



Safe Zone

Training Manual



Working to ensure a campus atmosphere that is supportive, informative and welcoming to all members of the SDSU campus community.

2012 Edition

SDSU Safe Zones relies on continuing collaboration and support from many organizations and departments campus-wide including:

The President's Office
The Department of European Studies
The President's Leadership Fund
Counseling and Psychological Services

The Pride Resource Office
The Department of Women's Studies
The Cross-Cultural Center
Associated Students

The SDSU Safe Zones Program would not be possible without support from:

SDSU Senate Committee on Diversity, Equity and Outreach
GLIC (Gay and Lesbian Issues and Concerns, a faculty/staff group)
Office of Employee Relations and Compliance
Women's Resource Center
Residential Education

Student Disability Services
Public Safety
Student Health Services
Student Activities and Campus Life
Center for Student Rights and Responsibilities
Athletics
Gamma Rho Lambda

The information in this manual is based on Safe Zone and Safe Space Programs at other colleges and universities throughout the country.

**Special thanks go to
Worcester Polytechnic Institute's Safe Zone Program
for making their manual publicly available**

Safe Zone Contact Information 2012/2013



SDSU Rainbow Flag Raising

**For more information about
Safe Zones at SDSU
or about becoming an Ally,
please contact:**

Susan Cayleff, Ph.D.
Department of Women's Studies
cayleff@mail.sdsu.edu

Or

Carrie Sakai, Psy.D.
Counseling & Psychology
csakai@mail.sdsu.edu

**For more information about the following areas,
please contact the person indicated**

- Safe Zone Allies: Edee Benkov ebenkov@mail.sdsu.edu
- The Ally Program: Carrie Sakai
- Community-based Service Learning 20 hour class-related interns: Susan Cayleff
- Safe Zone volunteers: Susan Cayleff
- Women's Studies semester-long SafeZone (3 course units) interns: Susan Cayleff

Table of Contents

Safe Zone Contact Information.....	2
A Safe Zone at SDSU	5
To Become a Safe Zone at SDSU.....	5
A Safe Zone Ally	5
Goals of the SDSU Safe Zone Program.....	5
“Free to Be Me” Statement.....	6
Terms, Definitions, and Labels.....	7
Symbols and Flags	16
What is Homophobia?.....	19
Homophobia in Clinical Terms.....	20
Homophobic Levels of Attitude:	20
Positive Levels of Attitude.....	20
How Homophobia Hurts Us All	21
Biphobia – Myths and Realities of Bisexuality	22
How Transphobia Hurts Our Communities	23
Understanding Transphobia and Transphobic Myths	24
What is Heterosexual Privilege?.....	26
Examples of Heterosexism	27
The Heterosexual Questionnaire.....	27
Some Basics	28
Transgender Emergence – a developmental model	29
Things Non-Trans Individuals May Take for Granted	30
Supporting Transgender People.....	31
Additional Resources	32
Intersexed.....	32
Coming Out.....	35
Coming Out: Students on Campus.....	36
Coming Out: Recent Trends	36
Ways to Prepare for Coming Out.....	37
Possible Questions and Responses Students.....	38
Family: The People Who Raised You	39
Cass Model Of Homosexual Identity Development	39
Identity Confusion	39
Identity Comparison.....	40
Identity Tolerance	40
Identity Acceptance	40
Identity Pride.....	41
Identity Synthesis.....	41
People of Color Issues:	41
Same Gender Loving and other Share Experiences.....	41
Comments from people of color on being LGBTQ.....	42
Two Worlds	42
Dual Prejudice.....	43
Safer Sex - Education is the Key	43

What is AIDS?	44
How is HIV Transmitted?	44
High Risk	44
Protect Yourself: Condoms and Dental Dams	45
How to Put on a Condom	45
Protect Yourself: Oral Sex and Latex	45
How to Use a Dental Dam	45
Being An Ally	46
Four Levels in Ally Development	46
Qualities of Allies	47
Ten Ways to Be an Ally	47
Benefits of Being an Ally	48
Guidelines for Allies	48
Creating a Non-Homophobic Campus Environment	50
Suggestions for Working with Lesbian, Gay, Bisexual and Transgender Students	50
When a Gay Person Tells You They Are Gay	51
<i>What Should I Do If...?"</i>	52\
Making Lesbian, Gay, and Bisexual Inclusive Assumptions	55
Close Calls, Reporting Harassment:	56
When a Student Informs You They Have Been Harassed	56
When to Refer a Student to Mental Health Services	57
Scenarios	58
SDSU Safe Zones is Here to Provide Information	59

A Safe Zone at SDSU ...

Is a person who provides a safe space that is highly visible and easily identifiable to lesbian, gay, bisexual and transgender people. It is where support and understanding are key and bigotry and discrimination are not tolerated.

To Become a Safe Zone at SDSU

- You need to participate in an Ally Training Session offered by Counseling and Psychological Services when they are offered throughout the academic year.
- Individuals are Safe Zones, not departments or office work areas.
- You believe our campus is enriched and enlivened by the diversity of gay, lesbian, bisexual, and transgender people.
- You are aware of the presence of gay, lesbian, bisexual, and transgender students and colleagues and are willing to engage in genuine dialogue and interaction with them.
- You are willing to discuss issues that impact, influence and affect gay, lesbian, bisexual, and transgender peoples' lives in a nonjudgmental manner.
- You are willing to assist students in accessing support and information resources on campus and in the community.
- You maintain confidentiality within the confines of your job.
- You comfortably use inclusive language avoiding stereotyping, and do not assume heterosexuality.

A Safe Zone Ally

- Offer support to those who come out to you
- Ask faculty to include examples of LGBTQ experiences in course materials and lectures
- Become familiar with definitions you will encounter (see Definitions)
- Be intolerant of comments and actions that demean, ridicule, or trivialize LGBTQ individuals and experiences
- Report any incidents of these forms of violence to Public Safety and other appropriate on-campus offices
- Become familiar with symbols used within the LGBTQ communities

Goals of the SDSU Safe Zone Program:

- To increase the overall campus community's understanding and awareness of lesbian, gay, bisexual, and transgender issues
- To provide a greater sense of safety for the gay, lesbian, bisexual, and transgender student community
- To offer information to straight allies in positions where they may be in contact with lesbian, gay, bisexual, and transgender people (as classmates, roommates, friends, residents, students, staff, faculty, etc.)
- To act as a resource of information regarding homophobia, heterosexism, transphobia and LGBTQ issues on the SDSU campus.

(Adapted: Bridgewater State College)

“Free to Be Me” Statement

I, _____, hereby have permission to be imperfect with regards to people who are different from me. It is okay if I do not know all the answers about LGBTQ issues or if, at times, my ignorance and misunderstanding becomes obvious.

I have permission to ask questions that may appear stupid. I have permission to struggle with these issues and be up-front and honest about my feelings.

I am a product of a heterosexist and transphobic culture and I am who I am. I don't have to feel guilty about what I know or believe, but I do need to take responsibility for what I can do now:

Try to learn as much as I can.

Struggle to change my false/inaccurate beliefs or oppressive attitudes toward lesbian, gay, bisexual, and transgender people.

