Creating Safe, Caring and Inclusive Schools for LGBTQ Students

A guide for counsellors

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Executive Summary

The role of the modern school counsellor is increasingly complex, multifaceted and vital in the creation of healthy, vibrant and resilient schools. Because of their diversity of experiences, school counsellors are in a unique role to be leading change agents and advocates for inclusion, human rights and social justice in their schools. The Society for Safe and Caring Schools and Communities believes that lesbian, gay, bisexual, trans-identified and queer (LGBTQ) students or those who are labelled as such are among the most at-risk groups in today's schools. Schools must become safe, caring and inclusive environments for LGBTQ students and their families and school counsellors can play a catalytic role in creating welcoming environments. Counsellors can help schools make the transition from risky to resilient spaces that accommodate and respect the needs and concerns of *all* students, regardless of their sexual orientation or gender identity.

The information, strategies and ethical guidelines presented in this resource are designed to help counsellors show and model respect and caring, develop supports and services for LGBTQ students, and identify policy gaps or absences in school programming and services.

While this guide is primarily written to build the professional capacities of school-based counsellors, it will also be of value to school administrators and teachers who teach career and life management, personal perspectives or health classes. In addition, preservice teachers and professional counselling schools may also find this material a useful resource in discussions of informed consent, ethical conduct and reflective practice.

Commonly Used Terms & Definitions [1]

Ally – A person who, irrespective of his or her sexual orientation or gender identity, supports and stands up for the human and civil rights of LGBTQ people.

Bisexual – A person who is attracted physically and emotionally to both males and females.

Gay – A person who is physically and emotionally attracted to someone of the same sex. The word *gay* can refer to both males and females, but is commonly used to identify males only.

Gender Identity – A person's internal sense of being male or female. Gender expression relates to how a person presents his or her sense of gender to society. Gender identity and gender expression are often closely linked with the terms *transgender* and *trans-identified*.

GSA – A school-based gay–straight student alliance found in some high schools in North America.

Heterosexism – The assumption that everyone is heterosexual and that this sexual orientation is superior. Heterosexism is often expressed in more subtle forms than homophobia.

Homophobia – Fear or hatred of homosexuality, often exhibited by prejudice, discrimination, bullying or acts of violence.

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

LGBTQ – A commonly used acronym for lesbian, gay, bisexual, trans-identified, transsexual, two-spirited and queer identities. *Sexual minority* is a synonymous term.

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[1]Expanded definitions and more terms are available on the Alberta Teachers' Association's Sexual Orientation and Gender Identity webpage www.teachers. ab.ca, click on Diversity, Equity & Human Rights (under Issues in Education) and follow the links.

Queer – Historically, a negative term for homosexuality. More recently, the LGBTQ communities have reclaimed the word and use it in a positive way to refer to themselves.

Transgender/Trans-identified – A person whose gender identity, outward appearance, expression and/or anatomy do not fit into conventional expectations of male or female. Often used as an umbrella term to represent a wide range of non-conforming gender identities and behaviours.

Transphobia – The irrational fear of people who transgress, challenge or break from stereotypical expressions of male and female gender norms. Transphobia is often expressed in subtle and overt ways that may include stereotyping, harassment, discrimination and violence.

Two-spirited – Some Aboriginal people identify themselves as two-spirited rather than as lesbian, gay, bisexual or trans-identified. Historically, in many Aboriginal cultures, two-spirited persons were respected leaders and medicine people and were often accorded special status based on their unique abilities to understand both male and female perspectives.

Creating Safe, Caring and Inclusive Schools for LGBTQ Students: A Guide for Counsellors

Introduction

In Canada's increasingly multicultural and pluralistic milieu, the old debates about whether or not to address lesbian, gay, bisexual, trans-identified and queer (LGBTQ) issues in schools are no longer appropriate. Rather, the ethical question is now how best to address LGBTQ issues as a part of a safe, caring and inclusive school environment. Accordingly, professional school counsellors can play a catalytic role in ensuring that LGBTQ issues are recognized and appropriately addressed in their schools. Many counsellors are already aware of the diverse realities of their student populations, and many of these counsellors and other school and community-based advocates have assisted in the creation of gay–straight student alliances (GSAs) and other safe space programs for LGBTQ youth (Canadian Public Health Association 1998). However, in smaller and more rural communities inclusive LGBTQ school-based initiatives have been much slower to develop.

In today's schools the role of a counsellor is complex and multifaceted. Increasingly school counsellors are required to be subject specialists, career consultants, personal therapists and school leaders. Some counsellors work in several different schools, while others may be the only designated student support system in a large school. In these diverse and often overburdened situations it may be tempting to refer LGBTQ students to an outside agency for support. However, before making a referral a counsellor should consider if this action is in the best interests of the student (see p. 31). As a critical change agent in schools, counsellors can play a special role in the lives of LGBTQ students. When counsellors simply refer students to outside agencies to avoid addressing LGBTQ realities, they can exacerbate student feelings of isolation, alienation and abandonment (Carroll and Gilroy 2001). Next to the family, counsellors and schools serve as a critical support for many LGBTQ students.

This guide is designed to help school counsellors support LGBTQ students and their families and, in turn, serve as important change agents who advocate for social justice and human rights within their school communities. Specifically, this guide is designed to address the dearth of educational training for school-based counsellors to become advocates and allies for LGBTQ youth. The information presented can help counsellors reflect on their personal biases as well as increase their professional knowledge base and individual skills when working with LGBTQ and questioning students and their families. We have developed this guide under the premise that readers will already possess basic counselling skills and an understanding of the importance of developing an integrated identity and healthy sexuality as part of a student's comprehensive emotional, physical and mental well-being.

This counselling guide is part of a larger series of LGBTQ educational resources developed by the Society for Safe and Caring Schools and Communities (SACSC) and the Alberta Teachers' Association (ATA) that address the educational, health and safety needs of LGBTQ students. Counsellors are invited to learn more about LGBTQ educational issues and community-based resources and referral agencies by visiting the ATA's Sexual Orientation and Gender Identity educational webpage.

Coming Out and Coming to Terms

Current research indicates that between three to ten per cent of the population identify themselves as non-heterosexual (Frankowski 2004; Ryan and Futterman 1998). However, these statistics may be greatly underreported due to the societal stigmatization and fear of violence that is often associated with publicly identifying as non-heterosexual. As society becomes increasingly more accepting of LGBTQ persons, youth are beginning to come out at younger ages. Recent psychological research studies reveal that the average coming out age at which males publicly self-identify as gay or bisexual has dropped from ages 19–21 to age 15 or 16 (Ryan and Futterman 1998; Tharinger and Wells 2000). The coming out age for females has declined from the mid-twenties to age 16 (Ryan and Futterman 1998). Coming out for trans-identified youth can often be a more complex process, which involves the intersection of sexuality, gender identity and gender expression. Therefore, the coming out age for trans-identified persons may be delayed well into adulthood.

Regardless of whether a student is gay, lesbian, bisexual, trans-identified or queer, coming out is a continual and lifelong process that is always mitigated by issues of safety, vulnerability, individual comfort and perceived levels of support and acceptance. This coming out experience is directly linked to a larger *coming to terms* process that involves both the individual who discloses a non-heterosexual identity and the recipient of that disclosure. Researchers suggest that the coming out and coming to terms processes are critical to the mental health of all LGBTQ students (Division 44 of the American Psychological Association 2000; Lipkin 2004; Ryan and Futterman 1998).

In Canada, a 2004 national youth survey of 1358 youth participants between the ages of 13 and 29 revealed that
- 3.5 per cent identified as an LGBTQ person,
- 7.5 per cent of the respondents who considered themselves heterosexual, acknowledged having experimented with members of their own sex,
- 58.6 per cent reported knowing an LGBTQ co worker or classmate,
- 62.1 per cent agreed or completely agreed that they were very comfortable with the topic of LGBTQ issues, and
- 23.8 per cent reported witnessing an act of violence or verbal abuse directed toward an LGBTQ person their own age (in the 15–19 age group the rate was 27.5 per cent). (Youthography Ping Survey 2004)

Regardless of when or if a student comes out at school, it is important for all educators to realize that LGBTQ students are a part of every school, culture, ethnicity, socio economic class and society in the world. Many LGBTQ students simply choose not to make themselves visible when they perceive their school or family environment to be a hostile or unwelcoming space.

If LGBTQ students perceive their school environment to be threatening or unwelcoming, many of them will experience a profound sense of isolation, alienation and fear of exposure (Ryan 2003). These perceptions often significantly impede or compromise the "developmental tasks of adolescence related to self-esteem, identity, and intimacy" (Frankowski 2004, 1828). Unfortunately, as LGBTQ students become more visible, they may also become increased targets for victimization. As a result, it is important that counsellors at all grade levels be prepared to support LGBTQ students by helping them to develop a positive self-identity, self-worth and a sense of feeling safe, cared for and accepted at school.

Frequently Asked Questions

Do LGBTQ students need special counselling?

No. LGBTQ youth do not need "special" counselling; rather, what many LGBTQ youth need are supportive and affirming counselling services. LGBTQ youth should not be thought of as a problem in need of a solution. The real "problem" that should be addressed is a societal and school culture that condones homophobic and heterosexist behaviours and attitudes. Many LGBTQ youth are in double jeopardy by belonging to a vulnerable category of youth, which can be compounded by belonging to a marginalized minority group. In addition, some LGBTQ youth may face multiple forms of oppression as they deal not only with their sexual differences, but ethnic, gender, class, ability and cultural differences as well.

In many cultures, being perceived as an LGBTQ person causes a stigma. As a result, many youth from a wide variety of ethnocultural backgrounds learn to internalize this homophobia. This internalized homophobia can become a major barrier that may impede a student's cognitive, emotional and physical development. School counsellors should be aware of the multiple forms of oppression that students can face and help them work through the challenges of being an LGBTQ adolescent in ethnically and culturally appropriate ways. For example, a counsellor can work with LGBTQ Aboriginal students to explore the traditional value that was placed on two-spirited persons before colonization.

If a counsellor lacks experience in addressing ethnocultural differences, he or she can work with the student to learn more about supportive LGBTQ culturally based perspectives. Establishing links to different ethnocultural groups within the larger LGBTQ community can foster this important learning. Conversely, if no such links exist, a burgeoning amount of literature (both fiction and non-fiction) is developing that explores the richness and complexity of diverse LGBTQ identities throughout a variety of racial, ethnic and global cultures.

What should I do if I believe that a student is LGBTQ?

Never ask about a student's sexual orientation or gender identity in front of the sudent's peers, parents, guardians or teachers. For many students, sexual orientation and gender identity are deeply personal issues. Rather than asking a direct question, counsellors can attempt to create supportive conditions for a student's potential disclosure to take place. For example:

- Post supportive LGBTQ posters and stickers in your office.
- Leave supportive information and resources in your main counselling office or waiting area.
- Resist heterosexual assumptions and monitor your language for inclusivity.
- Use non-gender specific pronouns.
- Model the same language and terms that the student uses to identify himself or herself.
- **Always** assure confidentiality in your meetings with students.

