become depressed and with nowhere else to turn, many of you begin to use drugs and alcohol. Eventually, you feel that your life is no longer worth living. If you have a green star, please tear it up and drop the pieces. You are now part of the 40% of suicide victims who are LGBT identified.

Step 3: Discuss people's reactions to the risks and losses associated with coming out.

Ask participants:

- How did you feel as the activity progressed? How realistic is this activity?
- What is the long-term impact of these losses for someone who is LGBT?
- What kind of support do LGBT people need in order to come out? Where can this support come from?

Ask if there are any questions.

**Name of Activity: “On Being Gay”
Guided Imagery / Sensitivity Exercise**

Objective:

To increase participants’ understanding of the day-to-day realities of being a non-heterosexual in a heterosexist culture.

Time: 20 minutes

Materials Required:

Videotape “On Being Gay - A Conversation with Brian McNaught “
(available at <http://www.brian-mcnaught.com/books/onbeinggay.htm>)

Strategy:

Play the portion of the video in which Brian McNaught leads the audience through a guided imagery of growing up straight in a gay world.

Debrief:

Allow participants an opportunity to discuss their reactions to the video clip, the barriers faced by non-heterosexuals, and practical steps that can be taken to improve access to and quality of public health services.

Opening:

This video brings up man feelings and issues. We will begin by looking at our reactions and progress to identifying what we can do to improve the access and equity of public health services for gays & lesbians.

Rational aim:

The group will develop a list of concrete things that professionals can do to improve the access to and quality of public health services for gays & lesbians.

Experiential aim:

Participants will gain some insight into what it is like to grow up gay/lesbian.

Objective:

What words or phrases caught your attention? What words or issues address the health concerns of gays & lesbians?

Reflective:

What scenes affected your comfort level? What frustrated you?

Interpretive:

What are some of the root issues of gay & lesbian health portrayed? What are the main barriers gays & lesbians face?

Decisional:

What will you do differently? What practical steps can we take to improve the access to and quality of our programs/services for gays & lesbians? How can we involve the gay & lesbian community?

Closing:

How do we continue working on improving the access to and quality of public health services for gays & lesbians? Comments or reflections on the issue.

Name of Activity: “Journey Through Life”
Guided Imagery / Sensitivity Exercise

Objective: To increase participants’ understanding of the day-to-day realities of being a non-heterosexual in a heterosexist culture.

Time: 20 minutes

Materials: Print one page of six categories (following this exercise) for each participant. Cut each page into six separate slips of paper, and give one set to each participant before the presentation begins.

Strategy: The following guided journey script is read, preferably with the lights out or dimmed:

Your imagination is the key instrument in this exercise of guided journey. We will be taking a chronological journey through your mind's eye of what your life might have been like if you were gay. Or perhaps you are gay; in which case you may reexperience some of the same feelings you endured growing up. You may experience a variety of feelings as you take this journey. Allow yourself to examine your feelings, but try not to let your feelings distract you from participating in this exercise. Please realize that my intent is not to manipulate your feelings or to change who you are. The goal is to help you understand some of the feelings and experiences that someone who is lesbian, gay or bisexual might feel. The journey I am about to take you on is not universal for all lesbian, gay or bisexual people, but many of the themes presented are somewhat common. On the six slips of paper that have been handed out to you, please write a name, word, or phrase that fit the category written on each card.

Please use a separate card for each category.

1. A person from your childhood with whom you shared secrets.
2. The names of your best friends in grade school.
3. A small valued material possession from your early teenage years which you kept in your school locker.
4. Your favourite place.
5. A person who is close to you.
6. A goal or dream.

Let's go back to your early childhood. Choose an age at which you have your earliest consistent memories. Perhaps you'll be four, five, or six. You are sitting in front of the television set watching a show. One of the characters is Chris, a person of about your age who is the same gender as you. This character is your favourite and one of the main reasons why you watch this particular show. You feel drawn to Chris. You want to be Chris's best friend. You turn to someone that you have always shared secrets with and you say "I love Chris."

That person makes a face at you and says. "That's disgusting! People shouldn't feel that way." You are confused and scared and ashamed. Hold up the card with the name of the person with whom you shared secrets. You no longer feel that you can talk about your inner most feelings with this person. Tear the card in half.

(Pause a moment to allow people tear their cards in half).

You are now eleven years old and in grade school. Your teacher takes you and your classmates to the bathroom. As always, the teacher stays right outside the door and tells everyone to hurry up. You wonder why you and your classmates are always being rushed out of the bathroom. Of course, no one really has to go to the bathroom, so you and your friends get together and talk about the other people in your class. Someone starts talking about how cute another classmate of the opposite gender is. Everyone else agrees that this classmate is good looking and seems to be very interested in this classmate.

You, however, are not interested. You feel uncomfortable and out of place. Someone in the group laughs a little too loud and the teacher rushes in to see what's going on. The discussion ends and you head back to the classroom feeling alone and isolated. You know you are different from your friends and you feel like no one will understand. You don't understand your feelings, and you want to talk about them but you know you can't. Hold up the card with the names of your best friends, you no longer feel as close to them as you once did. Tear the card in half.

(Pause a moment to allow people tear their cards in half).

You're now fourteen. You've been looking forward to high school. You think things will be different, that you will make many new friends, and that you won't feel isolated anymore. You avoid looking too closely at the classmates to whom you feel attracted. You don't want them to call you the names you've been hearing for so long: fag, queer, dyke, lesbo. You don't want people to think you are gay. You've heard about how weird gay people are from your parents, friends, and religious leaders in the community. All the gay people you've ever seen were on television and were always caricatures, villains, or victims. You remember one movie in which a gang of criminals take over a subway car. One of the passengers is obviously gay and gets abused for it. Later in the movie, he gets killed and no one really seems to care. You don't know what you are, but you know you can't be gay. You tell yourself that it's just a phase and that you'll soon grow out of it.

One day, while in line for lunch, you forget yourself and stare at someone whom you find very attractive. Someone sees you looking and calls you a "queer". It's starting over again; the names, the hatred and the feelings of worthlessness; later you go back to your locker and find that someone has broken into it and thrown ketchup all over your books. You find a note saying: "All gays should die". One of your most prized possessions you kept in your locker has been stolen. You feel like the whole world hates you and you wonder why this had to happen to you. You think things would maybe be better if you were just dead. You've been thinking of suicide a lot lately, but you're also very scared of doing it. Hold up the card with your prized possession on it – it is gone forever. Tear the card in half.

(Pause a moment to allow people tear their cards in half).

You're now eighteen and after years of hoping, praying, wishing and struggling, you've come to realize that you really are gay. It's not just a phase. It's not something that you chose. It's just who you are. You've just met someone named Terry, who is like you. This person is open and seems to be happy about being gay. You talk with Terry about your feelings and innermost desires. Finally, you've met someone who understands - someone who knows that you're not evil, sick or twisted. You feel attracted to Terry and you want to get to know Terry better. There's a place you love to go to, so you suggest that you and Terry meet there later. You arrive early and wait with anticipation and excitement - this is your first real date. Terry arrives and you want to hug Terry. You start to, when you notice a look of panic on Terry's face. You realize that other people are around and they are looking at you and Terry suspiciously. You and Terry both feel very awkward and uncomfortable and you quickly decide to leave. Hold up the card with then name of your favourite place - you no longer feel comfortable there. Tear the card in half.