(Adapted from: Bryan L. Brunette, “Free to be You and Me.” 1990.)

Signed,

(date)

Terms, Definitions, and Labels

Terminology is important. The words we use, and how we use them, can be very powerful. Knowing and understanding the meaning of the words we use improves communication and helps prevent misunderstandings. The following terms are not absolutely-defined. Rather, they provide a starting point for conversations. As always, listening is the key to understanding.

Every thorough discussion about the lesbian, gay, bisexual, and transgender community starts with some very basic but often confusing terms, some of them may surprise you. Please do not hesitate to ask for clarification. This is a partial list of terms you may encounter. New language and terms emerge as our understanding of these topics changes and evolves.

A note about community abbreviations: Safe Zones has chosen to use the abbreviation LGBTQ²IA, for Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex and Allies, to be as inclusive as possible. Sometimes the “G” is placed before the “L”; either order is acceptable. In the definitions below, shorter abbreviations (for example, LGBT, LGBTQ, etc.) may be used depending on the context.

Affectional (Romantic) Orientation: A recent term used to refer to variations in object of emotional and sexual attraction. The term is also used by those who consider themselves asexual to describe the gender(s) to which they are romantically attracted.

The term is preferred by some over “sexual orientation” because it indicates that the feelings and commitments involved are not solely (or even primarily, for some people) sexual. The term stresses the affective emotional component of attractions and relationships, regardless of orientation.

Ally: An individual whose attitudes and behavior are supportive and affirming of all genders and sexual orientations and who is active in combating homophobia, transphobia and heterosexism, both personally and institutionally.

Androgyny: Displaying physical and social characteristics identified in this culture as both female and male to the degree that the person’s outward appearance and mannerisms make it difficult to determine an androgynous person’s biological sex.

Asexual: A person who is not sexually attracted to either men or women and does not have a desire to engage in sexual activity with a partner. Asexuality is a sexual orientation and differs from celibacy, which is a choice to abstain from sex. Some asexual people have a desire to form intimate but nonsexual romantic relationships, and will date and seek long-term partnerships.

Assigned Sex: The sex that was recorded on a person’s birth certificate. A person’s assigned sex is generally determined by a cursory visual inspection of an infant’s external genitalia and may or may not be congruent with the person’s gender identity or with other biological markers of sex such as chromosomes and internal reproductive structures.

Bicurious: A term used to describe a person who identifies as heterosexual or homosexual but experiences some thoughts or visions about engaging in intimate relationships with a gender other than the one to which they are primarily attracted.

Biological Sex: The dichotomous distinction between female and male, based on physiological characteristics, especially chromosomes and external genitalia.

Biphobia/Binegativity: Aversion toward, discrimination against, or strong disapproval or hatred of bisexuals. Biphobia exists within the lesbian and gay community as well as general society.

Bisexual/Bi: A person who has sexual and emotional relationships with or feelings towards both women and men, although not necessarily at the same time

Butch: Generally, a person who expresses and/or presents culturally/stereotypically masculine characteristics. This term is also used to describe a specific lesbian identity (ie. Butch/Femme) Use the term with caution since in some contexts it can be perceived as offensive.

Camp: In LGBTQ circles, people (especially gay men) may be described as “camp” or “campy” if they behave in a manner that exaggerates gay mannerisms or stereotypes. Such exaggeration is often powerful in its ability to reveal the absurdity of gender expectations.

Cisgender: Not transgender, that is, having a gender identity or gender role that society considers appropriate for the sex one was assigned at birth. The prefix cis- is pronounced “sis”.

Closeted/In the Closet: The confining state of being secretive about one’s true gender identity and/or sexual orientation. A person may feel compelled to be closeted in order to keep a job, housing situation, family/friends, or for their safety. Many LGBTQ individuals are “out” in some situations and “closeted” in others.

Coming Out (Of the Closet) /Being Out: Refers to the process through which a person acknowledges, accepts, and learns to appreciate her or his lesbian, gay, bisexual, or transgender identity. Sharing this information with others is not a single event but instead a life-long process.

Cross-dressing: Wearing clothing not usually associated with one’s birth sex. People may cross-dress for a variety of reasons including personal expression, sexual gratification, entertainment, or expressing ones’ gender identity.

Down Low (“DL”) – A term (“on the down low”) used to refer men who are in relationships with women, but who engage in clandestine sex with men. Typically, these men do not identify themselves as gay or bisexual. The term originated in the African-American community but the behavior is not unique to any race, ethnicity, or culture.

Drag: (also Drag King, Drag Queen, Female/Male Impersonator) - wearing the clothing of another gender, often with exaggerated cultural/stereotypical gender characteristics. Individuals may identify as Drag Kings (female in drag) or Drag Queens (male in drag). Drag often refers to

cross-dressing for purposes such as entertainment, performance or self expression. Drag holds a significant place in LGBTQ history and community.

Dyke: Once known as a derogatory term for lesbian, the term was reclaimed by lesbians in the 1970s. Today, many lesbians refer to themselves as dykes and proudly use the word. Because of its history as a pejorative term, non-lesbians should be cautious in using the term.

Effeminate: Used to identify a person (usually male) who expresses and/or presents culturally/stereotypically feminine characteristics. This is often viewed as a culturally negative term.

Faggot/Fag: A derogatory word frequently used to denote a gay male, origin uncertain.

Fag Hag: A term sometimes regarded as derogatory, used to describe women who prefer the social company of gay men.

Family: A term widely used by LGBTQ² persons to identify other LGBTQ² people.

Family of Orientation (Choice): Persons forming an individual's social, emotional, and practical support network and often fulfilling the functions of blood relations. Many LGBTQ people are rejected when their families learn of their sexual orientation or gender identity, or they may remain "closeted" to their biological relatives. In such cases, it is their partner/significant other and close friends who will be called on in time of illness or personal crisis.

Family of Origin: The biological family, or the family in which one was raised. These individuals may or may not be part of a person's support system.

Femme: Generally used to describe a person who expresses and/or presents culturally/stereotypically feminine characteristics. This term is also used to describe a specific lesbian identity (ie. butch/femme) Use the term with caution since in some contexts it can be perceived as offensive.

FTM/F2M: Abbreviation for Female-to-Male. A term that refers to male-identified people who were categorized as female at birth. (See also MTF and Transgender.)

Gay: Used to describe a man who is romantically, sexually, and/or affectionally attracted to men, although not all men who engage in sexual relations with other men identify themselves as "gay." The term is sometimes used to refer to the LGB community as a whole, although many women prefer to be identified as "lesbian" instead of "gay."

Gender: A term used to describe the social status of people as men, women, boys, girls, or variously transgendered, including characteristics of masculinity and femininity that are learned or chosen. A person's assigned sex does not always match their gender (see Transgender), and many people display traits of more than one gender. Gender is different from sexuality.

Gender Bending: Blurring the binary gender roles.

Gender Binary: Recognizes only two genders and regulates behavior within narrowly male or female expectations.. The idea is that all males should be male-identified and masculine, and all females should be female-identified and feminine.

Gender Dysphoria: An intense, continuous discomfort resulting from an individual's belief in the inappropriateness of their assigned sex at birth and resulting gender role expectations.