If these signals of support are still not effective, you may choose to begin your counselling session with a series of starter questions. "Would you like to talk about any issues related to sexuality?" "Are you concerned that you might have same-sex feelings?" The major focus for a counsellor in dealing with a student who is questioning his or her sexual orientation or gender identity should be on being accepting and supportive.

If a student comes out to me, do I have a professional responsibility to tell his or her parents or guardian?

Unlike other minority groups, many LGBTQ students cannot safely turn to their own families for support when they have experienced discrimination or prejudice. In some cases, guardians, parents, siblings and other family members may actually be perpetrators of antigay violence against LGBTQ youth. Clearly, counsellors have a professional and ethical obligation not to disclose a student's sexual orientation or gender identity to family members or guardians when such a disclosure may place them in jeopardy. See the Confidentiality and Consents for Service section of this document for more information on disclosure (pp. 26−27).

Should I help an LGBTQ student come out to his or her family?

This can be a difficult dilemma for counsellors. While coming out is a critical factor in the psychosocial development of LGBTQ youth, the disclosure of a student's sexual orientation or gender identity to family members can pose significant risks. The decision to come out must ultimately rest with the student. The counsellor's role should be to help the student explore the potential risks, benefits and realities of coming out. For example, a student who comes from a fundamentalist religious background may experience familial difficulties if he or she comes out. If, after careful deliberation, the student still decides to come out, the counsellor should ensure that a safety net of prearranged housing and support services is in place. Similar strategic planning should occur with any student who perceives that his or her family will have difficulty with the disclosure of the student's non-heterosexual identity.

Coming out suggestions for students:

- Let people know that you don't judge other people based on their ethnicity, gender, religion, ability, size, socioeconomic status, sexual orientation or gender identity.
- If you have a boyfriend or girlfriend, refer to that person by name or as a "close friend" whom you care deeply about.
- Consider having your family or friends meet your "close friend" before you come out.
- If you do decide to come out, set up a time and place to make your disclosure. Come out when you are feeling positive and good about yourself.
- Prepare for a whole range of responses to your disclosure. Reactions can range from good to bad, shock to acceptance, denial to celebration. If possible, try to have a family member or friend ready to support you after you come out.

– adapted from www.sexualityandu.ca and
Canadian Public Health Association (2004)

In addition to working closely with the student, you may also need to help parents adjust to the news that their son or daughter is an LGBTQ person. For some parents, this coming-to-terms process is a time of significant personal and familial adjustment. In some cases when a child comes out, it is the family members who go into the closet. Lipkin (2004) states that "researchers describe six stages of family adjustment: shock, denial, guilt, expression of feelings, return to rationality with varying degrees of acceptance, and finally, true acceptance" (80). Counsellors should be aware of these stages as well as of community organizations such as PFLAG (Parents, Friends, and Family of Lesbians and Gays) that can provide support for the parents of LGBTQ children.

What should I do if an LGBTQ student wants me to speak with his or her parents or guardian?

If a student wants you to meet with his or her parents or guardian, be sure to discuss the risks inherent in that decision. Proceed with caution. Hershberger and D'Augelli (2000) suggest that counsellors ask the following questions before meeting with a student's parents or guardians:

- How much information do the family members or guardians have?
- Did the student tell them? If not, how did family members or guardians find out?
- Which family members or guardians know? What were the reactions of each?
- How long have they known?
- What was the quality of the relationship between the student and the family or guardians before the disclosure and has it changed since?

When working with LGBTQ students who are also members of ethnic, cultural or religious minorities, take into account the following factors:

- The importance of family, community and religious ties.
- The degree to which the student and his/her family or guardians believe in North American values regarding sexuality, sexual orientation and gender identity.
- The student's history of discrimination and/or oppression.
- The local community's beliefs about same-sex relationships.
- Different attitudes toward the disclosure of sexual orientation and gender identity. For example, in many cases non-disclosure does not necessarily indicate shame, denial or a lack of pride in a student's LGBTQ identity.

How do I respond to a student who wants to "change" their sexual orientation or gender identity?

In 1973, the American Psychological Association declassified homosexuality as a mental illness. Thirty years later, many counsellors still have not fully integrated this change into their professional practice (Division 44 of the American Psychological Association 2000). Both the Canadian Psychological Association and American Psychological Association have issued clear statements and professional guidelines denouncing the use and effectiveness of "reparative," "conversion" or "reorientation" therapies that purport to change or cure a person's sexual orientation or gender identity. Research has shown that these approaches are ineffective and ignore the impact of social stigma on mental health, and in many cases can be extremely dangerous (Ryan and Futterman 1998). Even under the request of a student's parents or legal guardians, no professional counsellor should attempt to "cure," "change" or "fix" a student's sexual orientation or gender identity. To engage in such behaviour could be a violation of a counsellor's code of ethics and professional code of conduct. Instead of attempting to change a student's core sense of self, a counsellor should focus on helping a student (and his or her family) overcome feelings of internalized homophobia, transphobia, shame and stigma.

How do I address LGBTQ issues with developmentally delayed or physically disabled students?

Regardless of mental or physical ability, all students have the fundamental right to feel safe, included and accepted in their schools. Just like other students, students with cognitive or physical disabilities may have questions related to sex, sexual orientation or gender identity concerns. A student's disability should not be a barrier to professional counselling and care, nor should a student's concerns be dismissed as trivial or inappropriate. In many cases, persons with disabilities have been regarded as asexual and have been denied the same rights to personal and sexual expression as their able-bodied peers. In other situations, LGBTQ youth with disabilities may become increased targets for sexual or physical victimization (Division 44 of the American Psychological Association 2000).

Some people have an irrational fear of people with disabilities, which can manifest itself both overtly and subtly. Disabled or cognitively impaired LGBTQ students face multiple forms of stigmatization that can pose formidable challenges to the healthy development and integration of their sexuality and personal identity. Counsellors should work to assist their disabled LGBTQ students in integrating their sexual orientation or gender identity within their own uniquely situated identity constructs (Lipkin 2004). Other forms of support when working with disabled or cognitively delayed students might include helping them come out, develop relationships, integrate into the larger LGBTQ community and find community supports and services.

How do I best meet the needs of trans-identified students?

In many cases, trans-identified youth face some of the most severe and pervasive forms of discrimination and prejudice in schools (Chen-Hayes 2001). Counsellors should be aware of the increased risk factors that many trans-identified youth experience on a daily basis. By transgressing not only the category of gender, but in many cases, sexuality as well, trans-identified youth cross two critical identity categories that underlie most of the foundational societal rules, norms and customs of North American culture. When a student expresses "gender confusion" or the belief that he or she is biologically the "wrong" sex, the counsellor should help to support the student in exploring and understanding the biological and socially constructed gendered aspects of our identities. In many cases, students are striving to break away from rigid gender codes that define male and female roles in binary, oppositional ways. In other situations, students may report a fundamental incongruence between their internal sense of self and gender and their external biological sex. A counsellor can help students to understand sex, sexual and gender differences as fluid and operating on a continuum of expression, attraction and identity. Counsellors can also work with school administration and other teachers to ensure that gender identity concerns are included in school policies and practices with respect and dignity (Chen-Hayes 2001).

If counsellors are uncomfortable and unable to offer appropriate support regarding gender identity concerns, they should engage in self-reflection to determine the origins of their resistance. In discussions with trans-identified students and their parents, a counsellor should always be careful to avoid pathologizing the student by medicalizing their concerns. Beyond offering trans-identified students an initial source of support in their

school, a counsellor should also help the student and his or her family find external sources of professional support in the larger community.

Do bisexual students have specific counselling needs?

The most significant stressor in the lives of bisexual students is the polarization of sexual orientation into heterosexual and homosexual binary categories (Division 44 of the American Psychological Association 2000). As a result of this polarization, bisexuals have been traditionally categorized as "fence sitters" who are in a transitional stage of psychosocial development, who must therefore, be guided to choose a "sexual preference" to ensure their healthy identity development. Contemporary research refutes the notion of sexuality as a binary choice. Counsellors are encouraged to adopt a more complex understanding of sexuality that sees physical, emotional and erotic attractions as fluid, relational and situated.

Should I discuss HIV/AIDS with LGBTQ students?

Yes. However, a counsellor should not assume that all LGBTQ students are sexually active. Further, being LGBTQ does not increase the risk of contracting HIV/AIDS or other sexually transmitted infections (STIs). Sexual behaviour, not identity, determines increased risk factors. HIV/AIDS is an issue that affects all youth. A professional counsellor will discuss issues related to sexuality and STIs with all students who disclose that they are sexually active. One of the most significant ways to reduce STI rates (including HIV/AIDS) is to provide access to correct information. For LGBTQ youth, this information is often lacking in schools. Counsellors can help to address this critical absence in culturally sensitive and age-appropriate ways.

For many youth, regardless of their orientation, the compartmentalizing of sexual identity or the avoidance of sexuality-related discussions by parents and teachers can lead to a greater risk of contracting STIs (including HIV/AIDS), engaging in drug and alcohol abuse and higher smoking rates (Lipkin 1999 and 2004). These risks can be compounded for LGBTQ youth from certain ethnocultural and religious backgrounds who need culturally respectful, sensitive and faith-affirming information and discussion.

I'm a counsellor in an elementary school. How are LGBTQ issues relevant to my counselling practice?

Research indicates that sexual orientation and gender identity are established in early childhood (Ryan and Futterman 1998). For example, some students report having had a clear understanding of their sexual orientation and gender identity differences in early elementary school. One recent study found that 21 per cent of elementary school counsellors had students who openly expressed LGBTQ concerns in counselling sessions (Fontaine 1998). In addition to personal concerns, many elementary students also approach counsellors to discuss their same-gender parented families and/or LGBTQ siblings. Still others seek refuge with counsellors when they experience bullying or harassment based on their actual or perceived sex, sexual or gender differences. As a result of these student-based concerns, counsellors should be prepared to address LGBTQ realities in professional, accurate and sensitive ways throughout the elementary grades. It is vitally important for students' healthy cognitive and emotional development to feel that their identities and families are a valued and visible part of their school community. In an effort to create LGBTQ-inclusive elementary schools counsellors can

- use inclusive language and specifically refer to LGBTQ people as a part of their regular classroom or client discussions (Lipkin 2004);
- address homophobic language, name calling and bullying;
- hang posters identifying the classroom or school as a safe space for LGBTQ students and families;
- discuss different aspects of social diversity that includes a respect for difference and nontraditional family structures; and
- use age-appropriate curricular resources, such as picture books, to highlight the realities of same-gender parented families in early grades. (Schrader and Wells 2005)

I'm a counsellor in a religious-based school. How can I address LGBTQ issues from a faith-based perspective?

The largest misconception that prevents faith-based schools (and educators) from addressing issues related to sexual orientation and gender identity is the conflation of sexuality and sexual practice as synonymous terms of identity expression. Because a student is an LGBTQ person does not automatically means that they are or will be sexually active. LGBTQ student concerns and issues should be addressed within a framework of student health, safety and human rights. Sexual orientation and gender

identity concerns can be addressed respectfully within all faith-based contexts. Many community groups work to integrate both spirituality and sexuality. Counsellors should take note of such organizations as important sources for guidance and referral.