(Pause a moment to allow people tear their cards in half).

You are twenty-one years of age today. Someone who is very close to you decides to treat you to dinner in celebration of your birthday. Dinner was wonderful, the food was great, the atmosphere was comfortable, and you both did some reminiscing about the past. You both laughed a lot and you come to realize how important this person is to you, and you no longer want to keep part of your life a secret from him or her. You've decided that the first chance you get tonight, you are going to tell this person you are gay.

Soon the opportunity presents itself. You start out telling this person how important he or she is to you and that there is something you have wanted to tell them for a long time. Finally, you say it, "I'm gay." The person looks back at you for a second and says nothing. He or she finally says, "Well, that's okay, you're still my friend." But something seems different now. There's awkward silence and this person obviously feels uncomfortable. You try to break the tension with a joke, but it doesn't work. This person is looking at you as if you were a total stranger and you feel like the bond has been broken. Hold up the card with the name of the person who is close you. Tear the card in half.

(Pause a moment to allow people tear their cards in half).

You have graduated college and you are ready to enter the real world. You've just been hired for a job you are really excited about. You start immediately. You feel pretty good about yourself. You've made it through the tough times, yet you have a healthy outlook on who you are and what you can accomplish.

You are now proud of being gay. Your pride comes not solely by virtue of your sexuality, but also because you know you are a survivor in the wake of oppression and prejudice. You've been able to unlearn many of the lies and distortions about what it means to be gay. You think about your goals and your dreams and you feel that someday you will be able to achieve them. Later that evening, you meet some friends at your favourite club. You want to celebrate your good fortune. You all have a few drinks and a few laughs. You decide to leave a little earlier than everyone else, because you want to be ready for your new job tomorrow morning. You say goodbye to everyone and walk through the parking lot. Three men step out of a nearby car and approach you. They have baseball bats. One of them says, "Say goodbye queerbait," and swings his bat at your head. The others join in. Now hold up the card with your hopes and dreams. Tear the card in half.

(Pause a moment to allow people tear their cards in half).

Debrief:

After reading the guided journey, allow a period of silence, perhaps 30 seconds. The presenter then facilitates a group discussion about individuals' feelings and reactions experienced during this exercise. Be prepared for silence during the discussion, but don't let the silence cause you to cut the discussion phase short. Stimulate the discussion with questions concerning their thoughts, feelings, and reactions.

This guided journey was written by Mark Gunning and taken from GAYNET. Some editing has been done to the original by Dawn Fortune, University of Maine at Farmington, Mark Reed, Western Illinois University, and Karla Stewart, Simcoe Muskoka District Health Unit.

Name of Activity: A Personal Story

NOTE: It has been the experience of many Positive Space trainers that having an LGBTTTTIQQ person talk about their personal experiences is often the most powerful and helpful exercise in a workshop. It is recommended that, if at all possible, Positive Space trainers include this activity in all of their workshops.

Objectives:

- To allow participants the opportunity to hear from and interact with an LGBTTTTIQQ person
- To increase participants' understanding and appreciation of the ways in which societal discrimination impacts on LGBTTTTIQQ persons

Time: 30 minutes

Materials Required:

Any materials required by the guest speaker

Strategy:

1. The workshop facilitator should meet with the guest speaker before the workshop, or at least talk on the phone, to discuss the needs of the group, comfort level of the speaker, and any specific issues the facilitator may want the speaker to address (for example, difficulties in accessing appropriate medical care, or care within a specific agency). The facilitator should also request the information needed to appropriately introduce the speaker, including whether the speaker would like participants to feel free to ask questions at any time, or to wait until the end of the presentation.

2. Introduce the speaker, who then tells his/her own story.

Debrief:

The speaker and facilitator may answer questions during and/or following the speaker's story, depending on the wishes of the speaker.

**Name of Activity: “What It’s Like to Be Me”
Guided Imagery / Sensitivity Exercise**

Objective:

To increase participants’ understanding of the day-to-day realities of being a nonheterosexual in a heterosexist culture.

Time: 20 minutes

Materials Required:

One copy of the 21 statements/questions, cut into individual slips of paper, with one statement or question on each slip of paper.

Strategy:

1. Distribute slips of paper to participants **face down** until all the slips have been handed out.
2. “Set the stage”: Ask participants to close their eyes and listen to the following scenario:

You are an 18 year old living in a society in which homosexuality is the norm. You were raised by two loving female parents. All the couples you see walking hand-in-hand or embracing are same-sex couples. All the images you see in magazines, billboards, newspapers and television are of same-sex couples. You’ve heard jokes and insulting comments about people who are attracted to the opposite sex.

Since you were a child, you felt there was something different about you, but it wasn’t until your friends started talking about the crushes they had on young people of the same sex that you realized that the fantasies you were having were about people of the opposite sex.

Last year you met Pat, a person of the opposite sex, and you fell in love with each other. You feel that your attraction to the opposite sex and your love for Pat are too important to hide so you “come out” to your family and friends. Some of them have questions, and some have things to say.

3. Instruct participants to keep their eyes closed unless they are reading their slip of paper. One at a time (either when you call their name, or after the person next to them has read a slip), they are to turn over a slip of paper and read it aloud “as if they really mean it”. Ask them to pay attention to how each question or statement makes them feel. Continue until all the slips have been read aloud.

Debrief:

Process by allowing participants to discuss their reactions to the statements and questions, and to share how they felt doing this exercise. Ask them to identify statements/questions that are indicative of homophobia, heterosexism, myths, religiosity, and lack of knowledge. Discuss the concept of internalized homophobia.

Statements / Questions

It's Pat's fault isn't it? You were lured into this lifestyle, weren't you?

When did you decide to become a heterosexual?

If you've never slept with a person of the same sex, how do you know you wouldn't prefer it?

So, what do straight people do in bed anyhow?

But you look so normal. You don't look heterosexual at all!

Why do straight people have to flaunt who they are and make a public spectacle of themselves – like holding hands in public or marching in those straight parades? They don't have special parades for us!

You're too young to know that you're straight - this is just a phase you're going through. You'll grow out of it.

Why are breeders so promiscuous?

All you need is a good same-sex lover to change your mind!

Do straight people hate or distrust people of the same sex? Is that what makes you straight?

How would you feel if your child turned out to be heterosexual?

Maybe you should go see a therapist.

Most child molesters are heterosexual. Wouldn't you be worried if you had a child who had a heterosexual teacher?

You say that heterosexuality is normal. If that's the case, why are there so many straight people in mental institutions?

I think straight people are totally disgusting!

Who have you talked to about your heterosexual tendencies and how did they react?

I have a great minister you could talk to – he's helped other straight people become gay!

How can you do this to your family? How will they be able to hold their heads up in public?

The holy book says that heterosexuality is a sin!

Since you were a little child you have always had a very close relationship with your parent of the opposite sex. Do you think that might have made you heterosexual?

People like you are just not normal!!