Gender Expression: The external presentation of a person's gender (e.g. dress, mannerisms, hair style, speech, etc.). One's gender expression may differ from one's gender identity.

Gender Identity: How an individual views himself or herself in terms of characteristics traditionally identified in this culture as male or female. A person may self-identify as purely male, purely female, or as possessing characteristics of both.

Gender Identity Disorder: A clinical, psychological diagnosis which is often required to receive surgical and/or hormonal sex reassignment. Many in transgender communities object to this requirement, viewing it as unnecessary and potentially stigmatizing.

Gender-neutral/Gender-free Pronouns: Pronouns which do not associate a gender with the person or creature being discussed. The English language has no truly gender-neutral third person pronoun available, and women especially have criticized this, as many writers use "he" when referring to a generic individual in the third person. In addition, the dichotomy of "he and she" in English does not leave room for other gender identities, a source of frustration to the transgender and gender-queer communities. People who are limited by languages which do not include gender neutral pronouns have attempted to create them, in the interest of greater equality. Some examples are "hir" for "him/her" and "zie" for "he/she".

Gender Normative/Gender Conforming: A person who conforms to gender-based societal expectations.

Gender Queer: A term that is growing in usage, representing a blurring of the lines surrounding society's rigid views of both gender identity and sexual orientation. Gender queer people embrace a fluidity of gender expression that is not limiting. They may not identify as male or female, but as both, neither or as a blend. Similarly, genderqueer is a more inclusive term with respect to sexual orientation.

Gender Roles: The socially constructed and culturally specific behavior and appearance expectations imposed on women (femininity) and men (masculinity).

Heterosexism/Heteronormativity A set of attitudes that is consistent with the belief that heterosexuality is a superior psychological, social and moral stance. This serves to create an invisibility or lack of validation and representation for people/relationships that are not heterosexual.

Heterosexuality: A sexual orientation in which a person feels physically and emotionally attracted to people of the "opposite" sex.

Heterosexual Privilege: The benefits and advantages heterosexuals receive in a heterosexist culture; for example, marriage. Also, the benefits lesbians, gay men, and bisexual people receive as a result of claiming or denying homosexual or bisexual identity.

Homonegativity: General disregard and dislike toward LGBTQ people.

Homophobia: Fear or hatred of those assumed to be LGBTQ and anything connected to their culture. It is a fear of homosexuality, either in other people or within themselves. This term represents a most extreme set of negative attitudes and beliefs and can include overt threats or expressions of hostility/violence. It occurs on personal, institutional, and societal levels.

Homosexual: A sexual orientation in which a person feels physically and emotionally attracted to people of the same sex. This “clinical” term originated in the 1800s and is not used within the gay and lesbian community.

Hormone Therapy/Hormonal Sex Reassignment: Administration of hormones to affect the development of secondary sex characteristics is a process, possibly lifelong, of using hormones to change the internal body chemistry. Androgens (testosterone) are used for female to males, and estrogens are used for male to females.

Internalized Homophobia: The fear and self-hate of one’s own homosexuality or bisexuality in individuals who have learned negative ideas about homosexuality throughout childhood. One form of internalized oppression is the acceptance of the myths and stereotypes applied to the oppressed group. It can result in depression, alienation, anxiety, and, in extreme cases, suicide.

Intersex: A person born with “sex chromosomes,” external genitalia, or an internal reproductive system that is not considered medically standard for either male or female. The gender identity and sexual orientation of these people varies as it does with non-intersex people. The older term “hermaphrodite” is considered to be offensive. Although intersexuality is relatively common, intersex infants often have their sex chosen for them shortly after birth. This is sometimes referred to as “assigned sex.” Assigning a sex to an intersex infant may involve surgical procedures to align the appearance of the genitals to the medical standard for either male or female. This practice has been criticized by many in the intersex community and remains a point of contention and controversy.

In the Closet: To be “in the closet” means to conceal one’s sexual orientation for fear of losing a job, a housing situation, relationships with family/friends/community, or in some other way to survive. Many LGBTQI individuals are “out” in some situations and “closeted” in others.

Kinsey Scale: The continuum model devised by Alfred Kinsey in 1948 that plotted sexuality from 0 to 6; 0 being exclusively heterosexual and 6 being exclusively homosexual. It was the first scale to account for bisexuality. According to a 1954 survey using the scale, 70% of people fell between 1 and 5. It’s been criticized for being too linear and only accounting for behavior and not sexual identity. (Note: The Klein Sexual Orientation Grid developed by Dr. Fritz Klein attempts to further measure various dimensions of sexual orientation by expanding on the Kinsey

Scale by incorporating sexual attraction, behavior, fantasies, emotional preference, social preference, lifestyle, and self-identification.)

Lesbian: Preferred term for a woman who is romantically, sexually, and/or affectionally attracted to women. The name is taken from the island of Lesbos where Sappho, the great women-loving poet of 600 BC lived. Many women who love women adopt this name with pride.

Lipstick Lesbian: A somewhat outmoded term to refer to lesbians who present a very feminine appearance (e.g., wearing makeup, dresses/skirts, etc.). It is sometimes used to refer to a lesbian who is seen as automatically passing for heterosexual.

MTF/M2F: Abbreviation for Male-to-Female. A term that refers to female-identified people who were categorized as male at birth.

Men who have Sex with Men (MSM): This term is often used when discussing sexual behavior and sexual health. It is inclusive of all men who participate in this behavior regardless of how they identify their sexual orientation. The abbreviation MSM is conventionally used in professional literature

Metrosexual: A term popularized in the 1990s referring to a heterosexual male who assumes characteristics traditionally associated with gay male stereotypes. While the term seems to imply a shift in sexual orientation it more accurately reflects a loosening of restrictions around male gender role adherence and is not related to sexuality.

Non-Op (also Non-Operative): A term to describe a transgendered person who does not plan to have sex reassignment surgery.

Outing: Publicly revealing the sexual orientation, gender identity, or intersex status of an individual who has chosen to keep that information private. Some activists, political groups, and media believe outing is justified and/or newsworthy when the person involved works against the interests of LGBTQI people. Others oppose it entirely as an invasion of privacy.

Partner or Significant Other: Primary domestic partner or spousal relationship(s). May also be referred to as *girlfriend/boyfriend, lover, roommate, life partner, wife/husband*, or other terms.

Pangender/Omnigender/Polygender: A person whose gender identity is comprised of all or many genders.

Pansexual/Omnisexual/Polysexual: A person who is sexually attracted to all or many genders or gender expressions.

Passing: Being taken for a member of the dominant group – white, straight, cisgender (non-transgender), for example, LGBTQ²I people who have the ability to *pass* can choose to conceal the stigma associated with being a member of a sexual minority.

Pink Triangle: An inverted triangle adopted by lesbian and gay culture starting in the 1970s in remembrance of homosexuals who were forced to wear pink triangles in Nazi concentration camps. Lesbians often wore the red and black triangles.

Pre-Op (also Pre-Operative): Transsexual individuals who have not undergone sex reassignment surgery, but who desire to and are seeking that as an option. They may or may not “cross-live” full-time and may or may not take hormone therapy. They may also seek surgery to change secondary sex characteristics.