How can I actively support LGBTQ students in my school?

As the school counsellor, you are in a unique position to become one of the leading change agents and diversity advocates in your school. You can signal your support by posting LGBTQ affirming posters and stickers on your office door or on bulletin boards around your school. Other suggestions follow.

- Become the teacher-advisor for a gay–straight student alliance (See the ATA guidebook on creating and sustaining GSAs in Alberta schools).
- Recommend purchasing library books with LGBTQ inclusive characters and themes.
- Ensure that your school's Internet software does not block access to LGBTQ websites and other sources of supportive information. In many cases, especially for rural youth, access to information on the Internet may be an LGBTQ student's only source of support. (Schrader and Wells 2005)
- Develop a listing of LGBTQ youth-supportive community resources and display them in your office or counselling area.
- Invite LGBTQ speakers into Career and Life Management or Personal Perspectives class or show videos from the National Film Board of Canada's "Celebrating Diversity" series of LGBTQ educational resources.
- Encourage your school to book one or more of the ATA's Sexual Orientation and Gender Identity professional development workshops.
- Make an extra effort to reach out to LGBTQ youth in rural communities who may not have many visible sources of support or signs of acceptance.

Practices that counsellors should **<u>avoid</u>**, include

• attempts to change or "repair" a student's sexual orientation or gender identity,
• taking a "love the sinner, hate the sin" approach,
• unauthorized disclosure of a student's sexual orientation or gender identity to family, friends and teachers (except in cases of suicide ideation or other harm-inducing behaviours),
• denial of counselling services or access to community supports and
• suggesting that sexual orientation or gender identity confusion is simply a phase that a student will grow out of.

Did you know?

The Alberta Teachers' Association (ATA) and the Society for Safe and Caring Schools and Communities (SACSC) have developed a Safe Spaces Initiative that features an LGBTQ poster, sticker and brochure. To order the Safe Spaces materials, contact SACSC at 447-9487 (in Edmonton) or 1-800-232-7208 ext 487 (toll free in Alberta). Or download the materials for FREE by visiting the ATA's Sexual Orientation and Gender Identity webpage.

Health and Safety Concerns

According to the American Psychological Association (Lipkin 2004), school-based counsellors report four major issues that they often encounter when working with LGBTQ youth: (1) coming out, (2) family relationships/acceptance, (3) harassment and (4) safety. Many LGBTQ youth report great difficulty with some or all of these issues. Some of these difficulties may appear when LGBTQ or questioning students challenge school authority figures as they struggle to adapt to an environment where their identities are often silenced or devalued. Other LGBTQ and questioning youth try to adjust to these primarily heterosexual (and often homophobic) environments by blending in with the crowd in the hopes that they will not be noticed or ridiculed for their actual or perceived differences. Still other students attempt to become the best and the brightest students in the school.

Because you can't always see the LGBTQ students in your school does not mean that they are not present. LGBTQ students are everywhere. They are the overachievers, underachievers and middle-of-the-road students. It is important to remember that the stress associated with the stigmatization of being (or being perceived as) an LGBTQ youth places many adolescents at risk for suicide, school-related problems, homelessness, violence and substance abuse (Friend 1993 and 1998). It is the culture of homophobia, transphobia and heterosexism that is the problem, not simply being an LGBTQ youth. As concerned counsellors, you must be aware of the pressing educational, health and safety concerns that many LGBTQ and questioning youth face on a daily basis.

The otherside of the coin is the LGBTQ students who are so driven to be accepted that they excel. Look for LGBTQ among
- perfectionistic "A" students,
- scholarship winners,
- doctors, lawyers, professors, artists, musicians and
- high-performance athletes.

While many LGBTQ students are high achievers in schools, teachers and counsellors must be cautious not to always equate high achievement with high self-esteem (Lipkin 2004). Some LGBTQ students use academics, athletics or extra-curricular activities as coping mechanisms; that is, they excel in areas of their lives where they feel they can have some measure of control. Other students may become "care-givers" who offer extra-ordinary support and guidance to their family and friends as a way to avoid caring for themselves (Lipkin 2004). Often these external appearances mask internal feelings of despair, shame and dishonesty. Still others keep themselves so busy with school and extracurricular activities so as to deliberately distance themselves from inquiries about why they do not have an opposite sex boyfriend or girlfriend.

Maybe one day we will think of LGBTQ students not as at-risk youth or as overachievers, but simply as ordinary youth who accept life's challenges on a daily basis. However, until that day arrives, many LGBTQ and questioning youth will continue to struggle to survive in school, family and community environments that fail to recognize, affirm and embrace their identities.

Suicide
- "Canada has one of the highest youth suicide rates in the world . . . of all teens who commit suicide, about one-third appear to be homosexual in orientation" (Kroll and Warneke 1995, 1).
- In British Columbia, 46 per cent of gay and lesbian youth surveyed have attempted suicide at least once. The average age of the first suicide attempt was 13 years old (McCreary Centre Society 1999).
- In the United States, gay and lesbian youth represent 30 per cent of all completed teen suicide. Extrapolation of these statistics demonstrates that a successful gay teen suicide attempt occurs every five hours and 48 minutes (Gibson 1994).
- Lesbian and gay persons who did not attempt suicide differed in two ways from those who did attempt suicide:
    - o They experienced less stress in coming out to their parents/family and
    - o they experienced less ridicule for their sexual orientation or gender identity (Ryan and Futterman 1988).

School-Related Problems

A recent Canadian study on the health and safety needs of LGBTQ youth found that

- two-thirds of gay and lesbian students heard homophobic remarks from other students at school,
- thirty-seven per cent of gay and lesbian youth questioned felt like outsiders at school,
- almost forty per cent of gay and lesbian youth surveyed have dramatically low self-esteem, and
- thirty-nine percent of participants told a teacher or school counsellor they are gay or lesbian (McCreary Centre Society 1999).

Homelessness

- LGBTQ homeless youth are thought to constitute 50 per cent of the adolescent street youth population (Lipkin 2004). Sadly, many of these LGBTQ youth are forced to turn to prostitution and criminal activity to survive. Even these drastically high rates are thought to be under-reported, since LGBTQ youth are unlikely to reveal their sexual orientation or gender identity to authorities. One reason why LGBTQ youth represent disproportionately high numbers of the street-involved population is because many LGBTQ youth are forced out of their homes when they disclose their sexual orientation or gender identity to their families (Grace and Wells 2001; Ryan and Futterman 1998).

Violence and Physical Safety

- Nearly one in five gay and lesbian youth reported having been physically assaulted at school in the past year (McCreary Centre Society 1999).
- A 1999 Safe Schools Coalition study of Seattle public schools found that LGBTQ youth were five times more likely than their heterosexual peers to be targets of violence and/or harassment, almost three times more likely to be injured in a fight severely enough to need medical attention and nearly two times more likely to be threatened or injured by someone with a weapon. Since the study's inception in 1993, seven young people have reported being gang-raped in public schools because of their sexual orientation (Reis 1999).

Substance Use and Abuse

- Many LGBTQ youth learn to internalize negative messages regarding sexual orientation and gender identity and as a result turn to drugs and alcohol as coping mechanisms in an attempt "to manage stigma and shame, to deny same-sex feelings or as a defense against ridicule and anti-gay violence" (Ryan and Futterman 1998, 45).

Other external signs that a student might be struggling with his or her sexuality include unhealthy body modifications such as excessive piercings, cutting, scarification, anorexia and bulimia. For example, Lipkin (2004) states that bulimia rates are ten times higher among gay male students than their heterosexual male peers. This alarming statistic is in direct correlation to many of the gay male communities and media advertisements that place an overwhelming emphasis on athletic, white, muscular and hairless men as the only acceptable type of gay man. As a result of these cultural and community-specific factors, body image may be a key area of inquiry for counsellors to pursue in their conversations with LGBTQ youth.

Despite these daunting statistics, the vast majority of LGBTQ youth are not at-risk. Counsellors must be careful not to assume that all LGBTQ youth who come to visit them are in crisis. In many cases, all that LGBTQ students are looking for is someone who will be a supportive listener and can help them to explore their unique personal attributes, creativity and resilience (Lipkin 1999).

Increasingly, researchers, teachers and counsellors are moving away from a deficit-based model and are beginning to focus on the need to better understand the factors needed to create vibrant, healthy and resilient LGBTQ youth (Lipkin 2004). For example, research is starting to explore the necessary conditions that must be in place for schools to move from risky to resilient places for LGBTQ students. For many youth, this transition from risk to resilience begins with a supportive counsellor who can help them navigate their way through the coming-out and coming-to-terms processes.

LGBTQ Youth Violence and Victimization

A kindergarten teacher sought consultation on how to work with her students and their parents to address an issue of harassment. Two girls had been in the "house and home" center, pulling out clothes out of the dress-up box, arranging pretend food on the table. They draped scarves and lace over their heads and around their shoulders. One said to the other, "I know. Let's get married. We'll be lesbians." The two girls stood together with their arms linked as if they were walking down the aisle. Another girl who had been playing nearby jumped up, yanked a scarf from one of the bride's heads and screamed, "You are in trouble–you're going to burn up or get really sick because people like you are bad, so stop it!" By this time, a few other children had joined in saying things like, "Yeah, that's nasty," or "I'm gonna tell!" One boy ran into the fray to punctuate what had been words up to that time. In a flurry of movement he kicked one of the dressed up girls and slugged the other. All of this occurred in the few moments it took the teacher to disentangle from the yarn and other art materials she was using with a group across the room. She had heard the interaction and called out several times to stop it. She reached the scene in time to prevent the boy's next blow and began the process of de-escalating the conflict and comforting the two girls. The little girl who first opposed the imaginary marriage stood back from the scene and said to the teacher, "My mama won't let me come here anymore. I'll tell her, too. People who do like them are the baddest. They make other people sick and they kill other people. My daddy said we have to kill them first."

> – School psychologist describing incidents of physical and psychological harassment in an elementary school, as cited in Henning-Stout, James and Macintosh 2000, 180.

Not surprisingly, students who have experienced bullying, harassment, discrimination and other forms of physical, psychological and emotional abuse because of their sex, sexual and gender differences are at a greater risk of further victimization (from themselves and others) than other youth who have found sources of support and acceptance. Like the above vignette, the research literature is filled with narratives expressing the negative experiences associated with being or being perceived as an LGBTQ child and/or adolescent (Blackburn 2004). As the

health and safety concerns from the previous section demonstrate, LGBTQ youth face a significant number of increased emotional and physical risk factors. The roots of prejudice, harassment and discrimination that undergird these risk factors are planted early, occur often and are habitually present in heterosexist school, family and community environments (Henning-Stout, James and Macintosh 2000).