Education: The Facts

Name of activity: LGBT Bingo

Objectives:

- an active icebreaker
- to have participants learn more about each other
- to have participants begin to think about LGBT issues

Time: 10– 15 minutes

Materials Required:

- a pencil/pen for each participant
- bingo card for each participant
- small prize for the winner – optional

Strategy:

1. Distribute bingo cards to each participant.
2. Inform participants whether “Bingo” is one row or the whole card.
3. Have participants circulate, getting other participants to sign relevant squares on their card. Participants can sign another participant’s card only once, but can sign different squares on different cards.
4. First person to yell “Bingo” is given a small gift.

Debrief:

1. Answer any questions about the squares.
2. If no one is able to get a “Bingo”, discuss reasons for this.

Source/reference: PHA 2006

LGBT Bingo Game

Directions: Find fellow participants to sign their name in relevant spaces on your bingo card. A person may only sign your card once. The first person to shout “**bingo**” is the winner.

I know the symbol of gay pride	I have seen the movie “La Cage aux Folles” or “Birdcage”	my agency has a gender neutral bathroom for staff	I know the origin of “the twinkie defense”
my agency has LGBT resources for staff	people are “out” at my agency	my agency uses “partner” or another gender neutral term on intake forms	I have been to Pride Day celebrations
I am aware that LGBT people face oppression	there are LGBT posters in public areas at my agency	I know the title of one LGBT positive children’s book	I do not assume everyone is heterosexual
I have a close friend or family member who is “out”	I have discussed sexual orientation with my children/ children in my life	I believe bisexuality is a valid sexual identity	my agency has added “transgender” to the sex/gender identity question on intake forms

Name of Activity: Definitions Match-Up

Objective:

- To define terms related to sexual orientation, gender identity
- To have an opportunity to discuss appropriate and inappropriate language related to the above

Time:

30-40 minutes

Materials Required:

- The facilitator may choose to develop a PowerPoint presentation to accompany this activity
- One copy of the “Definitions Match-Up Activity Sheet” (page 91)
- If using alternate strategy, prepare materials as directed below
- “Definitions of Terms Related to Sexual Orientation and Gender Identity” (page 7). This provides additional information to assist in taking up the terms and definitions. It also includes several additional terms that have not been included in this activity

Introduction:

Indicate to participants that language is always changing, and a word may have a different meaning in different times, to different people or within different cultures or groups. The definitions used here have been simplified for ease of doing this activity. Further discussion will occur when taking up and processing these terms

Strategy:

- Provide a copy of the “Definitions Match-Up Activity Sheet” (page 91) to each participant to complete (this could be distributed ahead of time to save time during the presentation.)
- Participants can be directed to work individually or in groups

Alternate Strategy:

Preparation: Copy and paste all the terms from the “Definitions Match-Up Activity Sheet” (page 91) into a word document and enlarge them by increasing the font size to about 48. Do the same with the definitions, increasing the font size to 36. Print and cut them into individual terms and definitions. They can be laminated if they will be used repeatedly.

Either:

- Post the term pieces on the wall around the room
- Distribute the definition pieces to participants, and have them select and remove their matching terms from the wall
- Take up and process the terms and definitions using the answer key below and “Definitions of Terms Related to Sexual Orientation and Gender Identity” (and PowerPoint presentation if available)

Or:

- Provide a full set of terms and definitions pieces to each table or small group of participants
- Have them work together to match up all the terms and definitions
- Take up and process the terms and definitions using the answer key below and “Definitions of Terms Related to Sexual Orientation and Gender Identity” (and PowerPoint presentation if available)

Answer Key for “Definitions Match-Up Activity”

(Facilitator may find it easier to record the answers on a “Definitions Match-Up Activity Sheet” to take them up)

1 – l, 2 – u, 3 – k, 4 – r, 5 – m, 6 – a, 7 – t, 8 – c, 9 – x, 10 – o, 11 – n,
12 – d, 13 – b, 14 – s, 15 – f, 16 – j, 17 – v, 18 – e, 19 – h, 20 – w, 21 – l,
22 – g, 23 – p, 24 – q

Definition of Terms Related to Sexual Orientation and Gender Identity

Terms	Definitions
1__Sexual Orientation	a. a. A female who is physically and emotionally attracted to other females
2__Sexual Identity	b. A person who uses hormones or has surgery to change their biological sex
3__Heterosexual	c. A person who is physically and emotionally attracted to both males and females
4__Homosexual	d. A person whose gender identity or expression differs from his or her biological sex
5__Gay Male	e. An umbrella term encompassing a broad range of sexual and gender identities
6__Lesbian	f. A person who dresses up in clothing of the opposite gender for fun and entertainment
7__MSM / WSW	g. The assumption that everyone is or should be heterosexual
8__Bisexual	h. A person who has a very fluid sense of gender identity and sexual orientation
9__Asexual	i. A person's attraction for another person, defined by the sex of that person
10__Gender Identity	j. A person whose nature is comprised of both male and female spirits
11__Gender Role	k. A person whose primary sexual orientation is to people of the opposite sex
12__Transgender	l. Irrational fear, dislike or hatred of homosexuals
13__Transexual	m. A male who is attracted to other males
14__Cross Dresser	n. Characteristics attached to culturally defined notions femininity and masculinity
15__Drag Queen/King	o. A person's deep sense of being male, female, neither or both
16__Two-Spirit	p. Disclosure of one's sexual orientation or gender identity to others
17__Intersex	q. A person who is not a member of a specific group but who supports that group
18__Queer	r. A person who is physically and emotionally attracted to people of the same sex
19__GenderQueer	s. A person who wears clothing of the opposite gender, often for erotic enjoyment
20__Questioning	t. Men who have sex with men / women who have sex with women
21__Homophobia	u. How a person presents his/her sexual orientation to self and to others
22__Heterosexism	v. A person with mixed male and female genetic and/or physical sex characteristics
23__Coming Out	w. A person who is questioning their gender identity or sexual orientation
24__Ally	x. Someone who is not sexually and/or romantically active or sexually and/or romantically attracted to other persons

Name of Activity: **Kinsey & Klein Mini-Lecture**

Objectives:

- To learn about some of the theories of Sexual Orientation

Time:

10 minutes

Material Required:

- Information on Kinsey and Klein in the introduction

Strategy:

- Prepare a mini-lecture on the information

Source:

- Public Health Alliance 2006

**Name of Activity: SEXUAL ORIENTATION & GENDER IDENTITY
JEOPARDY GAME**

Objectives: To learn about LGBTTTTIQQ history and culture

Time: 1 hour

Materials required:

1. Cards with the questions on them and participants choose and card and try to answer the question. Points or prizes can be given out for correct answers.
- OR
2. Jeopardy game boards can be prepared that have the questions on them, covered up. Participants can be divided into teams or work individually and choose a category and question under that category.

Strategy: This activity can be played by individuals one at a time, who can choose a question and try to answer it. It can also be played by a group in teams, who, similar to the television game show, choose a category and then try to answer questions worth various points from that category.