Post-Op (also Post-Operative): Transsexual individuals who have undergone sex reassignment surgery, and/or other surgeries to change secondary-sex characteristics such as breasts, chest, Adam’s apple, or body contours.

Pride: A healthy self-respect, which, in the context of the gay community, promotes empowerment, education, safe living, and the sense that it is “okay to be gay.”

Pride March/Pride Parade: A public procession or parade of the LGBTQ²I community and their allies to proclaim pride, solidarity, and unity.

Queer: Historically a pejorative term for “gay”. The word “queer” has been reclaimed by some members of the community as a political act intended to undermine the violence that is embedded with the original use of the term. “Queer” is also sometimes used as an umbrella term for LGBTQ²I. It is still considered a slur by some people and in some contexts. This and other reclaimed terms can be offensive to the in-group when used by the out-group, so such terms should be used with caution.

Questioning: A process whereby an individual is re-assessing his or her sexual orientation and/or gender identity. A person who is “questioning” may be unsure of their sexual identity or still exploring their feelings.

Rainbow Flag: Designed in 1978 in San Francisco by artist Gilbert Baker signifying the diversity and unity of the LGBTQ²IA movement. Originally, there were eight colors in the flag; pink for sexuality, red for light, orange for healing, yellow for the sun, green for natural serenity, turquoise for art, indigo for harmony, and violet for spirit. In 1979, the flag was modified to its current six-stripe format (pink was omitted; blue substituted for turquoise and indigo, and violet became rich purple).

Same Gender Loving (SGL): A term used often by gay and lesbian African-Americans as an alternative to ‘gay’ or ‘lesbian.’ It helps provide an identity not marginalized by racism within the gay community or heterosexism in society.

Sex: The biological (anatomical, hormonal, or genetic) traits used to categorize someone as either male or female.

Sexism: The societal/cultural, institutional, and individual beliefs and practices that privilege men, subordinate women, and denigrate women-identified values.

Sexuality: “Who you like and what you do.” Sexuality is distinct from gender identity and sex. Generally speaking, human sexuality is how people experience and express themselves as sexual beings and encompasses an array of social activities and an abundance of behaviors.

Sexual Identity: Sexual identity is identifying, claiming, and owning a part of the self, associated with one’s gender identity, sexual orientation, or sexuality. Sexual identity may mean identifying as a member of the LGBTQ²I community.

Sexual Minority: A group whose sexual identify, orientation or practices differ from the dominant group in the surrounding society.

Sexual Orientation: A person’s emotional, physical, and sexual attraction and the expression of that attraction with other individuals. The term “sexual orientation” is preferred over “sexual preference.” The latter term implies a choice and sexual attraction is not generally considered a choice.

Sexual Preference: A misleading term that conveys the idea that sexual orientation is always a choice. “Sexual orientation” is used more often and more accurate. Avoid using this term.

Sex Reassignment Surgery: Sex Reassignment Surgery (SRS) is permanent surgical body modification that seeks to attain congruence between one’s body and one’s gender identity. For example: chest reconstruction or genital reconstruction. (Sometimes known as Gender Reassignment Surgery).

Straight: A term originating in the gay community to describe heterosexuals.

Straight-Acting: A term, usually applied to gay men, who readily pass as heterosexual. The term implies that there is a stereotypical way gay men act that is significantly different from heterosexual men.

Stonewall: The site of several nights of violent protests following a police raid at the Stonewall Inn on June 28, 1969 in New York City. The Stonewall Inn was raided for no other reason than it was a drag bar. Although not the nation’s first gay-rights demonstration, Stonewall is regarded as the birth of the modern LGBTQ movement.

Tranny: Usually a pejorative term used for a transgender person, although some transgender people have reclaimed the term.

Transition: The process of a transgender individual changing his or her gender presentation in society. Transitioning often includes changes in name, clothing and appearance and may include anatomical changes. **Transitioning** is sometimes confused with sexual reassignment surgery (SRS) which is only one element of transitioning. Many people who transition choose not to have SRS. Whereas SRS is a surgical procedure, transitioning is more holistic and can encompass physical, psychological, social, legal, and emotional changes. Some genderqueer and

intersex people have little or no desire to undergo surgery to change their body but will transition in other ways.

Transgender/Trans: A term for people who challenge society's view of gender as fixed, unmoving, dichotomous, and inextricably linked to one's biological sex. Gender is more accurately viewed as a spectrum, rather than a polarized, dichotomous construct. This is a broad term that encompasses cross-dressers, intersexed people, gender benders, transsexuals and those who defy what society tells them is appropriate for their gender. The sexual orientation of transgender persons varies just as it varies across society.

Transman/Transmasculine: Identity label preferred by some female-to-male transgender people.

Transphobia/Transnegativity: Aversion, strong disapproval, hatred and/or discrimination against people who break or blur gender roles and sex characteristics. Like biphobia, it is prevalent in both straight and gay/lesbian communities.

Transsexual: Individuals whose assigned sex at birth does not match their gender identity and who, through sex reassignment surgery and hormone treatments may seek to change their physical body to match their gender identity. Transsexual individuals' sexual orientation can be heterosexual, homosexual, bisexual, or anywhere on the continuum.

Transwoman/Transfeminine: Identity label preferred by some male-to-female transgender people.

Transvestite: Generally a derogatory term to refer to a person who dresses in clothes traditionally associated with persons of a different gender. "Cross-dresser" is the preferred term.

Two-Spirit/Twin Spirit: Native American concept present in some indigenous cultures across North America and parts of Central and South America. It is a term of reverence, traditionally referring to people who display both masculine and feminine sex or gender characteristics, as well as manly hearted women who have lived a het life and produced children and after the death of her husband take female-lovers and are accepted by the community in that role. Named "berdache" by European colonists, those who are Two-Spirited are and were traditionally respected and may be healers or leaders thought to possess a high spiritual development.

Ze (pronounced "sea")/Hir (pronounced "here"): Two examples of alternate gender-neutral pronouns in lieu of "he/she" or "his/her".

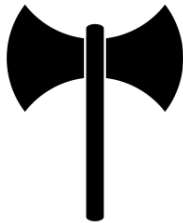
(Source: Safe Zones manuals from various programs, Martin Doucett, Ph.D., Carrie Sakai, Psy.D., Elle Van Dermark, MA, and Shewit Tekle.)

Symbols and Flags

HRC Symbol






The Human Rights Campaign (HRC) represents a grassroots force of over 750,000 members and supporters nationwide. As the largest national lesbian, gay, bisexual and transgender civil rights organization, HRC envisions an America where LGBT people are ensured their basic equal rights and can be open, honest, and safe at home, at work, and in the community.



Labrys

The labrys, or double-bladed battle axe, was a symbol used in the ancient civilization of Minoan Crete (sometimes portrayed as having certain matriarchal tendencies), and in ancient Greek legends. It was supposedly used by Scythian Amazon women warriors (sometimes said to be ruled by two queens at a time). It is associated with the Greek goddess Demeter (Ceres in Roman mythology) and occasionally the Greek goddess Artemis (Diana in Roman mythology). The labrys represents lesbian and feminist strength and self-sufficiency.