D'Augelli (1998) identifies four primary reasons why LGBTQ youth are at increased risks for victimization: (1) youth in general are vulnerable and this vulnerability increases for LGBTQ youth as members of a marginalized community, (2) LGBTQ youth tend to congregate in LGBTQ identified neighbourhoods and events that become prime targets for gay bashers, (3) LGBTQ youth are often stereotypically associated with the HIV/AIDS epidemic and (4) they are frequently victimized as part of a backlash to the larger visibility of LGBTQ persons in society and the media (p 188).

In addition to direct attacks, D'Augelli (1998) identifies systemic victimization in the form of institutional and social stigmatization as key concerns that must be eliminated if LGBTQ youth are to be afforded the opportunity to meet the developmental tasks of adolescence. D'Augelli identifies institutional victimization as taking place in organizations, such as schools that lack specific policies and procedures to protect LGBTQ youth from violence, harassment and discrimination. Social stigmatization against LGBTQ persons, in general, is compounded for LGBTQ youth because of their vulnerable age and membership in a marginalized group. As a result, many LGBTQ youth engage in social vigilance as a survival strategy by which they learn to constantly assess and monitor their environments for signs of danger. In some cases, this perceived need for social vigilance widens the distance between the healthy integration of private and public identities (D'Augelli 1998). Without the opportunity to safely discuss and explore their emerging sexual identities, LGBTQ youth may further internalize society's negative messages.

Consequences of Victimization for LGBTQ youth

Internalizing behaviours – fear, low self-esteem, anxiety, withdrawal, depression and sadness.

Externalizing behaviours – homophobic bullying, aggression, violence, "acting out," truancy and delinquency

– adapted from Elze 2002.

These internalizing and externalizing behaviours are often learned "scripts" that LGBTQ students adopt as ways to cope with experiences of victimization. In some cases, LGBTQ students will even perceive limited career options because of the heterosexist and negative stereotypes and misconceptions that surround LGBTQ persons. As a result, many LGBTQ students will doubt their own agency as they grapple with their private feelings and the impact that disclosing their sexual minority identity will have on their public lives and career possibilities (Lipkin 1999). Healthy role models across the lifespan–from LGBTQ adolescents/peers to LGBTQ seniors/elders—can help LGBTQ youth envision a hopeful, happy and productive future.

Major developmental tasks of adolescence

- Forming a cohesive sense of self and identity
- Being an individual and being connected
- Achieving autonomy and belongingness
- Balancing support and independence

The positive resolution of these developmental tasks is reflected in
- academic achievement,
- involvement in extracurricular activities,
- forming close friendships within and across genders,
- maintaining self-esteem and
- addressing sexuality concerns.

– as cited in Tharinger and Wells 2000, 161

Responsivity and support from educators in accomplishing these tasks are critical to all aspects of healthy adolescent development. Essential to the educational intervention and support for LGBTQ students is the perception of a "safe and secure environment that promotes increasing options and choices" (Tharinger and Wells 2000, 162). Along with these protective factors, other influences are critical building the capacities of LGBTQ youth to address issues related to victimization and, in turn, develop the necessary resiliencies to proactively address and overcome the negative effects of discrimination within their schools and communities. Fenaughty and Harré (2003) identify these resiliency factors as (1) positive representations, (2) family and community acceptance, (3) positive peer and school relationships, (4) LGBTQ support networks, (5) access to a variety of coping strategies that can lead to (6) higher levels of self-esteem, and an increased sense of belonging. Tharinger and Wells (2000) also underscore that "parent–family and perceived school connectedness are protective [factors] against every health risk behaviour measured except history of pregnancy" (p 163).

Professional school counsellors are in a unique position to combat discriminatory environments by working collaboratively to create safe, caring and inclusive school communities where all students can feel welcome and supported for their unique differences. As school-based change agents, counsellors can help to build inclusive school cultures by providing access to accurate information, demonstrating an ethic of respect and caring, developing resources and programs to support LGBTQ students and helping to identify policy gaps or absences in school programming and services (Henning-Stout, James and Macintosh 2000).

Confidentiality and Consents for Service: Implications for School Counsellors

Confidentiality is a general standard of professional conduct in which a professional does not discuss information about a student with anyone. As an ethical principle, confidentiality implies an explicit contract not to reveal anything about a student except under certain circumstances agreed to by both parties, or when a student may be in danger. When students disclose their sexual orientation or gender identity, a counsellor should respect the student's right to confidentiality. Failing to do so can pose risks to students when coming out to their parents, family members, teachers and friends.

Consent for service has three necessary components: (1) a demonstrated competence for decision-making (the ability to decide whether or not to participate in treatment), (2) voluntariness (a decision made in the absence of coercion, be it implied or actual) and (3) understanding (the degree of discernment regarding the process and consequences of treatment being presented).

What does this mean in a school setting, particularly for counsellors who work with minors?

Normally, parental consent is required before a child or adolescent can begin counselling. If a parent provides informed consent, details of confidentiality can be negotiated between the parent, child/adolescent and counsellor.

Possible questions to ask might include:
* What kind of information needs to be shared with the parent? (e.g., drug use, self-injurious behaviours, high-risk sexual activity).
* What information can be kept between the counsellor and student? (e.g., everything else except, of course, any information related to the potential risk of harm to self or others; reports of neglect or abuse; or court subpoenas).

Exceptions do exist for the requirement of parental consent:

- If the child or adolescent is a "mature minor," he or she can consent to treatment independently if he or she is of sufficient maturity or intelligence to understand fully what is being proposed. This exception requires the minor to prove competence (Henkelman and Everall 2001). According to the College of Alberta Psychologists (CAP) document on "Limits to Confidentiality and Consent for Services: Special Issues in Working with Minors and Dependent Adults," a court precedent suggests that a minor would likely not be considered a mature minor before the age of 15 or 16.
- Emancipated minors are legally entitled to the rights and responsibilities of adulthood as outlined in legislation (e.g., a married minor) (Henkelman and Everall 2001).
- Emergency treatment can proceed without parental consent with consent being understood as in loco parentis ("in place of the parent") or implied due to the urgency of the situation (Henkelman and Everall 2001).
- If the court orders counselling, both the minor's ability to consent and the ability of the parent to consent are overridden (Henkelman and Everall 2001).
- According to guidelines from the College of Alberta Psychologists, and specific to psychologists who work in schools, an independent student (as defined in Section 1(m) of the *School Act*) has the authority to consent to services. An independent student is one who is
  (i)   18 years of age or older, or
  (ii)   16 years of age or older and
         (A)   who is living independently, or
         (B)   who is a party to an agreement under section 57.2 of the *Child Youth and Family Enhancement Act*.

In addition, "by policy of Alberta [Education], guidance and counselling services provided in the schools are viewed as an integral component of the school program. Consequently, parental consent is not required for the provision of guidance and counselling services. However, informed consent is required for psycho-educational testing" (CAP Guidelines 2002, 2).

What Do I Say? — Guidelines for an Inclusive Counselling Practice

Self-Reflection

If you are a counsellor working with LGBTQ or questioning students, you might consider how your own religion, ethnicity, gender, class, ability, culture and sexual identity shape your biases. For example, how does your gender affect your counsellor–client relationships? What are your personal beliefs about the fluid or fixed nature of sexual orientation and gender identity? If you are an LGBTQ person, how did the development of your own sexual identity affect your therapeutic relationship?

What follows are some general practice guidelines designed to assist you in working with LGBTQ students and their families.

- Being yourself and being sincere are of critical importance. A professional ethic of openness, caring and acceptance will help you hear a student's voice. Speak to each student thoughtfully and with respect. Be both "youth positive" and "queer supportive" (CPHA 2004). These skills should be central components of a thoughtful and effective counselling practice. Do not assume that you know why a student has come in for an appointment. Come from an "informed, yet not knowing" position by asking open-ended questions in which students can tell their stories unburdened by the counsellor's prior assumptions about gender, sex and sexuality. Model and reaffirm the terms that the student uses. If students are uncomfortable with words such as lesbian, homosexuality, gay and so on, use terms like same-sex feelings, attraction or relationships instead.

- Empower your students by seeing them as experts on their own lives. This strength-based approach can demystify the counselling process. This student-centered approach can be accomplished by discussing confidentiality issues, offering relevant self-disclosures and negotiating the goals of therapy. Before counselling begins, ask each student client what he or she hopes to achieve from the counselling session. It may be helpful to reflect on and summarize the points discussed in each session.

- Recognize that students often have more than one issue to discuss and never assume that the presenting issue is the most critical or important. Provide all student clients with the time and opportunity to discuss

their concerns in detail and work with them to help prioritize their issues and concerns. If time is limited, establish a follow-up appointment or refer them to someone else they can talk to.

- Integrate sexuality and gender issues throughout therapy and ask for student feedback regarding its relevance to different issues. Not all issues will stem from, or be related to, sexuality, gender or gender identity concerns.

- Validate the student's feelings, whether he or she is feeling alone, afraid, guilty, ashamed, angry, excited, proud, comfortable, whole and strong. Work to affirm your student's hopes and perceived options as a LGBTQ person.

- Offer to support the student during the coming-out and coming-to-terms processes and resist categorizing their identities in simplistic, binary or stereotypical terms.

- Provide accurate information about community resources, books, magazines, health issues and local support/youth groups.

- Be open to discuss dating and sexual behaviour. This discussion might help students think about the potential consequences of behaviours and, in turn, develop a healthy sexual identity and self-esteem.

- Recognize that violence and abuse can occur in all types of relationships regardless of the person's sexual orientation, gender or gender identity.

- Help students develop strategies for navigating such situations as relationships with older partners, club/bar scenes and sexualized environments. These strategies may include connecting students with appropriate community organizations in which they can engage in social activities without feeling sexually coerced.

- Be prepared to address such sociopolitical issues as marginality, privilege and power. These issues may surface when you are discussing the influence of gender norms, societal prejudices and the role of stereotypes in the oppression of LGBTQ persons. Recognize that LGBTQ youth are at an increased risk for victimization and violence within their school and larger community. Attempt to understand how these oppressive influences can consciously or unconsciously affect a student's self-concept, self-esteem and relationships. In some cases, students may unknowingly experience these negative messages as a form of internalized homophobia ("I deserve to be abused", "Society tells me that I'm bad, so why worry about safer sex practices or drugs and alcohol abuse?")

- Be prepared to intervene and advocate for services, support and resources on behalf of the student.

Responses to Avoid

Denial – Do not tell students that they are wrong about their sexuality or gender identity.

Lecture – Don't tell students that their sexuality or behaviour is unnatural or unhealthy. Accept the views and choices of each student.

Liberal response – Resist telling a student that he or she is no different from anyone else. This can undervalue a student's sense of individual uniqueness and self-worth.

Inadequate response – Don't avoid issues of sexuality, especially when they are related to sexual minority identity.

—Adapted from Black and Underwood 1998

Serving Youth Counselling Needs

- Reaffirm that all counselling sessions are confidential.
- Make youth feel welcome and supported.
- Provide accurate and unbiased information in a language that youth can understand.
- Be nonjudgmental and accept youth for who they are and not for whom society tells them they should be.
- Ask for and respect their opinions and needs.
- Allow youth to make their own informed decisions.
- Provide sexuality and life skills education.
- Provide services at the time youth need them and within the time they have available.