Source: Public Health Alliance 2006

QUESTIONS

Myths & Facts

1. The provincial legislation that prohibits discrimination based on sexual orientation is:
_____. (The Human Rights Code)
2. People who claim to be bisexual have just not made up their mind if they are gay or straight. (False)
3. Homosexuality is definitely hereditary. (False)
4. Some people may change their sexual orientation by associating with gay people. (False)
5. You can tell if someone is gay. (False)
6. Homosexuality is just a phase teens go through. (False)
7. Lesbians don't need to worry about safer sex because they are having sex with women. (False)
8. 50% of lesbian and gay youth experience suicidal thoughts. (True)
9. The average number of years that it takes for a person to come out is _____ years. (6)
10. The alternative school in Toronto for gay youth who have experienced harassment in their own high school is called:
 - The Rainbow Program
 - The Pride Program
 - **The Triangle Program (correct answer)**
11. Gay bashing is the most underreported hate crime. (True)
12. Bisexuals experience discrimination only from straight people. (False)
13. 20-40% of street youth are LGBT. (True)
14. In a 1996 study, 75% of students harassed because of their perceived sexual orientation were heterosexual. (True)

15. Children raised by gay parents are no more likely to have psychological problems than those raised in more conventional circumstances. (True)
16. In one study, the percentage of LGBT youth who felt alone with no one to talk to was:
- 20%
 - **95% (correct answer)**
 - 80%
 - 50%
17. Bisexuals have a 50/50 attraction to men and women. (False)
18. 97% of students in high school report hearing homophobic remarks from their peers. (True)

Definitions

1. When a person “comes out” he/she is said to be coming out of:
 - the house
 - the school
 - **the closet (correct answer)**
 - the neighbourhood
2. “Gay” refers to men only. (False)
3. A woman who forms her primary loving and sexual relationship with other women is a _____. (lesbian)
4. The process in which a person acknowledges his/her lesbian, gay, bisexual or transsexual/transgender identity is called _____. (coming out)
5. The fear and hatred of those who love others of the same sex is called _____. (homophobia)
6. A person’s sense of being male or female is called _____ identity. (gender)
7. The term for identifying someone as lesbian, gay or bisexual without his/her permission is called _____. (outing)
8. Prejudice, discrimination, oppression against bisexuality and bisexuals is called _____. (biphobia)

9. Someone with the potential for being sexually and/or romantically involved with members of any gender is _____. (bisexual)
10. In the aboriginal community the term for a gay person is _____. (two spirit)
11. A heterosexual person who supports and honours sexual diversity is called a _____. (heterosexual ally)
12. The term for a person who feels his/her true gender identity is different from his/her biological sex is _____. (transsexual)
13. The assumption that all people are or should be straight is called _____. (heterosexism)
14. People who are born male but identify as female and often opt to feminize their bodies by means of female hormone treatment and surgical therapy. _____ (transwomen)
15. The belief that people can or should be attracted to only one sex/gender and that there is something wrong with those who cannot or will not choose. _____ (monosexism)
16. Attitudes and behaviour that are respectful or sensitive to and supportive of transpeople are _____. (transpositive) (or “trans-inclusive”, transresponsive” or “trans-sensitive”)

History & Culture

1. During the Holocaust, people identified as homosexual were made to wear what symbol?
- square
 - rectangle
 - triangle (correct answer)**
 - circle
2. The week at the end of June set aside to celebrate gay rights in Toronto is called _____ (“Pride”)
3. In 1973, the American Psychological Association delisted homosexuality as a psychiatric diagnosis. (True)

4. In 1969, gays and lesbians took to the street to protest police harassment. This is considered to be the beginning of which movement? (Gay Rights)
5. A group for parents, families and friends of lesbians & gays is called _____ . (PFLAG)
6. The top colour of the triangle is:
a. yellow
b. green
c. red (correct answer)
7. .The term “faggot” refers to:
a. a bundle of sticks
b. a reference to a time when witches and gays were burned at the stake
c. a derogatory term for gay men
d. all of the above (correct answer)
8. The colour of the triangle representing GLBT pride is:
a. Red
b. Black
c. Pink
d. Pink or black (correct answer)
9. In 1969, gays protested discrimination and marched down the street to begin the gay rights movement. In which city did this occur? (New York)
10. The term “homosexual” was first used in what year? (1869 by Hungarian psychiatrist Karoly Benkert)
11. Name the bar where the gay rights movement began. (Stonewall)
12. The theorist who described sexual orientation as a continuum was _____ . (Alfred Kinsey)
13. The Rainbow flag was first introduced in the 1970’s in which city? (San Francisco)
14. In this year, Ontario legalized same sex marriage.(2003)

Arts

1. Rosie O'Donnell is a gay parent. (True)
2. One comedy with gay content was called "Three to _____". (Tango)
3. Which singer is gay ?
 - a. k.d. Lang
 - b. b.Melissa Etheridge
 - c. Both k.d. and Melissa (correct answer)**
4. There is a gay character on "Friends" True – Ross's ex-wife Carol and her partner Susan are lesbians and parents of Ben)
5. The comedienne who came out at the airport in a comedy skit was _____. (Ellen Degeneres)
6. This gay male is an Olympic diver from the U.S. (Greg Louganis)
7. "Now That You Know" is a book for:
 - a. gay teens
 - b. parents whose child has come out (correct answer)**
 - c. pregnant couples
8. "The Band Played On" is a movie and book about:
 - a. the big band era
 - b. the HIV/AIDS Epidemic (correct answer)**
 - c. an American Football Game
9. Robin Williams played a gay father in this movie. (Bird Cage)
10. Who was the playwright who spoke of "the love that dare not speaks its name"? (Oscar Wilde)
11. The gay author who wrote "Alice In Wonderland" (Lewis Carroll)
12. This movie concerns two cowboys who cannot be together and was released in 2005.(Brokeback Mountain)
13. A movie was made about this writer. His first name is Truman.(Capote)

Building Skills

Name of activity: Case Scenarios

Objectives:

- To apply knowledge of positive space concepts
- To identify strategies to combat heterosexism, homophobia, biphobia and transphobia in the workplace

Time: 40 – 60 minutes, depending on number of scenarios used and the size of the group

Materials Required:

- case scenarios and discussion questions

Strategy:

1. Choose appropriate case scenarios for your group. Suggestions follow, or create your own.
2. Use the suggested discussion questions or create your own.
3. Form small groups for discussion.
4. Give one case scenario to each small group. It is often beneficial if more than one group discusses the same scenario.
5. Allow about 15 minutes for the small groups to discuss the scenarios.
6. In the large group, beginning with one case scenario, have participants share the highlights of their discussion and identify the changes required.
7. Work through all case scenarios.
8. You may want to compile a list of the workplace changes identified.