Triangles		
 <p>The pink triangle was originally used to denote homosexual men at Nazi concentration camps. It has been argued it included lesbians. Today the badge is a lesbian symbol.</p>	 <p>The black triangle marked asocial and work-shy individuals, including prostitutes, Roma, and others in Nazi concentration camps</p>	 <p>The pink triangle overlapping a yellow triangle was used to tag <u>Jewish</u> homosexuals in Nazi concentration camps</p>

Lambda



Greek letter lambda was originally chosen by the Gay Activists Alliance of New York in 1970. In December 1974, the lambda was officially declared the international symbol for gay and lesbian rights by the International Gay Rights Congress in Edinburgh, Scotland. Also, the lambda is said to signify unity under oppression. The gay rights organization Lambda Legal and the American Lambda Literary Award derive their names from this symbol.

Purple hand



On Halloween night (31 October), 1969, sixty members of the Gay Liberation Front (GLF) and the Society for Individual Rights (SIR) staged a protest at

San Francisco's *Examiner* in response to a series of news articles disparaging LGBT people in San Francisco's gay bars and clubs. The peaceful protest against homophobic editorial policies of the *Examiner* turned tumultuous and was later called Friday of the Purple Hand and Bloody Friday of the Purple Hand. Examiner employees dumped a bag of printers' ink from the third story window of the newspaper building onto the crowd. Some reports were that it was a barrel of ink poured from the roof of the building. The protestors used the ink to scrawl Gay Power and other slogans on the building walls and stamp purple hand prints throughout downtown San Francisco resulting in one of the most visible demonstrations of gay power.

Rainbow flag



Gilbert Baker designed the rainbow flag for the 1978 San Francisco's Gay Freedom Celebration. The flag does not depict or show an actual rainbow. Rather, the colors of the rainbow are displayed as horizontal stripes, with red at the top and purple at the bottom. It represents the diversity of gays and lesbians around the world.

Gender symbols

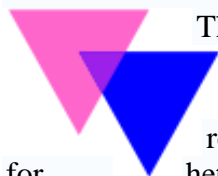


Pairs of male gender symbols and female gender symbols are used to form symbols for gay and lesbian, respectively. Variations on this theme can be used to represent bisexuals and transgender persons.

Bisexuality symbols



First unveiled on 5 December 1998, the bisexual pride flag was designed by Michael Page to represent the Bisexual community. This rectangular flag consists of a broad magenta stripe at the top, representing same-gender attraction; a broad stripe in blue at the bottom, representing opposite-gender attraction; and a narrower deep lavender band occupying the central fifth, which represents attraction towards both genders.



The blue and pink overlapping triangle symbol represents bisexuality and bi pride. The exact origin of this symbol, sometimes facetiously referred to as the biangles, remains ambiguous. It is popularly thought that the pink triangle may represent homosexuality, as it does when it stands alone, while the blue stands for heterosexuality. The two together form the color lavender, a blend of both sexual orientations and a color that has been associated with homosexuality for almost a century. It's also possible that the pink may represent attraction to females, the blue attraction to males and lavender attraction to both.



The bisexual moon symbol was created to avoid the use of the Nazi-originated pink triangle.

Transgender symbols



Popular transgender symbol, used to identify transvestites, transsexuals, and other transgender people, frequently consist of a modified biological symbol, originating from a drawing by Holly Boswell. In addition to the arrow projecting from the top right of the circle that comprises the biological symbol for the male (from the astrological symbol for Mars), and in addition to the cross projecting from the bottom of the circle that comprises the biological symbol for the female (from the astrological symbol for Venus), the symbol incorporates both these devices as well as a cross topped by an arrowhead (combining the male and the female motifs) which projects from the top left of the circle.



Another transgender symbol is the Transgender Pride flag designed by Monica Helms, and first shown at a pride parade in Phoenix, Arizona, USA in 2000. The flag represents the transgender community and consists of five horizontal stripes, two light blue, two pink, with a white stripe in the center. Other transgender symbols include the butterfly (symbolizing transformation or metamorphosis), and a pink/light blue yin and yang symbol.

What is Homophobia?

Homophobia takes many different forms. Sometimes it takes the form of physical acts of hate, violence, verbal assault, vandalism or blatant discrimination, such as firing an employee, evicting someone from their housing, or denying them access to public accommodations based solely on their sexual orientation or their perceived/assumed sexual orientation. There are many other kinds of homophobia and heterosexism that happen every day. We often overlook these more subtle actions and exclusions because they seem so insignificant by comparison but they are not. It is important for supportive allies of the LGBTQ community to recognize certain homophobic levels of attitude so that they may take steps towards changing that attitude.

- Looking at a lesbian or gay man and automatically thinking of her/his sexuality rather than seeing her/him as a whole, complex person.
- Changing your seat in a meeting because a lesbian sat in the chair next to yours.
- Thinking you can spot one.
- Using the terms “lesbian” or “gay” as accusatory.
- Thinking that a lesbian (if you are female) or gay man (if you are male) is making sexual advances if she/he touches you.
- Feeling repulsed by public displays of affection between lesbians and gay men but accepting the same displays of affection between heterosexuals.
- Not confronting a homophobic remark for fear of being identified with lesbians and gays.
- Not asking about a woman’s female lover or a man’s male lover although you regularly ask “How is your husband/wife?” when you run into a heterosexual friend.
- Feeling gays and lesbians are too outspoken about lesbian and gay civil rights.
- Feeling discussions about homophobia are not necessary since you are “okay” on these issues.
- Assuming that everyone you meet is heterosexual.
- Being outspoken about gay rights, but making sure everyone knows you are straight.
- Feeling that a lesbian is just a woman who couldn’t find a man or that a lesbian is a woman who wants to be a man.
- Feeling a gay man is just a man who couldn’t find a woman or that a gay man is a man who wants to be a woman.
- Worrying about the effect a lesbian or gay volunteer/co-worker will have on your work or your clients.
- Failing to be supportive when your gay friend is sad about a quarrel or breakup.
- Asking lesbian or gay colleagues to speak about lesbian or gay issues, but not about other issues about which they may be knowledgeable.
- Focusing exclusively on someone’s sexual orientation and not on other issues of concern.
- Being afraid to ask questions about lesbian or gay issues when you do not know the answers.

Homophobia in Clinical Terms

In a clinical sense, homophobia is an intense, irrational fear of same sex relationships that become overwhelming to the person. In common usage, homophobia is the fear of intimate relationships with person of the same sex. Below are listed four homophobic attitudes and four positive levels of attitudes toward gay and lesbian relationships and people.

(Developed by Dr. Dorothy Riddle of Tucson, Arizona)

Homophobic Levels of Attitude: Negative and Positive

Repulsion: Homosexuality is seen as a “crime against nature.” Gays are sick, crazy, immoral, sinful, wicked, etc. and anything is justified to change them (e.g. prison, hospitalization, negative behavior therapy, including electric shock). **Pity:** Heterosexual chauvinism. Heterosexuality is more mature and certainly to be preferred. Any possibility of becoming straight should be reinforced and those who seem to be born “that way” should be pitied, “the poor dears.”