—Adapted from the Canadian Public Health Association's Sexual and Reproductive Health Counselling Guidelines (2004)

Counsellor Reflection and Referral

All counsellors should have a clear understanding of their own personal and professional boundaries and individual counselling strengths and weaknesses. For example, a student may require medical, family or other professional services that are beyond the scope and expertise of school-based counsellors. It may be helpful in the referral process to explore what the student's preferences for counselling are. You may also need to ask the student about previous experiences with other individuals or outside agencies. Has the student experienced barriers to service? If so, what needs to happen to ensure continuity of care in the referral process? Because of the multifaceted and unique role that school counsellors play within the educational system, all counselling offices should establish a detailed support network of professionals, service agencies and organizations that specialize in LGBTQ-related health, safety and counselling issues.

Prior to making a referral, it may be beneficial to consult a colleague to determine how to strengthen your competence in this area. In addition, it will also be helpful to evaluate how your own experiences, attitudes, culture, beliefs, values, social context, individual differences and stresses influence your interactions with others. After these options have been pursued, you might still wish to refer the student if

- your beliefs about sexual orientation and gender identity prevent you from being able to provide the support that LGBTQ youth needs (e.g., personal bias is impacting counsellor's level of competence). Be sure that you are not making a referral to simply avoid addressing LGBTQ issues;

- the student's or family's problem(s) or issues are beyond your professional level of competence;

- the student's needs can be better met within longer term counselling;

- the student's needs may require more in-depth counselling or specialized referral; or

- you need to transition from inschool counselling to counselling support over the summer months.

When giving a referral, a counsellor should also clearly explain what the student should expect from the referral. All referral services should be given to the student in writing (including contact information, hours of service, website address and, if available, a brochure or pamphlet). The counsellor can also check-in with the student later to see how things are going. If the student is not satisfied, the counsellor, in consultation with the student, should attempt to find other sources of support.

Important Guiding Legislation and Policies

Schools should promote and support environments that contribute positively to *all* students' physical, psychological and emotional development. This responsibility extends to all students regardless of race, ethnicity, ability, class, gender, religion, sexual orientation and gender identity. The following legal, legislative and professional guidelines can help counsellors to advocate for the needs and concerns of LGBTQ students in their schools.

1. The Alberta *School Act* Section 45(8)
(Available from the Queen's Printer) www.qp.gov.ab.ca/catalogue

> A board shall ensure that each student enrolled in a school operated by the board is provided with a safe and caring environment that fosters and maintains respectful and responsible behaviours.

In the context of education, courts have held that publicly funded schools, school boards and the actions/non-actions of school officials are subject to Charter scrutiny. As a result, all students have the right not to be discriminated against in school settings; this right is often violated with respect to LGBTQ students. Teachers, administrators and school boards have a mandated responsibility to ensure that LGBTQ youth and their families are treated with respect and integrity. Addressing homophobia, transphobia, heterosexism and all prejudice related to sexual identity is vital to the health and safety needs of all students.

2. The ATA Code of Professional Conduct
www.teachers.ab.ca/Teaching+in+Alberta/Professional+Conduct

> (1) The teacher teaches in a manner that respects the dignity
> and rights of all persons without prejudice as to race, religious
> beliefs, colour, gender, **sexual orientation, gender identity**,
> physical characteristics, disability, marital status, family status,
> age, ancestry, place of origin, place of residence, socioeconomic
> background or linguistic background.

3. The Declaration of Rights and Responsibilities for Teachers
www.teachers.ab.ca/Teaching+in+Alberta/Rights+and+Responsibilities

> (9) Teachers have the right to be protected against discrimination
> on the basis of prejudice as to race, religious beliefs, colour, gender,
> **sexual orientation, gender identity**, physical characteristics,
> disability, marital status, family status, age, ancestry, place of
> origin, place of residence, socioeconomic background or linguistic
> background and have the responsibility to refrain from practising
> these forms of discrimination in their professional duties.

4. Canadian Charter of Rights and Freedoms
http://laws.justice.gc.ca/en/charter

Section 15 (1) of the *Charter* states that

> Every individual is equal before and under the law and has the
> right to equal protection and equal benefit of the law without
> discrimination and, in particular, without discrimination based
> on race, national or ethnic origin, colour, religion, sex, age or
> mental or physical disability.

Although Section 15(1) of the *Charter* does not explicitly make reference
to sexual orientation in its equality provisions, the courts have regarded
sexual orientation as analogous to the other personal characteristics listed.
The inclusion and the accommodation of difference are the spirit of
Section 15.

5. *Alberta Human Rights, Citizenship and Multiculturalism Act*
www.albertahumanrights.ab.ca

Although not expressly stated in the Act, as of April 2, 1998, sexual orientation is read in to the Act by the Supreme Court of Canada as a protected ground of discrimination in Alberta.

6. *Bill C-250 – An Act to amend the Criminal Code* **(Hate Propaganda)**
http://laws.justice.gc.ca/en/C-46

Bill C-250 was passed in the House of Commons in February 2004, amending Section 318 (Hate Propaganda) and Section 319 (Incitement of Hatred) of the Criminal Code of Canada to include sexual orientation within the listing of identifiable groups against which hate propaganda is deemed a criminal offense.

7. Canadian Code of Ethics for Psychologists
http://www.cpa.ca/ethics2000.html

The selected guidelines presented below, as cited from the Canadian Psychological Association's Code of Ethics, are of particular relevance for counsellors who work with LGBTQ students and their families. Respecting the dignity of persons is at the heart of an inclusive, professional and ethical school-based counselling practice. This fundamental principle of respect may involve the ways in which counsellors engage in the use of inclusive language, how they support students or families as they work through perceived problems or issues, and how counsellors attend and listen in a nonjudgmental and accepting manner to the various stories and experiences that a student client or family member has to share.

Principle I: Respect for the Dignity of Persons
General Respect

I.2 Not engage publicly (e.g., in public statements, presentations, research reports, or with clients) in demeaning descriptions of others, including jokes based on culture, nationality, ethnicity, colour, race, religion, gender, etc., or other remarks which reflect adversely on the dignity of others.

I.3 Use language that conveys respect for the dignity of others (e.g., gender-neutral terms) in all written or verbal communication.

Non-Discrimination

I.9 Not practice, condone, facilitate, or collaborate with any form of unjust discrimination.

I.10 Act to prevent or correct practices that are unjustly discriminatory.

Informed Consent

I.12 Respect and integrate as much as possible the opinions and wishes of others regarding decisions which affect them.

Confidentiality

I.40 Share confidential information with others only with the informed consent of those involved, or in a manner that the individuals involved cannot be identified, except as required or justified by law, or in circumstances of actual or possible serious physical harm or death.

Extended Responsibility

I.41 Encourage others, if appropriate, to respect the dignity of persons and to expect respect for their own dignity.

Principle II: Responsible Caring

General Caring

II.2 Avoid doing harm to clients, students, research participants, colleagues and others.

Competence and Self-Knowledge

II.8 Take immediate steps to obtain consultation or to refer a client to a colleague or other appropriate professional, whichever is more likely to result in providing the client with competent service, if it becomes apparent that a client's problems are beyond their competence.

II.9 Keep themselves up to date with relevant knowledge, research methods and techniques, through the reading of relevant literature, peer consultation and continuing education activities, in order that their service or research activities and conclusions will benefit and not harm others.

II.10 Evaluate how their own experiences, attitudes, culture, beliefs, values, social context, individual differences and stresses influence their interactions with others, and integrate this awareness into all efforts to benefit and not harm others.

Risk/Benefit Analysis

II.13 Assess the individuals, families, groups and communities involved in their activities adequately enough to ensure that they will be able to discern what will benefit and not harm those persons.

Principle III: Integrity in Relationships
Reliance on the Discipline

III.36 Seek consultation from colleagues and/or appropriate groups and committees, and give due regard to their advice in arriving at a responsible decision, if faced with difficult situations.

Principle IV: Responsibility to Society
Development of Knowledge

IV.2 Keep informed of progress in their area(s) of psychological activity, take this progress into account in their work and try to make their own contributions to this progress.

Respect for Society

IV.13 Acquire an adequate knowledge of the culture, social structure and customs of a community before beginning any major work there.

Development of Society

IV.26 Speak out and/or act, in a manner consistent with the four principles of this Code, if the policies, practices or regulations of the social structure within which they work seriously ignore or oppose any of the principles of this Code.

Suicide Crisis Intervention

Contemporary research indicates that LGBTQ youth are two to three times more likely to attempt suicide than their heterosexual peers (Ryan and Futterman 1998). One Alberta study found that gay male and bisexual youth are 14 times more likely to consider suicide than their heterosexual male peers (Bagley and Tremblay 1997). Clearly, LGBTQ youth face significant social, cultural, political and personal pressures that affect their emotional, physical and cognitive well-being. The suicide intervention information below is presented with the knowledge that it is the pervasive societal culture of homophobia, transphobia, heterosexism and prejudice against those perceived as being different that has the most dehabilitating effect on the lives of LGBTQ youth in their schools, families and communities.

Assessment

Clarify as accurately as possible the degree to which the student is at risk of committing suicide.

1. **Warning Signals**
   a. **The student is preoccupied with thoughts of death and is exhibiting the following signs:** A specific plan for a suicide attempt; means of carrying out the suicide attempt; suicide threats; previous attempt(s); dealing with the death of a significant person through suicide; making final arrangements (e.g., giving away favourite possessions, writing a will, etc.); and a sudden apparent calmness about the decision to attempt suicide.
   b. **Significant changes in relationships and/or environment:** Loss of significant person through death, divorce or separation; loss of an object of affection; loss of employment/status; loss of health; and a geographical move.
   c. **Observable changes in motivation and behaviour:** Decreased work or academic performance; persistent lateness or unexplained absences from school; decreased social activity; withdrawal; apparent loss of involvement in interests/hobbies; aggressiveness; moodiness; lethargy; evidence of anxiousness; extreme tension; agitation; restlessness; lack of concentration; outbursts of anger at self/world; and self-abuse (e.g., self-injury, risk-taking, substance abuse, etc.).

d. **Observable changes in affect or personality:** Verbally expresses self-hatred, self-disgust; expresses feelings of hopeless and helpless; feels misunderstood and unappreciated; shows signs of severe depression; cries easily; says that life is too painful or difficult; and loss of pleasure.

e. **Physical/somatic changes:** Loss or increase of appetite; increase or decrease in sleep; exhaustion; loss of physical and mental energy; and inability to experience pleasure.

2. **Determine Level of Risk and Action Needed**

   a. A cluster of warning signals may indicate that the student is at high risk.

      i. **Low Risk:** The person has had some suicidal thoughts, such as "I can't go on," "I wish I were dead," but has not made any plans.