Debrief:

- discuss the workplace changes identified and develop a plan to implement the changes

Source/reference: OPHA Public Health Alliance, 2006

Positive Space Case Scenarios

1. You and a co-worker are out “pubbing”. You run into another co-worker who, at work, talks openly about his male partner. He is with a woman and introduces her as his wife.
2. A transwoman works with you. Some of your women co-workers complain that it makes them uncomfortable to have a “man” using their washroom.
3. You have been working to develop a positive space workplace at your place of employment. You hear that there are rumours going around that you must be gay or lesbian because you are so passionate about the issue.
4. A co-worker who used to work in your program has been off work for a week following the sudden death of the tenant who lived in the upper apartment in her home. She calls you and confides that her “tenant” was actually her long-term same-sex partner. She is worried that when she returns to work her grief will interfere with her performance, or that she will “break down” during the workday, and she will not have any support because nobody else is aware of the true nature of her relationship.
She tells you that she has heard co-workers in her current program make derogatory remarks and jokes about gay people. She would like to access bereavement leave but she is worried that, if she requests it, word will leak out and she will become the target of gossip, rumour and discrimination.
She says “I feel so alone. I don’t know what to do, and I don’t have anyone else to talk to.”
5. You are leaving your workplace after staying a little late to finish up a job. On the way out, you see a co-worker slumped dejectedly in a chair, with tears running down her cheeks. You express concern, and she tells you that while doing laundry last night she came across a note in her teen son’s pants pocket. It was a love note from a male friend of his, with an explicit description of what they would do the next time they managed to be alone together, and how great the previous night had been. She and her husband had gone out for dinner the night before, leaving the two boys with pizza. She says her husband openly hates gays and has always said “No son of mine will ever be gay”. She says she also believes homosexuality is wrong, then breaks down, sobbing, “How could my son do this to us? And right in our home! What am I going to do?”
6. Your agency has started using the RUCS (routine, universal, comprehensive screening) for domestic violence. A colleague wonders if these questions should be asked of a transwoman.

7. You and a co-worker are locking a building for the evening. A person approaches who you have always thought of as a “cross dresser” and asks for entry because they are running a group that evening. Your co-worker looks very uncomfortable and is not sure what to do.

8. At your team meeting you hear about “The Trans Health Project”, an OPHA position paper on improving the access to and quality of public health services for transgendered people. A co-worker says that this is not relevant to the work your program does.

9. A colleague comes to you to say she wants to bring her same sex partner to the potluck get-together you are planning at work, to which "spouses" have been invited. She has never spoken about being gay to anyone at work and wonders what the reaction will be and how to approach it so she is not a gossip item.

10. A homophobic comment is made in the lunchroom.

11. A man calls your info line asking for assistance in starting a group for gay dads.

12. Pat is starting hormone therapy to transition to a female. She has already come out at work previously as a gay man and received a cool reception. She wonders how the staff will accept her "coming out" once again.

13. You have just attended a workshop on anti-homophobia training and would like to make your agency safer for LGBT youth.

14. A member of the community has complained to your local board that a group of taxpayers that she represents are not supportive of the work your agency is doing promoting an “alternate lifestyle” and that the agency should be promoting family values. You have been approached by your Manager to come up with a rationale to support your work in this area.

15. Gary is 30. He has come in for STI testing because of urethral discharge. He is obviously very anxious. He tells you that he is married to a wonderful woman, and has 2 great kids. About six months ago he got a great job in Toronto, which is about 4 hours away from his home. He stays there during the week, and comes home on weekends. He started frequenting a gay bar, and has fallen in love with a man he met there. They have been having sex several times a week. They do not use condoms because his partner told him he had been tested and was “clean”.

He tells you he has always known he was gay. When he was 14, his older brother was caught in bed naked with another man, and was disowned by their very religious parents. Gary never saw him again. Gary could not risk coming out to his family, so he married and led the sort of life they expected him to. He is now terrified that he may be HIV-positive, may have infected his wife, and may be forced to come out.

16. You are approached by a youth who has disclosed that she thinks she might be gay.

17. You are running a class for new parents. One parent appears to be what you always thought of as a “cross dresser”.

18. You read about a project to increase access and equity to community health centres for bisexuals. You bring it to a staff meeting and one of your colleagues says this is not relevant to your team.

19. A young man has come to the clinic requesting urine testing for chlamydia and gonorrhoea, and HIV testing. You ask about symptoms, particularly discharge from the penis. You notice hesitation before he answers “no”. He seems particularly uncomfortable with your questions regarding his sexual activity and his answers seem rather vague. When you ask about condom usage, he admits that he does not have a penis, that he is a female-to-male transsexual (FTM).

20. A sixteen-year old girl comes to clinic saying she'd like to ask the nurse some questions about sex. When you see her, she tells you she is really confused and needs some help. She has a major crush on the female student teacher in one of her classes. She says she can't stop thinking about her, and it's starting to affect her schoolwork because she is so distracted, particularly in that class. She asks you if that means she's a lesbian.

Six months later she makes an appointment to see you, and tells you that she has a female sexual partner, and is very happy in that relationship. She asks you for help as she wants to come out to her parents, and believes they will be furious.

21. You are talking with a youth who thinks he is bisexual. His friend told him he is really gay and being bisexual is just a stage.

22. You are running a group for couples and two women attend together. You assume they identify as lesbian women and make comments to them about this.

Sample discussion questions for all scenarios:

- What would you do?
- What are the issues?
- Using the Workplace Assessment Tool, what needs to change in this workplace to make it a positive space?

Name of Activity: Responsibilities of a Positive Space Poster User

Objectives:

- To identify ways to carry out a commitment to be a Positive Space Ally
- To discuss ways to overcome fears about or barriers to being a visible LGBT ally

Time: 20-25 minutes

Materials Required:

- Extra copies: Positive Space Ally, Ally contract and Consent Form
- Flipchart; markers
- (Optional) Note paper; pens

Strategy:

STEP 1

Review the responsibilities of a Positive Space Ally.

- Provide affirming resources and referrals.
- Educate myself and others about oppression, heterosexism, homophobia, transphobia
- Work to provide a safe, confidential support network for LGBT people.
- Treat everyone with dignity and respect.

STEP 2

Identify appropriate places to display a Positive Space sticker or button.

Ask participants: *What does it mean when you display a Positive Space sticker or button?*

Sample responses: I'm a Positive Space Ally; this is a safe place for LGBT people; I'm committed to the four responsibilities of an ally.

Ask participants: *If you decide to become a Positive Space Ally, what kinds of places could you display your Positive Space sticker or button?*

Sample response: In my office; in my dorm room; on the front door of my house

Ask participants: *Are there any places it wouldn't be appropriate to display a Positive Space sticker or button? Why?*

Sample responses: On the front door of a university residence; reception area at work; bulletin board in the mall. Public spaces or any place where we can't be sure what other people will do or say

STEP 3

Hand out the Positive Space Ally Consent Form and Ally Contract.

Read the responsibilities of a Positive Space program ally, one paragraph at a time. After each paragraph, ask participants for examples of ways in which they could carry out this commitment in their daily lives, at home, at school, at work, in the community, etc. For example:

The contract says *“I will provide affirming resources and referrals to the best of my ability.”*

What could you do in your own life to put this into practice?

The contract says *“I am committed to education myself and others about oppression, heterosexism, transphobia and homophobia and to combat it on a personal level.”*

What kinds of things could you do to educate yourself? Educate others?

Tell participants: *At the end of the workshop, people interested in becoming a Positive Space LGBT ally will be asked to fill out the Consent Form and Ally Contract. Allies will also receive a Positive Space sticker or button that they can display (Show sticker and buttons). This is a visible sign of your commitment to be a Positive Space LGBT Ally.*

Ask if anyone has any questions.

Identify ways participants can carry out Positive Space Ally commitments.

Ask participants to think about where they could display their Positive Space sticker or button.

Thinking about this place, give participants 5-10 minutes to answer the following questions on their own. If there are a number of participants from the same organization, they may want to discuss the question together.