Tolerance: Homosexuality is just a phase of adolescent development that many people go through and most people “grow out of.” Thus, gays are less mature than straights and should be treated with the protectiveness and indulgence one uses with a child. Gays and lesbians should not be given positions of authority (because they are still working through adolescent behaviors).

Acceptance: Still implies there is something to “accept,” characterized by such statements as “you’re not a gay to me, you’re a person,” “What you do in bed is your own business,” “That’s fine as long as you don’t flaunt it.” Denies social and legal realities. Ignores the pain of invisibility and stress of closet behavior. “Flaunt” usually means say or do anything that makes people aware.

Positive Levels of Attitude

Support: Basic American Civil Liberties Union (ACLU) approach. Work to safeguard the rights of gays and lesbians. Such people may be uncomfortable themselves, but they are aware of the climate and the irrational unfairness. **Admiration:** Acknowledges that being gay/lesbian in our society takes strength. Such people are willing to truly look at themselves and work on their own homophobic attitudes.

Appreciation: Value the diversity of people and see gays as a valid part of that diversity. These people are willing to combat homophobia in themselves and in others.

Nurturance: Assume that gay and lesbian people are indispensable in our society. They view gays and lesbians with affection and delight and are willing to be gay advocates and allies.

How Homophobia Hurts Us All

You do not have to be gay, lesbian, or bisexual, or know someone who is, to be negatively affected by homophobia. Though homophobia actively oppresses gays, lesbians, and bisexuals, it also hurts heterosexuals. Homophobia:

- Inhibits the ability of heterosexuals to form close, intimate relationships with members of their own sex, for fear of being perceived as gay, lesbian, or bisexual (GLB).
- Locks people into rigid gender-based roles that inhibit creativity and self-expression.
- Is often used to stigmatize heterosexuals; those perceived or labeled by others to be LGBTQ; children of LGBTQ parents; parents of LGBTQ children; and friends of LGBTQ people.
- Compromises human integrity by pressuring people to treat others badly, actions that are contrary to their basic humanity.
- Combined with sex-phobia, results in the invisibility or erasure of LGBTQ lives and sexuality in school-based sex education discussions, keeping vital information from students. Such erasures can kill people in the age of AIDS.
- Is one of the causes of premature sexual involvement, which increases the chances of teen pregnancy and the spread of sexually transmitted diseases. Young people, of all sexual identities, are often pressured to become heterosexually active to prove to themselves and others that they are “normal.” The following is an example scenario of this, taken from the report “Making Colleges and Universities Safe for Gay and Lesbian Students,” produced by the Massachusetts Governor’s Commission on Gay and Lesbian Youth:
 - If a guy goes out on a date with some girl, and his friends ask him if he scored last night, if he says no, they’d say stuff like, “Oh, you’re not good enough,” or, “You must be a faggot.” If it happens over and over and over, they might even think he never went out on a date with her and that he must be gay. (Source: heterosexually identified 18-year-old young woman; page 27)
 - Prevents some LGBTQ people from developing an authentic self identity and adds to the pressure to marry, which in turn places undue stress and often times trauma on themselves as well as their heterosexual spouses and their children.
 - Inhibits appreciation of other types of diversity, making it unsafe for everyone because each person has unique traits not considered mainstream or dominant. We are all diminished when any one of us is demeaned.
 - By challenging homophobia, people are not only fighting oppression for specific groups of people, but are striving for a society that accepts and celebrates the differences in all of us.

(Source: <http://www.salp.wmich.edu/lbg/GLB/Manual>)

Biphobia – Myths and Realities of Bisexuality

Sexuality runs along a continuum. It is not a static entity but rather has the potential to change throughout one's lifetime, and varies infinitely among people. We cannot fit our sexuality into nice neat categories which determine who and what we are. Bisexuality exists at many points along the sexual continuum.

Myth: Bisexuality doesn't really exist. People who consider themselves bisexuals are going through a phase, or they are confused, undecided, or fence-sitting. They'll realize that they're actually homosexual or heterosexual.

Reality: Bisexuality is a legitimate sexual orientation. Some people go through a transitional period of bisexuality on their way to adopting a lesbian/gay or heterosexual identity. For many others bisexuality remains a long-term orientation. For some bisexuals, homosexuality was a transitional phase in their coming out as bisexuals. Many bisexuals may well be confused, living in a society where their sexuality is denied by homosexuals and heterosexuals alike, but that confusion is a function of oppression. Fence-sitting is a misnomer; there is no "fence" between homosexuality and heterosexuality except in the minds of people who rigidly divide the two.

Whether an individual is an "experimenting heterosexual" or a bisexual depends upon how s/he defines her/himself, rather than on a rigid standard. While there certainly are people for whom bisexual behavior is trendy, this does not negate the people who come to a bisexual identity amidst pain and confusion and claim it with pride. Many bisexuals are completely out of the closet, but not on the lesbian/gay community's terms. Bisexuals in this country share with lesbians and gays the debilitating experience of heterosexism (the assumption that everyone is heterosexual and thereby rendering other sexual identities invisible) and homophobia (the hatred, fear, and discrimination against homosexuals).

Myth: Bisexuals are equally attracted to both sexes. Bisexual means having concurrent lovers of both sexes.

Reality: Most bisexuals are primarily attracted to either men or women, but do not deny the lesser attraction, whether or not they act on it. Some bisexuals are never sexual with women, or men, or either. Bisexuality is about dreams, desires, and capacities as much as it is about acts. Bisexuals are people who can have lovers of either sex, not people who must have lovers of both sexes. Some bisexual people may have concurrent lovers, but bisexuals do not need to be with both sexes in order to feel fulfilled.

Myth: Bisexuals are promiscuous hypersexual swingers who are attracted to every woman and man they meet. Bisexuals cannot be monogamous, nor can they or live in traditional committed relationships. They could never be celibate.

Reality: Bisexual people have a range of sexual behaviors. Like lesbians, gays or heterosexuals, some have multiple partners, some have one partner, some go through periods without any

partners. Promiscuity is no more prevalent in the bisexual population than in other groups of people.

Myth: Politically speaking, bisexuals are traitors to the cause of lesbian/gay liberation. They pass as heterosexual to avoid trouble and maintain heterosexual privilege.

Reality: Obviously there are bisexuals who pass as heterosexual to avoid trouble. There are also many lesbians and gays who do this. To “pass” for heterosexual and deny the part of you that loves people of the same gender is just as painful and damaging for a bisexual as it is for a lesbian or gay person.

Myth: Bisexuals get the best of both worlds and a doubled chance for a date on Saturday night.

Reality: Combine our society’s extreme heterosexism and homophobia with lesbian and gay hesitance to accept bisexuals into their community and it might be more accurate to say that bisexuals get the worst of both worlds. As to the doubled chance for a date theory, that depends more upon the individual’s personality than it does upon her/his bisexuality. Bisexuals don’t radiate raw sex any more than lesbians, gays, or heterosexuals. If a bisexual woman has a hard time meeting people, her bisexuality won’t help much.

The terms bisexual, lesbian, gay, and heterosexual sometimes separate the gay community unnecessarily. The members of the LGBTQ community are unique and don’t fit into distinct categories. The community sometimes needs to use these labels for political reasons and to increase their visibility.