         What you should do
         - Offer emotional support.
         - Work through suicidal feelings (e.g., openly talk about feelings of loss, isolation, worthlessness).
         - Focus on the student's positive strengths (e.g., talk about how the person has resolved earlier problems without resorting to suicide).
         - Refer the person to a mental health professional or to a doctor.
         - Meet at regular intervals and maintain ongoing contact.

      ii. **Medium Risk:** The person has suicidal thoughts and plans, but has no plans to commit suicide immediately.

         What you should do
         - Make a suicide prevention contract (e.g., a promise from the person that he/she will not commit suicide before seeing a health care professional and/or for a specific period of time). **If the student cannot make a contract, the student is automatically placed in the high-risk category.**

- Offer emotional support
    - o Reposition the student's ambivalence as a resiliency factor and strength (e.g., focus on the ambivalence felt by the suicidal person so that gradually the wish to live is strengthened).
    - o Explore alternatives to suicide.
    - o Refer the person to a health care professional, doctor, counsellor, or psychiatrist and make an appointment as soon as possible.
    - o Contact the family and friends to enlist their support.

iii. **High Risk:** The person has a definite suicide plan and has the means to do it and plans to do it immediately.

   What you should do
   - Stay with the person. **NEVER** leave the person alone.
   - Gently talk to the person. If it is possible (that is, it is safe for you), remove the pills, knife, gun, insecticide, etc.
   - Make a suicide prevention contract.
   - Contact a mental health professional, doctor or the police immediately and arrange for assistance, an ambulance and hospitalization.
   - Inform the family and enlist their support.

Do not let the person talk you out of calling an ambulance. Suicidal persons will often minimize their risk of committing suicide. If they will not cooperate, immediately contact your school administration, notify the police and inform them of the nature of the situation. Request that an ambulance meet the police at the school to transport the student to the hospital. Do not let the fear of damaging the student's image or reputation stop you from getting the help the student needs.

To identify risk levels you might ask:

- "What's going on today?" Find out the story. Let the person tell it in his or her own way using his or her own language.
- What are the protective factors? Find out how stress is dealt with and what the student's support systems are.
- "Who could you talk to?" Develop resources, write them down and give them to the student.
- "So are you thinking about suicide?"
- "Have you ever felt like this before?"
- "I hear you saying no, but I see these signs. Are you being truthful?"
- "How would you do it?"
- "Do you have the… (gun, pills, etc.)?"
- "When would you do this?"
- "Have you thought about a second option?"
- "Have you attempted suicide before?"
- Any self-rescue?
- "Did you receive counselling?" "Did you feel comfortable with the counsellor?"
- Develop options: "You can always kill yourself—what I want to know is—can you postpone that (4-5 sessions) so I can understand all that you are going through. And please tell me if I'm not understanding you or your experiences."
- "How bad is it getting?"
- "Tell me more about that…."
- "I need you to work with me. You are not alone. We will do this together."
- "Are you willing to find other ways to express your feelings?"
- Is the student's thinking disorganized? Assess this on your own through observation and paying attention to details in their conversation.
- Establish an open door policy: "If you ever have problems, come back…."

Interacting with a Suicidal Person

Things to Do

- Make a contract—buy time
- Listen, show empathy and remain calm
- Be supportive and caring
- Take the situation seriously
- Assess the degree of risk
- Ask about previous attempts
- Explore possibilities other than suicide
- Ask about the suicide plan
- Identify other supports
- Remove the means—if possible
- Take action, tell others, get help
- If the risk is high, NEVER leave the person
- Speak in a calm tone
- Be yourself

Things NOT to Do

- Ignore the situation
- Be shocked or embarrassed and panic
- Say that everything will be all right
- Challenge the person to go ahead
- Make the problem appear trivial
- Give false assurances
- Swear to secrecy
- Leave the person alone
- Ask why the person is feeling this way
- Debate or lecture about right vs. wrong

Sample Suicide Prevention Contract

It is often more helpful to develop your own contract and personalize it with the youth in his/her own words.

Student portion:

I promise that I will not try to hurt myself between today and _____ _____. If I feel like hurting myself, I promise to talk with _____ _____ or another staff member _____.

_____   _____
Student's name   Counsellor's name

Counsellor portion:

I promise that I will be available to talk with _____
if he/she needs to talk. I promise to meet with him/her on _____
_____ to discuss how he/she is doing.

_____   _____
Student's name   Counsellor's name

Concluding Perspective

All school-based counsellors will see LGBTQ student clients in the course of their educational practice. Whether these students will be visible or not depends largely on whether or not a counsellor identifies his or her practice as a safe space for LGBTQ and questioning students. Like all youth, LGBTQ students have simple and realistic expectations of their school counsellors: to be treated with respect, honesty and confidentiality. These expectations are of paramount importance for LGBTQ students, who often have no other safe spaces to turn to. An atmosphere of mutual respect and confidentiality can serve as the foundation to help LGBTQ students feel safe and comfortable disclosing their sexual orientation or gender identity questions and concerns.

Remember that sexuality is only one characteristic that forms and defines identity. LGBTQ youth do not expect their counsellors to be LGBTQ themselves; rather, they expect that their counsellors will be knowledgeable, open-minded and supportive of their sexual minority identity. Counsellors should note that LGBTQ youth report that they dislike being assumed to be heterosexual, judged, labelled, equated with HIV/AIDS or STIs, or understood as being at-risk or immoral (Ginsburg et al. 2002). All of these misconceptions serve to create barriers and missed opportunities to assist LGBTQ students to live full, healthy, proud and productive lives. All LGBTQ students deserve this opportunity. Will you be the counsellor who enables every student to live up to his or her full potential?

Resources for Further Inquiry

Five books that every school counselling office should have:

Brown, Mildred, and Rounsley, Chloe. (1996). *True selves: Understanding transsexualism: For families, friends, co-workers, and helping professionals*. San Francisco: Jossey-Bass.

Casper, Virgina, & Schultz, Steven. (1999). *Gay parents/straight schools: Building communication and trust*. New York: Teachers College Press.

Lipkin, Arthur. (1999). *Understanding homosexuality, changing schools: A text for teachers, counselors, and administrators. Boulder*, CO: Westview Press.

Peterkin, Allan, & Risdon, Cindy. (2003). *Caring for lesbian and gay people: A clinical guide*. Toronto: University of Toronto Press.

Ryan, Caitlin, & Futterman, Donna. (1998). *Lesbian and gay youth: Care & counseling*. New York: Columbia University Press.

Five non-fiction books to recommend to LGBTQ adolescents

Bass, Ellen, & Kaufman, Kate. (1996). *Free your mind: The book for gay, lesbian, and bisexual youth and their allies*. New York: Harper Collins.

Heron, Ann. (Ed.). (1994). *Two teenagers in 20*. Los Angeles, CA: Alyson Publications.

Huegel, Kelly. (Ed.). (2003). GLBTQ: *The survival guide for queer and questioning teens*. Minneapolis, MN: Free Spirit Publishing.

Planned Parenthood Toronto. (Ed.). (2004). *Hear me out: True stories of teens educating and confronting homophobia*. Toronto, ON: Second Story Press.

Sonnie, Amy. (Ed.). (2000). *Revolutionary voices: A multicultural queer youth anthology*. Los Angeles, CA: Alyson Publications.

Five fiction books to recommend to LGBTQ adolescents

Hartinger, Brent. (2003). *Geography club*. New York: Harper Collins.
Huser, Glen. (2003). *Stitches*. Toronto, ON: Groundwood Books.
Kerr, M. E. (1995). *Deliver us from Evie*. New York: Harper Collins.
Sanchez, Alex. (2001). *Rainbow boys*. New York: Simon & Schuster.
Sinclair, April. (1995). *Coffee will make you black*. New York: Harper Collins.

Five LGBTQ youth websites

Alterheros (Quebec) – www.alterheros.com (Bilingual)
GSA Network (USA) – www.gsanetwork.org
Sexuality & U (National) – www.sexualityandu.ca
Youth One (Alberta) – www.youthone.ca
Youth Safe (Calgary) – www.youthsafe.net

5 Websites for Counsellors

Alberta Teachers' Association's Sexual Orientation and Gender Identity webpage –
http://www.teachers.ab.ca/Issues+In+Education/Diversity+and+Human+Rights/Sexual+Orientation/Index.htm
Canadian Rainbow Health Coalition – www.rainbowhealth.ca
Gay & Lesbian Educators of British Columbia (GALE-BC) – www.galebc.org
Parents, Friends and Family of Lesbians and Gays (PFLAG) – www.pflag.ca
The Society for Safe and Caring Schools and Communities – www.sacsc.ca

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Chen-Hayes, S. F. 2001. "Counseling and Advocacy with Transgendered and Gender-Variant Persons in Schools and Families." Journal of Humanistic Counseling, Education and Development 40, no. 1: 34–49.

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Appendix – An Ethical Case Study (Gender Identity)

I work in an elementary school and there is a boy who comes to school wearing girls' clothes. He also has a haircut that makes it hard to tell that he is a boy. Several staff members have commented on being uncomfortable about how the student is perceived by his peers. Teachers are also asking me how they should address this behaviour with the student.

Counsellors can utilize the Canadian Psychological Association's Ethical Decision-Making Process to work step-by-step through real-life situations like the one presented above. Prior to working through the decision-making model, it is necessary to gain more information from the student and his or her parents/guardians. This information and an increased knowledge of the student's context will help to guide the decision-making process. Helpful background information includes the student's level of awareness of his or her identity, potential risks/ danger to self due to homophobia and transphobia in society and the level of parent/guardian support for their child's gender identity.

Step 1 – Identification of the individuals and groups potentially affected by the decision.

a. The child
b. Other students in the school
c. The family or guardians
d. School staff
e. Parents of other students
f. Community

Step 2 – Identification of ethically relevant issues and practices, including the interests, rights, and any relevant characteristics of the individuals and groups involved and of the system or circumstances in which the ethical issue arose.

   a. **General Respect**: Use language that conveys respect for the dignity of others.

It may be helpful to ask the child how he/she feels inside: Does he/she feel like a boy or a girl? It will also be important to involve the parents to learn what they have observed at home and to provide information about gender identity development to the parents. In addition, counsellors can provide support as the parents' beliefs and attitudes regarding gender identity and gender expression are explored.

b. **Non-discrimination**: Not practice, condone, facilitate or collaborate with any form of unjust discrimination.

It is essential that the student not feel ostracized, judged or treated differently from peers because of his/her gender expression or identity.

c. **Extended responsibility**: Encourage others, if appropriate, to respect the dignity of persons and to expect respect for their own dignity.

Providing information or hosting a professional development workshop for school staff on the topic of gender identity may help create a coordinated, supportive environment for the student at school. This may also serve to enhance the classroom environment by utilizing group activities that foster respect, nonjudgment, inclusion and diversity. Providing outreach to parents and the community may also strengthen a positive school environment. Outreach might include presentations or information sessions for parents, articles in the school newsletter and general assemblies.

d. **Competence and self-knowledge**: Take immediate steps to obtain consultation from colleagues and/or appropriate groups and committees, and give due regard to their advice in arriving at a responsible decision, if faced with difficult situations.