- In this place, what is already LGBT positive, supportive of LGBT individuals?
 - In this place, is there anything LGBT negative, things that make it not safe for LGBT individuals?
 - In this place, how can I carry out Positive Space Ally commitments?
- Answers to these questions are private and do not need to be shared with the group. Make paper available to participants who want to write down their answers.

STEP 4

Brainstorm participants' fears about and tips for being a Positive Space Ally.

Remind participants that 'coming out' as an LGBT ally can have repercussions because of people's attitudes and prejudices towards LGBT communities.

Go around in a circle. Ask participants; *what is one 'fear' you have about becoming a Positive Space Ally? Are there any barriers to being a Positive Space Ally?* Record these responses on a flipchart.

Do another round. Ask participants: *How can we overcome these fears about or barriers to being a Positive Space Ally? Do you have any tips to make it easier for us to **make** this commitment?* Record these responses on a flipchart. Emphasize that LGBT resources are an important source of support for LGBT allies. In the next section, you will look at some of these resources.

Explain what will happen in the closing round of the workshop. Say Participants ready to make a commitment can complete the Positive Space Ally Contract and Consent Form and receive their Positive Space sticker and/or button.

Source/reference: Positive Space Training Manual, Antigonish Nova Scotia

Positive Space Ally Contract and Consent Form

I, _____, hereby agree to provide a “Positive Space” for anyone dealing with sexual or gender orientation issues. Although I may not be an “expert” on lesbian, gay, bisexual, and transgender issues, I will provide affirming resources and referrals to the best of my ability.

I am committed to educating myself and others about oppression, heterosexism, transphobia and homophobia, and to combating it on a personal level.

I am committed to working toward providing a safe, confidential support network for members of the lesbian, gay, bisexual, and transgendered communities

I am committed to treating everyone with the dignity and respect that they are entitled to as human beings.

Signature _____

Date _____

Position/Organization Affiliation: _____

I will display my sticker (location): _____

“The Positive Space Workshop Facilitator’s Manual” Antigonish

Name of Activity: **Placemat**

Objectives:

- to facilitate commitment to change
- to begin to formulate an action plan

Time: 20 minutes

Materials Required:

- large sheets of paper
- draw four triangles and a central triangle
- markers for each participant

Strategy:

1. Have the participants count off “1, 2, & 3, ”, so that you will have groups of four each. They should then choose one participant from each group to report back to the whole group.

2. Each participant has one corner of the paper and writes three (3) suggestions for making our workplace inclusive. (This allows everyone to give input and get actively involved in solutions.) After discussing the ideas of each member of the group, they summarize their consensus of three ideas in the central triangle. The “reporter” summarizes the consensus for the large group.

Debrief:

Have each group report back the ideas in the central triangle. As a group, discuss:

- how the group can make these happen
- which ones need a strategy to involve others
- what barriers may occur
- solutions
- which ones individuals can practice daily.

You may want to incorporate a time-line and date to re-evaluate progress.

Source: Adapted from “Beyond Monet”, Bennett, Barrie and Rolheiser, “Carol”

Resources

LGBT Health Resources

Websites

http://www.opha.on.ca/our_voice/workgroups/pha.shtml

The website of the Public Health Alliance for LGBTTTTIQQ Equity
2000 - Improving the Access to and Quality of Public Health Services for
Lesbians and Gay Men

2002 - Ethical Research and Evidence-Based Practice for Lesbians and Gay
Men

2003 - Improving the Access and Quality of Public Health Services for Bisexuals

2004 - Trans Health Project (revised)

www.rainbowhealth.ca The Canadian Rainbow Health Coalition / Coalition santé arc-en-ciel Canada (CRHC / CSAC) is a national organization whose objective is to address the various health and wellness issues that people who have sexual and emotional relationships with people of the same gender, or a gender identity that does not conform to the identity assigned to them at birth.

www.rainbowhealthontario.ca Rainbow Health Ontario is a province-wide program designed to improve access to services and to promote the health of Ontario's LGBT communities.

www.egale.ca EGALE Canada is a national lobby group that advances equality and justice for lesbian, gay, bisexual, and transgender people, and their families, across Canada.

<http://www.stfx.ca/campus/stu-serv/equity/lgbt.htm> "Positive Space Training Manual: Information and resources for lesbian, gay, bisexual, transgender people and their allies" developed by St Francis Xavier University, Antigonish, Nova Scotia

www.mun.ca/the Memorial University, Newfoundland website. The Heterosexism Enquirer (THE) is an electronic magazine dedicated to challenging heterosexism in society's institutions, individuals, families and communities. THE challenges heterosexism by increasing awareness of the existence and impact of heterosexism, through curriculum and educational materials, and through promotion and evaluation of strategies to challenge heterosexism.

<http://www.2spirits.com> Website of 2-Spirit People of First Nations, Toronto. Includes a section on “What health providers can learn”.

www.glma.org The largest organization of its kind and a recognized authority and leader in LGBT health, the Gay and Lesbian Medical Association exists to make the health care environment a place of empathy, justice, and equity. The Gay and Lesbian Medical Association (GLMA) has a set of guidelines for physicians and others who provide health care to the public, “Lesbian, Gay, Bisexual, and Transgender Health: Findings and Concerns” (2000)
See also “Guidelines for Care of Gay, Bisexual, and Transgender Patients” (2006)

<http://depts.washington.edu/wswstd/lesbianSTD.com> University of Washington website. Our goal is to provide information and resources regarding sexual health and sexually transmitted diseases in women who have sex with women and to further our collective knowledge about lesbian STDs through research.

www.bodieslikeours.org/forums Intersex information and peer support.

www.isna.org The Intersex Society of North America (ISNA) is devoted to systemic change to end shame, secrecy, and unwanted genital surgeries for people born with an anatomy that someone decided is not standard for male or female.

www.survivorproject.org Survivor Project is a non-profit organization dedicated to addressing the needs of intersex and trans survivors of domestic and sexual violence through caring action, education and expanding access to resources and to opportunities for action.

www.biresource.org The Bisexual Resource Center is an international organization providing education about and support for bisexual issues.

<http://jqstudies.oise.utoronto.ca> The Canadian Online Journal of Queer Studies in Education was created to provide a forum for scholars, professionals, and activists to discuss queer topics in education and the social sciences in the Canadian context.

<http://www.nmha.org/whatdoesgaymean/> “What Does Gay Mean?” is an anti-bullying program designed to improve understanding and respect for youth who are gay/lesbian/bisexual/transgender (GLBT). Centered on an educational booklet called “What Does Gay Mean?” How to Talk with Kids about Sexual Orientation and Prejudice, the program encourages parents and others to communicate and share values of respect with their children.

www.pflag.ca PFLAG Canada is a national organization that helps all Canadians who are struggling with issues of sexual orientation and gender identity. PFLAG

Canada supports, educates and provides resources to parents, families, friends and colleagues with questions or concerns, 24 hours a day, 7 days a week.

http://camh.net/Publications/Resources_for_Professionals/ARQ2/arg2.pdf:

“Asking the Right Questions 2: Talking with Clients about Sexual Orientation and Gender Identity in Mental Health, Counselling, and Addiction Settings” is a publication of the Canadian Centre for Addition and Mental Health. It is designed to help service providers create an environment where all clients feel comfortable talking about their sexual orientation and gender identity.