(Adapted from: Wall, Vernon A. and Nancy J. Evans (eds.) “Using Psychological development theories to understand and work with gay and lesbian persons” *Beyond Tolerance: Gays, Lesbians and Bisexuals on Campus*. American College Personal Association. 1991.)

How Transphobia Hurts Our Communities

Transphobia is the fear and/or hatred towards transgender people and it is a serious problem that affects many people. Transgender people are often marginalized and ignored in both gay and straight communities. Ignorance and hatred keep many transgender people from speaking out or identifying themselves, which obscures them further. Like gay and lesbian people, many transgender people cannot be picked out of a crowd just by the way they look and blend into the local communities. Just remember, there are at least a handful of transgender people in every community and institution. You might very well sit next to a transgender person at school or at the office and not realize it.

Transgender people are people just like you, but they have life experiences and struggles that differ from most non-transgender people, which should be acknowledged and understood. The following stories are examples of transphobia that have happened to acquaintances of the author of this article, who also happens to be a member of the WPI community. The names of people in these examples have been changed in all but the last. While reading or hearing these stories

please think about your classmates, housemates, loved ones, and family members. Think about how such incidents could affect you personally or the members of the community around you.

Mike is a trans gendered man who is in the midst of medical transition and is gender-ambiguous looking. He also suffers from an ovarian/uterine condition that causes him much pain. Midnight on New Year's Eve, he is rushed to a hospital by his roommate because he has begun hemorrhaging and is doubled over in pain. The nurses and doctor in the emergency room noticeably back away from him and avoid physical contact, despite his serious medical problem. After hours of waiting on a gurney in an isolated room, no tests or exams are performed and he is escorted to the parking lot. He is sent home bleeding and in great pain without any treatment.

Tyler is a trans gender-identified high school student who presents himself as gender ambiguous despite the cruel treatment ze receives by classmates. At a gathering after school, some male students beat hir to the ground and gang rape hir. Other students notice the commotion and gather around to laugh and point, but not to help their peer.

Ukea and Stephanie were both born biologically male, but identify as and live as women. They are best friends and stick by one another in the face of the taunts and harassment they receive from neighbors. Late one night, they drive home from a friend's house and are never seen again. Their bodies are found early the next morning in Stephanie's car. Both girls were shot at least ten times while sitting at a stop light. It is believed that their murders were motivated by hate.

These tragic incidents occur because of people's ignorance, intolerance, and hatred towards transgender people. By educating yourself and becoming an ally to transgender people, you can combat ignorance and hatred and help prevent the occurrence of these atrocities.

(Written by Jesse Pack, WPI BiLaGA '03)

Understanding Transphobia and Transphobic Myths

Transphobia is the fear or hatred of transgender people. It can be found in forms ranging from jokes to violence to simply not acknowledging that transgender people exist. Transphobia hurts transpeople first and foremost; but it also sends a message to the population at large that anyone who tries on any expression or identity that does not conform to societal expectations of their gender will be ridiculed, silenced, economically marginalized, assaulted, or even killed. Often transphobia is used to keep people in rigid gender roles through intimidation. Everyone has something to gain from combating transphobia, even if you do not know of anyone in your life who is transgender.

The first and best way to fight transphobia is to speak out against violence and hateful speech about or directed towards transpeople. Movies that display transgender people as a joke or as psychotic should be denounced publicly for encouraging harmful stereotypes. When someone speaks of transpeople as disgusting, exotic, funny, sick, or other stereotypes that dehumanize people, let them know it is not okay to say hateful or hurtful things in your presence. The first big way allies can help is by calling people, media, and politicians on their comments and publicly acknowledging that they are being transphobic. The other way to help transpeople is to

know the facts about transpeople and their lives and educate people when transphobic myths are being perpetuated. Some common myths about transpeople are:

Myth: All transpeople are gay.

Reality: Some transpeople are attracted to the gender opposite of what they identify, some are attracted to the same gender as they identify, and some pick and choose among the genders. The simple truth is that gender identity has very little to do with sexual orientation.

Myth: Most transpeople are male-to-female.

Reality: Most media images of transpeople, especially of cross-dressers and transsexuals, have been MTF (male-to-female) but there are just as many FTM (female-to-male) transgender people in the world.

Myth: All this transgender stuff is a trend.

Reality: Transgender people have existed in every documented society and culture in human history. Recently transpeople have been coming out more and talking about their lives, and more attention has been focused on their issues. Breaking the silence is an important part of securing safety for transpeople.

Myth: All transgender people want to change their sex.

Reality: Some transpeople do but many other transpeople are perfectly happy with their bodies but simply express or think of themselves in terms of a gender they were not assigned at birth.

Myth: Transpeople are miserable/ disturbed people.

Reality: Many transgender people have a lot of stress and anxiety, in large part due to the massive lack of acceptance of them and their identity. However, many transpeople still live meaningful, accomplished lives. Those who transition into a new gender role may find much relief, but many transpeople find happiness and health across the many stages of their lives.

Myth: Transpeople are erotic/exotic.

Reality: The sexualization of transgender people is a huge industry and perpetuates many myths about transpeople and their sexuality. The objectification and eroticization of transpeople hurts and detracts from their basic humanity.

Myth: Transwomen are not “real women” or transmen are not “real men.”

Reality: Many people, upon finding out someone they know is transgender comment something like: Oh! You mean he's really a woman!/? Transgender people are really the gender they identify as, and usually have been so their whole lives, while it is true their experiences at times differ from someone who might have been assigned their gender at birth, difference of perspective does not make for authentic gender.

What is Heterosexual Privilege?

Heterosexual privilege is living without ever having to think twice, face, confront, engage, or cope with anything on this list.

- Marriage includes the following benefits:
- Public recognition and support for an intimate relationship.
- Receiving cards or phone calls celebrating your commitment to another person. Supporting activities and social expectations of longevity and stability for your committed relationships.
- Paid leave from employment and condolences when grieving the death of your partner/lover (i.e. legal members defined by marriage and descendants from marriages).
- Inheriting from your partner/lover/companion automatically under probate laws. Sharing health, auto, and homeowners' insurance policies at reduced rates. Immediate access to your loved ones in cases of accident or emergency Family-of-origin support for a life partner/lover/companion.
- Increased possibilities for getting a job, receiving on the job training, and promotion.
- Kissing, hugging, and being affectionate in public without threat or punishment. Talking about your relationship or what projects, vacations, family planning you and your partner/lover are creating.
- Not questioning your normalcy - sexually and culturally.
- Expressing pain when a relationship ends and having other people notice and attend to your pain.
- Adopting children and foster-parenting children.
- Being employed as a teacher in pre-school through high school without fear of being fired any day because you are assumed to corrupt children.
- Raising children without threats of state intervention, without children having to be worried which of their friends might reject them because of their parent's sexuality and culture.
- Dating the person of your desire in your teen years.
- Living with your partner and doing so openly to all.
- Receiving validation from your religious community.
- Receiving social acceptance by neighbors, colleagues, and new friends Not having to hide and lie about same-sex social events.
- Working without always being identified by your sexuality/culture (e.g. you get to be a farmer, brick layer, artist, etc. without being labeled the heterosexual farmer, the heterosexual teacher).