Seek information and potential plans of action from community resources (e.g., community centres, psychologists, psychiatrists, social workers, mental health practitioners and so on). Gather materials to read and share with the student's family, teachers and school staff.

e. **Risk/benefit analysis**: Assess the individuals, families, groups and communities involved in their activities adequately enough to ensure that they will be able to discern what will benefit and not harm those persons.

Student: A potential risk would be restricting the student's expression of self at school and creating difficulties in the development of self-concept and identity. Another risk might be an increased likelihood of being targeted for harassment by peers. Benefits could include creating a safe environment within the school so the student feels comfortable expressing himself or herself without fear for personal safety or emotional well-being.

Other Students: Possible risks for other LGBTQ youth may include feeling ostracized based on the response to this student from staff and other students. As a result, LGBTQ students may feel that it is necessary to keep their identity hidden. Conversely, a potential benefit of a supportive school climate might enable other students to feel safe and supported in expressing themselves and exploring their identities.

Family: Risks may include fear of being judged, not wanting their child to stand out as being different from peers and the family's being ostracized from the community (e.g., school, neighbourhood, friends, etc.). Potential benefits may be feeling supported and finding ways for their child to express himself or herself without concern for personal safety.

School: Potential risks include negative reactions from the community and voiced concerns from other parents in the school. Parents or guardians may withdraw their students from the classroom or school. Potential benefits include the creation of a safe and inclusive environment for every student regardless of actual or perceived differences.

f. **Maximize benefit**: Provide services that are coordinated over time with other service providers. Strive to obtain the best possible service for those seeking psychological service.

Potential services and service providers that may be coordinated include school counsellors, student support services, community mental health agencies, administrators and community groups. This collaborative approach may take time to organize; however, it can yield long-term benefits for students as a consistent and coordinated network is established. As a result of collaboration, confusion is minimized and the student/family will receive similar messages and information from all stakeholders. Questions that may need to be explored include, What are the roles of each group? What will this coordinated support look like in action? Who will agencies and individuals turn to when there is a source

of concern? Is there a system of professional support and training for the partners? What kind of follow up or monitoring will there be? Whose responsibility is it to keep track of and organize follow up meetings?

    g.   **Minimize harm**: Be careful not to engage in activities in a way that could place incidentally involved individuals at risk. Give reasonable assistance to secure needed psychological services or activities, if personally unable to meet requests for needed psychological services or activities.

If there is any feeling of uncertainty about one's competence to work through this situation, seek support from colleagues, community service providers and so on. Take the time to plan possible courses of action to minimize or avoid potential harm.

Step 3 – Consideration of how personal biases, stresses or self-interest might influence the development of or choice between courses of action.

a.   Take time to reflect on your own biases and concerns as you consider what is in the best interests of the student. It will be important to differentiate between what will likely be beneficial for the student and what you think will be helpful based on your own concerns, fears and ability to assess what is a realistic threat to the personal safety of the student.

b.   At this stage, it may also be helpful to seek consultation to address any personal biases and how they might affect the decision-making process.

Step 4 – Development of alternative courses of action.

a.   Allow the student to continue to come to school dressed in girls' clothing or dressed ambiguously. Combine this decision with staff professional development and schoolwide learning about diversity, respect, being nonjudgmental and so on.

b.   Explore the possibility of the student being free to express his or her true gender identity in a safe, private place, such as the student's home. It is often safer for a student to express his or her gender identity in certain settings than in others.

c.   Do nothing.

Step 5 – Analysis of likely short-term, ongoing and long-term risks and benefits of each course of action on the individual(s)/group(s) involved or likely to be affected (e.g., student, student's family, teacher, other students and school).

a. Allow student to continue coming to school in girls' clothes.
    i. **Short-term risks:** Potential verbal and physical harassment from peers. Being treated differently by teachers and administrators. Complaints from parents. Parents and student are ostracized within the community. The student's parents treat their child differently and are unable to accept their child's gender identity. This may lead to a sense of rejection in the child.

    ii. **Long-term risks:** Related to possible short-term risks mentioned above, the student may develop a weakened self-esteem and self-concept. Based on research literature, the risk of suicidal feelings and substance use may increase because of the ways the student is treated by peers, staff, family/guardians and/or the community.

    iii. **Ongoing risks:** This student will need to negotiate every environment he/she encounters and may be in a different classroom or cohort each term or year. This constant coming out and the ensuing coming-to-terms processes may lead to an erosion of spirit and hope and an increase in feelings of helplessness and powerlessness.

    iv. **Short-term benefits:** The student feels that his or her true sense of self is being expressed and feels whole because of this acceptance. Classmates, teachers, support staff and administrators may incorporate new knowledge and activities into their learning. Other students will witness the inclusion of this student and perhaps develop a more positive way of approaching and accepting diversity. LGBTQ students may feel that they can safely be themselves at school.

    v. **Long-term benefits:** The school environment is outwardly inclusive and respectful of all people regardless of differences. Students, staff, parents and community members interact in more supportive and positive ways.

vi. **Ongoing benefits:** A welcoming environment is maintained as new students and teachers enter the school.

b. Student learns limits based on societal norms and safety.

i. **Short-term risks:** The student experiences a sense of injustice in the situation by having to change to fit the societal norms instead of the school/cultural norms changing to fit the student. The student feels that he or she is being judged even though people deny this. Other LGBTQ students may see this option (whether they are outwardly told about it or not) as encouraging this student to hide his true self. The student's parents are not supportive of their child's gender identity development/ expression, so the student cannot express himself safely at home. People present in the student's life (e.g., teachers, support staff, administrators, and so on) are not provided with information to help them understand gender identity or how they can be supportive of the student's identity development.

ii. **Long-term risks:** Identity development may be difficult due to negative messages from classmates, community and the larger society.

iii. **Ongoing risks:** The student will need to learn about the limits/ boundaries of safety within each setting that he/she spends time in.

iv. **Short-term benefits:** The student will be able to freely express him/herself in a safe space and will also be assisted in learning about the potential risks/harm present in our society, where messages of homophobia, transphobia and heterosexism continue to exist. Parents can feel less alone by accessing community supports. Parents will also be able to choose who this information will be shared with as a way to maintain safety. Parents may feel relieved that they can provide a loving, caring and accepting space in which their child can more fully develop his or her identity.

v. **Long-term benefits:** Identity development will continue in a safe and supportive space.

vi. **Ongoing benefits:** The student will learn to develop the skills necessary to assess the safety of situations and will also develop the capacity to deal with/avoid potential dangers.

c. Do nothing.
   i. **Short-term risks:** The student is harassed, ostracized or bullied by peers because of the noticeable difference (based on societal gender norms) in appearance and dress. Teachers and support staff continue to exhibit an awkward approach to the student because of their uncertainty about what to do. The student internalizes these messages and starts to feel that something is wrong with him/her. Parents of classmates may also feel awkward around the student and prevent their children from playing with him/her. Other LGBTQ students witness how this student is treated and may perceive that something is "wrong" with this student based on his/her expression of gender identity. Teachable moments are not capitalized on and transphobia and other misconceptions are allowed to flourish. Opportunities for important social learning in how to address complex situations will be lost.

   ii. **Long-term risks:** The student's sense of confusion, isolation and fear may increase and his/her self-esteem may decline. Based on research literature, the risk of suicidal feelings and substance use may increase because of how the student is treated by peers, staff and the community.

   iii. **Ongoing risks:** The student may learn that adults and peers are not to be trusted. Energy is spent managing identities. Academic performance may decline. The student may feel overwhelmed and drop out of school and or run away from home to find some sense of perceived acceptance.

   iv. **Short-term benefits:** The status quo is maintained in the school.

   v. **Long-term benefits:** The school avoids expressions of displeasure or discontent from the community. Traditional values are maintained.

vi. **Ongoing benefits:** The school has no impetus for policy review or development. Gender roles and dominant conceptions of what it means to be male and female are maintained. All students are assumed to be heterosexual.

Step 6 – Choice of course of action after conscientious application of existing principles, values and standards.

When choosing a course of action, keep in mind the key principles of maximizing benefit and minimizing harm. In this scenario, the potential risk of harm to the student seems too great to go with the first option (facilitating the student's choice to continue to wear girl's clothing). Although the third option (doing nothing) may be appealing because it does not involve any effort, the potential harm to the student is immense. For example, the mixed messages that he/she may be receiving from adults may create difficulties in the development of his/her self-concept and identity.

Step 7 – Action, with a commitment to assume responsibility for the consequences of the action.

This point particularly touches on the seriousness of the decisions that are being made and how they can affect other people's lives. An individual or a group of people who are working through this complex scenario need to assume responsibility for actions that are taken.

Step 8 – Evaluation of the results of the course of action.

Engage in reflection and assess the strengths and the weaknesses of the course of action chosen. Can anything be done to improve it?

Step 9 – Assumption of responsibility for consequences of action, including correction of negative consequences, if any, or re-engaging in the decision-making process if the ethical issue is not resolved.

If there are negative consequences, ask questions such as: What needs to be done to minimize harm? How can this situation be changed to move in a different and more helpful direction? Who do I need to consult with to

work through this situation? Each of these questions will need to be carefully considered.

Step 10 – Appropriate action, as warranted and feasible, to prevent future occurrences of the dilemma.

Use appropriate communication and problem-solving skills with colleagues to build awareness of the need for changes in procedures, policies and practices. Capitalize on teachable moments with students, parents and staff. This may involve specific outreach activities to provide information to parents and community members. Emphasize how all educational stakeholders can work together towards the common goal of creating a safe, caring and inclusive school environment. Highlight appropriate legislation and policies that undergird the need for accommodation and the inclusion of diversity as key principles of an ethical and caring teaching practice.

The Society for Safe and Caring Schools and Communities (SACSC) Resources

The Society for SACSC, formerly the ATA's Safe and Caring Schools Project, resources and materials are available through Alberta Learning's Resources Centre (LRC), 12360 142 St. NW, Edmonton, Alberta, T5L 4X9. Tel: 427-5775 in Edmonton. Elsewhere in Alberta call 310-0000 and ask for the LRC or fax (780) 422-9750. To place Internet orders, visit www. lrc.learning.gov.ab.ca ***These materials are eligible for the Learning Resources Credit Allocation (25% discount). Contact the LRC for details.**

The SACSC has four program areas and an inventory of promotional items:

I. SUPPORTING A SAFE AND CARING SCHOOL

This program area helps build a SACS culture. It includes information about SACS, an assessment tool to aid in planning and quick, easy-to-read booklets that review current research on SACS topics and successful programs.