Journals

American Journal of Public Health, June 2001, Vol 91, No. 6. This special issue of the Journal marks the first time in its 91 year history that lesbian, gay, bisexual and transgender health issues has been featured as a theme.

Homosexuality and the law

A BRIEF HISTORY

- In Canada, prior to 1969, same-sex practices between consenting male adults were considered to be crimes punishable by imprisonment. In 1969 an omnibus bill was passed decriminalizing private sexual acts between two people over the age of 21.
- Quebec, in 1977 became the first jurisdiction in Canada to amend the province Charter of Human Rights to include sexual orientation as a prohibited ground for discrimination.
- In 1996 the Canadian Human Rights act was amended to explicitly include sexual orientation as one of the prohibited grounds of discrimination.
- In 2002 the Quebec Superior Court and the Ontario Superior Court ruled that denying same sex couples equal opportunity to marry is unconstitutional and gave the federal government 2 years to correct or enact new legislation.
- In May 2003 the Court of Appeal of British Columbia overturned a ruling of the province's Supreme Court that said marriage should be restricted to heterosexuals.
- In February 2004 Bill C-250 was passed to amend the criminal code which expands the definition "identifiable group" relating to the area of hate propaganda in the Criminal Code to include any section of the public distinguished by sexual orientation.

A StatsCan study (2004) found that 46% of lesbian and gay individuals who were the victims of hate crimes were injured as a result. This was almost twice the proportion of injury among hate crime victims in general.

Hatred towards the lesbian, gay, bisexual and transgendered community results in violence and decreased safety for the wider Antigonish community. This type of violence is not only directed towards people who are lesbian, gay, bisexual or transgendered (LGBT) it also puts at risk anyone who is assumed to be LGBT.

Violence against LGBT individuals begins with seemingly small actions; taunting on the school ground, homophobic jokes, ridiculing of others for behaviours that are outside of gender stereotypes. These actions exist on a continuum which serves to devalue LGBT individuals in our community, and which perpetuates attitudes which lead to violence and crime against others. Monitor your attitudes and words, realize that what you say and believe influences the criminal activities of others, and take responsibility for the safety of everyone in our community.

Lesbian, Gay, Bisexual, Transgendered Community Safety Initiative

Antigonish Women's Association

Suite 206A Kirk Place, 219 Main Street, B2G 2C1

(902) 863-2347 lgbtproject@ns.sympatico.ca

For Service Providers

When Someone Comes Out to You as LGBT identified

Thank the person for having the courage to tell you.

Please keep in mind that an LGBT person cannot accurately predict your reaction to their coming out to you. You have lived in a society that often teaches intolerance of LGBT people. Therefore, by telling you, this person is putting a large amount of trust in just a few words. At that one point, they have the possibility of losing you as a friend or family member, so often times the decision to first share that piece of their life is not one taken lightly. Do not judge the person, if you have strong religious or other beliefs about LGBT identities keep them to yourself. Ensure that you respect this person's confidentiality and tell them you still care about them, no matter what.

Understand that the person has not changed.

They are still the same person they have always been. You might be uncomfortable or surprised by the news at first, but make an effort to understand why you are surprised or uncomfortable. Also, this person may share things with you related to this part of their life. Do not assume this person is coming on to you or finds you attractive.

Ask Questions.

You can ask questions of the individuals, but understand that they might not have all the answers. If you want to learn more, say so. It helps to admit to yourself out loud that you are not an authority on the subject. Also, understand that it is not this person's job as an LGBT person to educate you fully; be prepared to do your own research. You may want to keep the conversations going and provide a way to contact the person in the future. This interaction lets the person answer your questions at a pace that is their own.

Helpful Responses for Discussion Around LGBT Identity:

- It's okay if you are LGBT identified.
- I can appreciate how difficult it must have been for you to tell me this.
- If you are LGBT, what are the kinds of things that worry you most?
- What kind of support do you think you need from me?
- I may not have all the information, but I can find more for you?

Potentially Damaging Responses:

- How do you know? Are you sure?
- You're too young to make a decision like that.
- How can you know if you've never had sex with someone of the opposite sex? It's just a phase you are going through.
- A lot of people experiment or fantasize; it doesn't mean you are LGBT.
- It's fine that you told me, but you shouldn't tell.
- Maybe you just haven't met the right person yet.

Adapted from lgbtproject@ns.sympatico.ca – Antigonish Women's Association

What is an Ally?

An ally is an individual who works to end oppression within their personal and professional life. An ally works to end a form of oppression from which they receive privilege. For example, a white person who works to end racism, a lesbian woman who works to end discrimination against transgender individuals, or a straight man who combats homophobia are allies.

Why be and Ally?

- By embracing differences in others, you embrace it in yourself.
- It gives you an opportunity to interact with and learn from people who are different from you.
- You will make a difference in the community and in the lives of LGBTQ community members.
- If you have friends or family who are LGBTQ identified, this will allow you to actively support them.
- You will make your community a better place to live and oppression is a negative force that impacts everyone.

What does an Ally Do?

- Works towards developing a greater understanding of oppression, privilege and the needs of the LGBTQ communities.
- Promotes a community that embraces, appreciates, and celebrates differences.
- Challenges anti-LGBTQ comments, statements or jokes.
- Commits to making positive change.

What does it take to be an Ally?

Empathy	Commitment to Social Justice	Open-minded
Respectful	Willing to challenge self and others	Risk taker
Good Listener	Willing to Learn	Willing to Challenge Yourself and others
Recognizes that Oppression is an ongoing issue		

An Ally is committed to personal growth and is willing to examine how privilege operates within his/her life.

Adapted from lgbtproject@ns.sympatico.ca Antigonish Women's Association

Supporting LGBT Individuals

As an ally to the LGBTQ community you may find yourself in situations which require you to support an individual who is experiencing difficulties of their LGBTQ identity, or who may be in a state of crisis. If you are approached by someone, it is important to remember that this person is placing their trust in you, but does not expect you to have all the answers or to be able to fix all their problems. Instead, you should ensure you have a good knowledge of your local LGBTQ resources. The internet is a great place to start. If someone comes to you with questions around their identity, offer to help them do some research, guide them to other resources in your community or given them the time or really listen to them.

Be Yourself

Be aware if respect your limits. We are each unique and have different strengths. We also each have limits which need to be respected. Collectively, if we use our individual gifts in our work as allies, we will have a powerful network of multi-talented, multifaceted committed people. Know yourself and what you want and are willing to do as an ally. There is enough to be done that we can all share a part in this exciting project.

Be Relaxed

Don't be hard on yourself! While we are not responsible for the existence of transphobia, biphobia or homophobia, we are responsible for its existence within ourselves and our environments. It takes courage to examine the source of prejudice within ourselves and to work to eradicate it. Be patient with yourself. We are all human, born and raised in transphobic, biphobic and homophobic cultures. We all have growth and learning that will take place as part of this self-evaluation process. This is extremely important in our work as allies and for those we want to support.

Demonstrate LGBT Positive Behaviour

- Remember that the LGBTQ individual may be experiencing grief reactions because of negative stereotypes. The person may have lost connection or fear losing connection with family or friends.
- Use the vocabulary that the other person uses. If they say "homosexual" follow their lead. Likewise, if the person uses other terms to describe themselves, use those. Some terms, such as "queer" are acceptable and are part of the process of reclaiming of language. Ensure that the other person uses such terms before you do. Always ask the person what term they would like you to use when referring to them.

- Be aware of your own comfort level and limitations. Do not add pain because of your judgments about LGBTQ identities.
- Be aware that cultural differences may affect the person.
- Provide written materials to the person who is seeking resources.
- Respect confidentiality. Any information shared with you should be kept confidential.

Adapted from lgbtproject@ns.sympatico.ca – Antigonish Women's Association

Supporting an LGBT Friend

Guidelines for responding to a friend coming out to you:

- Thank your friend for having the courage to tell you
- Do not judge your friend. If you have strong religious or other beliefs about LGBTQ people, keep them to yourself.
- Respect your friend's confidentiality – do not tell others.
- Tell your friend that care about them, no matter what. Be the friend you have always been. The main fear for people coming out is that their friends and family will reject them.
- Ask any questions you have, but understand that your friend may not have all the answers. You can save some questions for later, or, better yet, you can find some of the answers together.
- Include your friend's partner in plans as much as you would any other friend.
- Be prepared to include your friend in your plans. They may have lost the support of other friends and family, and your time and friendship will be even more precious to them. This may include "family" times like holidays or special celebrations.
- Offer and be available to support your friend as they "come out" to others.
- Call as you normally would during the time right after your friend has come out to you. This will let them know you are still friends
- Be prepared for your friend to have mood swings. Coming out can be very traumatic. Anger and depression are common, especially if other friends or family have trouble accepting your friend's orientation.
- Do what you have always done together. Your friend probably feels that coming out will change everything in their life and this is frightening.
- Learn about the LGBTQ community. This will allow you to better support your friend.
- If your friend seems afraid about people knowing, there may be good reason. LGBTQ people are sometimes violently attacked. Some people are victims of discrimination related to housing or employment.
- Do not worry that your friend may have attractions or feelings for you. If you feel uncomfortable, discuss it. LGBTQ people are looking for partners with a compatible sexual orientation.
- It's never too late. If someone has come out to you before and you feel badly about how you handled it, you can always go back and try again.

How to show you are LGBTQ Positive:

- Use words like lesbian, gay, bisexual, transsexual in conversations
- Keep your language free from heterosexual bias – words like “wife” or “husband”
- Wear or display a Pride flag, triangle, or other button and be prepared to talk about them when asked.
- Display LGBTQ positive materials in your workplace or agency.

Adapted from lgbtproject@ns.sympatico.ca – Antigonish Women's Association

Talking to your child

Nobody knows whether they're going to have gay, lesbian, bisexual, transgender or straight children. Because of this, it is healthy to establish a home environment that is affirming to all young people and will give them a sense of belonging, an increased awareness, open-mindedness and sensitivity to others regardless of their sexual orientation or gender identity. This can relieve some of the anxiety, stress and fear experienced by LGBTQ youth when they begin the process of first coming out to themselves and then to others around them. For LGBTQ children and youth, knowing that who they are is okay with their parents affirms their self-esteem.

Suggestions on how to discuss lesbian, gay, bisexual and trans issues with your children: Your own thoughts

The first important thing to do is to reflect on your own attitudes towards LGBTQ people. We all carry around our own prejudices which children notice and internalize. This can be particularly damaging if they are LGBTQ themselves. When such words as "gay" or "fag" are used as common insults, a negative environment is created for anyone who is gay or for anyone questioning their sexual orientation.

- Be aware of your own language. Ensure that you do not make fun of LGBTQ people or make homophobic jokes in front of your child. Do not use the word "gay" as an insult.
- Do not ask your child whether they have a boyfriend/girlfriend and when you discuss your child's future you leave room for them to make their own choices about relationships.

Other People

- Children are exposed to hatred against LGBTQ individuals from a very early age. An example of this can be seen in the use of words like "fag" or "gay" as insults. Your child may not understand what they really mean.
- Explain to your child what it means to be gay and why fag is a word that hurts people.
- Use language that children can understand and adapt your explanations to suit your child's level of understanding around romantic relationships and gender identity.
- Discuss that some women love other women and some men love other men. Or that people can love both men and women. Relating these to people your child knows in romantic relationships can be helpful.

- Discuss different family structures with your child. You could look at pictures of different families with your child (foster, nuclear, single parent, same-sex, extended. Discuss how these are the both the same and different from your family
- Read a variety of books with you children, some suggested titles are:

Who's In a Family by Robert Skutch

One Dad, Two Dads, Brown Dad, Blue Dads by Johnny Valentine

Asha's Mums by Rosamund Elwin and Michele Paulese

King and King and Family by Linda DeHaal and Stern Nijland

How Would You Feel if Your Dad Was Gay? By A. Heron and M. Moron

Heather Has Two Mommies by Leslea Newman

Daddy's roommate by Michael Willhoite

King and King by Linda DeHaan and Stern Nijland

My Two Uncles by Judith Vigna

Adapted from lgbtproject@ns.sympatico.ca – Antigonish Women's Association

Being an Ally for LGBT People

Combating Homophobia and Heterosexism for LGBT Identified People:

- **Understand Homophobia:** Know how homophobia exists on both a personal and institutional level. Be alert for subtle forms of homophobia.
- **Know the history of lesbian and gay rights movement.** Knowledge of history gives us a sense of the past, which in turn helps us create a vision and set a course for the future. It also helps give LGBTQ individuals a sense of their place in the world.
- **Visualize a non-homophobic society.** Having a vision of a non-homophobic society can help us in bringing it about.
- **Find positive LGBTQ role models.** Free yourself of negative stereotypes find inspiring LGBTQ individuals to use as role models.
- **Report all incidents of violence towards LGBTQ individuals.** Silence connotes acceptance. Send that message that any form of violence based on hatred is not acceptable.
- **When challenged, defend your sexual orientation or that of others.** In situations where you feel comfortable doing so, challenge homophobic or heterosexist remarks.
- **Discuss homophobia with others.** Help increase their awareness about the overt or subtle messages they may be sending.
- **Respond to homophobia in movies or TV.** For many people their only experience of LGBTQ individuals is what's depicted on TV. Help make sure that LGBTQ characters are depicted realistically by writing to producers or networks.
- **Know your rights.** Be aware that discrimination on the basis of sexual orientation is illegal, as is discrimination on the basis of association with LGBTQ people.
- **Attend demonstrations.** Share your voice and your support.
- **Write letters to the editor.** Express your views on issues.
- **Sign petitions and organize petition drives.** Lend your support to others who are working to end homophobia or take action yourself.
- **Join LGBTQ Political organizations.**
- **Support corporations with progressive attitudes towards LGBTQ individuals.** Let them know their efforts are appreciated.

- **Know the facts, distinguish between myth and reality.** Don't perpetuate stereotypes.
- **Accept diversity in the LGBTQ community.**
- **Ask libraries to stock LGBTQ books.**
- **Participate in Pride Week events in your community.** Show your support for the LGBTQ community and help them celebrate their culture, history and contributions.
- **Be visible** – do not be afraid to display Pride symbols.

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