Safe and Caring Schools in Alberta Presentation: video, overheads and 30 brochures
□ # 455297 $15.00

The ATA's Safe and Caring Schools Project: An Overview (K–12) (Pkg of 30) Describes the origin and objectives of the project (2001, 4 pp.)
□ # 445298 $ 6.80

Attributes of a Safe and Caring School (K–12) (Pkg of 30) A brochure for elementary, junior and senior high schools, describing the characteristics of a safe and caring school (1999)
□ # 445313 $ 6.80

The ATA's Safe and Caring Schools Project: Elementary Booklet Series (16 booklets) (K–6) (see LRC website)
□ # 445610 $11.50

The ATA's Safe and Caring Schools Project: Secondary Booklet Series (15 booklets) (7–12) (see LRC website) □ # 445628 $10.80

Preschool Bullying: What You Can Do About It—A Guide for Parents and Caregivers (1–6) Provides advice on what parents can do if their child is being bullied or is bullying others (2000, 24 pp.)
□ # 445347 $1.43 ea for 10 or more $2.85 ea

Bullying: What You Can Do About It—A Guide for Primary Level Students (K–3) Contains stories and exercises to help children deal with bullies and to stop bullying others (1999, 28 pp.)
□ # 445397 $1.48 ea for 10 or more $2.95 ea

Bullying: What You Can Do About It—A Guide for Parents and Teachers of Primary Level Students (K–3) Contains tips to help teachers and parents identify and respond to children who are involved in bullying (2000, 12 pp.)
□ # 445454 $1.33 ea for 10 or more $2.65 ea

Bullying: What You Can Do About It—A Guide for Upper-Elementary Students and Their Parents Directed at students who are the victims, witnesses or perpetrators of bullying, and their parents (2000, 16 pp.)
□ # 445321 $1.50 ea for 10 or more $3.00 ea

PRICES SUBJECT TO CHANGE

Bullying in Schools: What You Can Do About It—A Teacher's Guide (1–6) Describes strategies that teachers can follow to stop bullying in schools (1997, 10 pp.)

☐ # 445339 $1.33 ea for 10 or more $2.65 ea

Beyond Bullying: A Booklet for Junior High Students (7–9) Explains what students should do if they are being bullied or if they see someone else being bullied (2000, 12 pp.)

☐ #445470 $1.48 ea for 10 or more $2.95 ea

Beyond Bullying: What You Can Do To Help—A Handbook for Parents and Teachers of Junior High Students (7–9) Defines bullying behaviors and suggests strategies that parents and teachers can follow to deal with it (1999, 16 pp.)

☐ # 445488 $1.33 ea for 10 or more $2.65 ea

Bullying is Everybody's Problem: Do You Have the Courage to Stop It? (Pkg of 30) (7–12) A guide for senior high students, defines bullying and provides advice on how to respond to it (1999)

☐ # 445305 $4.76 for 10 or more pkgs $6.80/pkg

Bullying and Harassment: Everybody's Problem—A Senior High Staff and Parent Resource (10–12) Provides advice for parents and teachers of high school students on how to deal with bullying (2000, 12 pp.)

☐ # 445496 $1.30 ea for 10 or more $2.60 ea

Class Meetings for Safe and Caring Schools (K–12) Explains how regular class meetings can help teachers and students work out conflicts before they become major problems (1998, 20 pp)

☐ # 445587 $1.33 ea for 10 or more $2.65 ea

Expecting Respect: The Peer Education Project—A School-Based Learning Model (K–12) Provides an overview of Expecting Respect, a project that trains junior and senior high students to make classroom presentations on establishing healthy social relationships (1999, 16 pp.)

☐ # 445462 $1.33 ea for 10 or more $2.65 ea

Safe and Caring Schools: Havens for the Mind (K–12) Reviews the role of SACS in healthy brain development and learning

☐ # 445503 $1.33 ea for 10 or more $2.65 ea

Media Violence: The Children Are Watching—A Guide for Parents and Teachers (K-12) Contains tips for parents and teachers in countering the effects on children of media violence (1999, 12 pp.)

☐ # 445511 $1.35 ea for 10 or more $2.70 ea

Peer Support and Student Leadership Programs (K-12) Describes a number of programs that have been used successfully at various grade levels to encourage students to help their fellow students (2000, 30 pp.)

☐ # 445503 $1.33 ea for 10 or more $2.65 ea

Niska News (K–12) A collection of articles about SACS reprinted from *The ATA News* (1999, 36 pp.)

☐ # 445529 $1.33 ea for 10 or more $2.65 ea

Principals' Best (K–12) Describes activities that various schools in the province have undertaken to create a safe and caring environment for students (1999, 16 pp.) See website.

☐ # 445545 $1.33 ea for 10 or more $2.65 ea

PRICES SUBJECT TO CHANGE

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Volunteer Mentorship Programs: (K–12) Describes a number of successful programs in which adult volunteers were assigned to serve as mentors to school-aged children (2000, 28 pp.)

☐ # 445579 $1.33 ea for 10 or more $2.65 ea

Volunteer Mentorship Program: (K–12) A video portrays programs in which adults from the community work with children to help them develop various skills (1999, 9 ½ minutes)

☐ # 445602 $ 7.00

Volunteer Mentorship Program: A Practical Handbook (includes 3.5" disk) (K–12) Explains how to set up programs in which adults serve as mentors to school-aged children (1999, 44 pp. plus a computer disk containing sample documents used in the program)

☐ # 445595   **$10.00**

CHECK LRC FOR NEW TITLES

II. TOWARD A SAFE AND CARING CURRICULUM—RESOURCES FOR INTEGRATION

These resources are recommended and approved by Alberta Learning. They integrate violence prevention into all subjects K–6 and are divided into five topics: (approximately 85 pp.)

1.   Building a Safe and Caring Classroom/Living Respectfully
2.   Developing Self-Esteem
3.   Respecting Diversity and Preventing Prejudice
4.   Managing Anger and Dealing with Bullying and Harassment
5.   Working It Out Together/Resolving Conflicts Peacefully

Student resource sheets are available in French. To order, check (F).

Kindergarten	Q # 445446	F ☐(Out of Province $69.00)	$49.00
Grade 1	Q # 445371	F ☐(Out of Province $69.00)	$49.00
Grade 2	Q # 445389	F ☐(Out of Province $69.00)	$49.00
Grade 3	Q # 445404	F ☐(Out of Province $69.00)	$49.00
Grade 4	Q # 445412	F ☐(Out of Province $69.00)	$49.00
Grade 5	Q # 445420	F ☐(Out of Province $69.00)	$49.00
Grade 6	Q # 445438	F ☐(Out of Province $69.00)	$49.00

Anti-Bullying Curriculum Materials: Social Studies Grades 10, 11, 12 Developed by Project Ploughshares Calgary, this booklet contains a series of exercises that teachers can use to incorporate the topic of bullying into the high school social studies curriculum (1999, 81 pp.)

☐ # 445563 $10.00

Classroom Management: A Thinking and Caring Approach Written by Barrie Bennett and Peter Smilanich, this manual outlines numerous strategies that teachers can use to cope with misbehavior in the classroom and create a learning environment that encourages student learning (1994, 342 pp.)

☐ # 445660 $31.60

SACS series of six full-color posters A series of six full-color posters highlighting the Project's key concepts.

☐ # 444836 $ 9.00

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III. TOWARD A SAFE AND CARING PROFESSION

The Society's SACSC Project trains inservice leaders and workshop facilitators.

The following workshops are designed to help teachers implement the curriculum resources.

Toward a Safe and Caring Curriculum—ATA Resources for Integration: Kindergarten to Grade 6*

Toward a Safe and Caring Secondary Curriculum—Approaches for Integration*

A series of short sessions focused on strengthening SACS teaching strategies is also available.

IV. TOWARD A SAFE AND CARING COMMUNITY

This program area is designed to help all adults who work with children—parents, teachers, coaches, youth group leaders, music instructors—model and reinforce positive social behavior, whether at school, at home or in the community. The community program includes a series of 2-2½ hour workshops for adults and older teens.

Living Respectfully*
Developing Self-Esteem*
Respecting Diversity and Preventing Prejudice*
Managing Anger*
Dealing with Bullying*
Working It Out Together - Resolving Conflicts Peacefully*

Who Cares? brochures (Pkg of 30) Provides background on the Safe and Caring Communities Project, a collaborative effort between the ATA and Lions Clubs of Alberta (1998)
□ # 444654 $ 9.80
Who Cares? CD-ROM and brochure Describes the Safe and Caring Communities Project, a collaborative effort between the ATA and the Lions Clubs of Alberta (1998)
□ # 444646 $ 4.35
Who Cares? video and brochure Describes the Safe and Caring Communities Project, a collaborative effort between the ATA and the Lions Clubs of Alberta (1997, 11 minutes)
□ # 444638   **$ 5.95**

Toward a Safe and Caring Community Workshops Action Handbook: A Guide to Implementation Provides specific information about how to implement the ATA's Safe and Caring Schools Project—Toward a Safe and Caring Community Program.
In addition, the handbook provides suggested activities and strategies to help communities continue to work on issues related to enhancing respect and responsibility among children and teens. □ # 455304 $ 7.00
Violence-Prevention Catalogue of Alberta Agencies' Resources Compilation of the information that was gathered from over 200 organizations and community groups who work in the area of violence prevention, and with children and youth in character development through community leadership.
□ # 455312 $ 7.00

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SACS PROMOTIONAL ITEMS

SACS cards with color logo and envelopes (Pkg of 40) Blank card and envelope, featuring the SACS logo
□ # 444547 $10.00

Niska hand puppet Featuring the Niska mascot.
□ # 444555 $14.00

Niska labels (800 peel & stick labels per pkg) Featuring the Niska mascot.
□ # 444571 $ 4.00

Niska mouse pad 8 ½" by 9 ½" featuring the Niska mascot.
□ # 444563 $ 6.00

Niska tattoos (125 per pkg) A 1½" by 1½" temporary tattoo featuring Niska
□ # 444597 $23.40

Niska water bottles (5 per pkg) 5 white plastic water bottles featuring the Niska logo.
□ # 444612 $ 8.50

Niska zipper pulls (5 per pkg) Bronze, featuring the Safe and Caring Schools Logo.
□ # 444589 $ 7.75

SACS award buttons (Pkg of 30–2 ¼" white buttons)
□ # 444620 $10.00

Safe and Caring Schools coffee mug
□ # 444604 $ 5.45

Safe and Caring Schools pencils (Pkg of 30) Inscribed with "Toward a Safe & Caring Community." □ # 444662 $10.70

Niska T-Shirt (white, featuring the Niska mascot front and back)
□ # 444745 adult X-large; □ # 444737 adult large; □ # 444729 adult medium;
□ # 444711 adult small; □ # 444703 youth X-large; □ # 444696 youth large;
□ # 444688 youth medium; □ # 444670 youth small $10.50

SACS men's golf shirt (white, featuring the Niska mascot) □ # 444787 X-large;
□ # 444779 large; □ # 444761 medium; □ # 444753 small $24.95

SACS women's golf shirt (white, sleeveless, featuring the Niska mascot)
□ # 444828 X-large; □ # 444810 large; □ # 444802 medium; □ # 444795 small $24.45

*All workshop materials can be ordered from the SACS office by inservice leaders and workshop facilitators who have successfully completed the training: e-mail <office@sacsc.ca> fax (780) 455-6481 or phone (780) 447-9487.

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