(Source: <http://clem.msced.edu/~LGBTQss/safezone.html>)

Examples of Heterosexism

- Someone's life partner was excluded from intensive care on the basis they are "friends" not family.
- Some gays and lesbians found that living in rural areas generally means being isolated "in the closet."
- When they find their posters for support meetings or dances defaced or removed, gays and lesbians feel discounted and physically threatened. This is not good for their health and sense of safety.
- Gay and lesbian young people found that heterosexism and homophobia in their schools encouraged them to drop out. If they stayed in school, they found themselves more vulnerable to mental health difficulties and even suicide attempts.
- A bank would not let a same sex couple open a joint bank account unless they identified themselves as "friends". The bank insisted they were not "spouses" and assumed "partner" meant business partner. These women felt angry and discounted.
- A same sex couple could not get each other covered by health benefits at work and had to pay more for coverage as two single individuals.
- Anti-gay jokes and humor on campuses and in work places created a hostile environment in which students and workers were afraid to disclose their minority sexual orientation. Being closeted is not good for your mental health.
- The word "faggot" was spray-painted on a house and a mail box in a gay man's neighborhood

(Source: Heterosexism Enquirer. Memorial University of Newfoundland:
<http://www.mun.ca/the/>)

The Heterosexual Questionnaire

The following questions were oftentimes asked of people in the LGBTQ community. We reversed the audience and put the heterosexual community in question.

Your Favorite Questions about the World of Practicing Heterosexuals

1. What do you think caused your heterosexuality?
2. When and how did you first decide you were a heterosexual?
3. Is it possible your heterosexuality is just a phase you may outgrow?
4. Is it possible your heterosexuality stems from a neurotic fear of others of the same sex?
5. Isn't it possible all you need is a good LGBTQ lover?
6. Heterosexuals have histories of failures in LGBTQ relationships. Do you think you may have turned to heterosexuality out of fear of rejection?
7. If you've never slept with a person of the same sex, how do you know you wouldn't prefer it?
8. If heterosexuality is normal, why are a disproportionate number of mental patients heterosexual?
9. To whom have you disclosed your heterosexual tendencies? How did they react?

10. Your heterosexuality doesn't offend me as long as you don't try to force it on me. Why do you people feel compelled to seduce others into your sexual orientation?
11. If you choose to nurture children, would you want them to be heterosexual, knowing the problems they would face?
12. The great majority of child molesters are heterosexuals. Do you really consider it safe to expose your children to heterosexual teachers?
13. Why do you insist on being so obvious and making a public spectacle of your heterosexuality? Can't you just be what you are and keep it quiet?
14. How can you ever hope to become a whole person if you limit yourself to a compulsive, exclusive heterosexual object choice and remain unwilling to explore and develop your normal, natural, healthy, God-given homosexual potential?
15. Heterosexuals are noted for assigning themselves and each other to narrowly restricted, stereotyped sex-roles. Why do you cling to such unhealthy role-playing?
16. Why do heterosexuals place so much emphasis on sex?
17. With all the societal support marriage receives, the divorce rate is spiraling. Why are there so few stable relationships among heterosexuals?
18. How could the human race survive if everyone were heterosexual, considering the menace of overpopulation?
19. There seem to be very few happy heterosexuals. Techniques were developed to help you change if you really want to. Have you considered aversion therapy?
20. Do heterosexuals hate and/or distrust others of their own sex? Is that what makes them heterosexual?

(Developed by Martin Rochlin, Ph.D. A more in-depth version of this test can be found at <http://www.mun.ca/the/heterosexattitudes.htm>)

Some Basics

As briefly mentioned in the Definitions and Terminology, "Transgender" is a broad term including all individuals who step outside of gender expression "typical" of their birth sex. The term transgender differs from the terms Transsexual, Cross Dresser, and Drag Queen in the following ways:

Transgender people do not believe they dress inappropriately for how they identify themselves. To Cross Dress, or to wear clothes usually reserved for your opposite biological sex, or to be a Drag Queen or King, does not mean that the person calls themselves a Transgender person. Who are Transgender Youth?

To put it simply, transgender youth challenge gender. When we are born we are labeled as male or female, and are prepared by society to live our lives accordingly. Fortunately, our lives and bodies and gender are more complex than this. Some people born with "female bodies" experience their gender as male and vice-versa. Others don't experience gender as male or female at all. We must recognize that no two people experience gender the same way - and that's a good thing!

Transgender youth may identify as shape shifters, non-male/non-female, intersex, butch queens, boy dykes, two-spirits, femme queens, boy-girls, transvestites, crossdressers, gender queers, bigenders, transsexuals, FTMs (female to males), MTFs (male to females), new women, new men, transgressively gendered and so on.

Most individuals, when it comes to their gender, sex, and sexuality do not always lie on one end of the spectrum, but somewhere in the middle. Today's culture leaves little room for androgynous individuals, but as you can see every person's gender/sex/sexuality is very personal, complex, and quite unique to them.

Sex - At birth individuals can be born either solely male, solely female or somewhere in between; those in the middle are usually referred to as intersexed. With changes (either chosen or unchosen) a person can move along this spectrum.

Gender - A person's gender includes IDENTITY (how one views his/herself in relation to how society defines a man or a woman), EXPRESSION (the way one allows others to view him/her), and ATTRIBUTION (what someone assumes about your gender when they look at you). An individual, again, may fall anywhere along these spectra.

Sexuality - Sexuality (sexual/affectional orientation; who you are attracted to) also varies greatly individual to individual. If you think of men being on one side of the spectrum and women being on the other, it may be males/females that the person is attracted to, or is it really masculinity/femininity? For someone in the middle of the spectrum, are gender variant individuals attractive to you?

Identity - Views of self in relation to how society defines a man or woman.

Expression - The way one allows others to see him/her.

Attribution - What someone assumes about your gender when they look at you.

Sex/Gender/Sexuality Continuums - Sex, gender, and sexuality can all be thought of as continuums. Where would you fall onto these continuums?

(Source: "Transgender Youth," National Youth Advocacy Coalition, and Mycroft Holmes, BAGLY)

Transgender Emergence – a developmental model

The process of developing a gender identity is a normative process that everyone experiences, but for gender variant people the process is complicated by cultural expectations that are at dissonance with their core sense of self. The emergence process describes an adaptive stage model for transgender men and women who are coming to terms with their own gender variance and moving from an experience of denial and self-hatred to one of self-respect and gender congruence. These stages are not necessarily linear and are impacted by other identity issues.

These stages are not meant to “label” people or define transgender maturity. Many transgender people negotiate these stages without professional assistance.

Awareness - In this stage a person begins to be aware that the source of feeling different from others may be related to gender. People in this stage are often in great distress. An ally can help by listening and normalizing the experiences the person is having.

Seeking Information/Reaching Out - In the second stage, a person may seek to gain education and support about gender variation. An ally can help by facilitating access to accurate information and encouraging outreach.

Disclosure to Significant Others - The third stage involves the disclosure of gender difference to significant others – spouses, partners, family members and friends. An ally can help by encouraging the person to prepare for these disclosures – suggesting professional support if it seems appropriate.

Exploration – Identity and Self-Labeling – The fourth stage involves the exploration of various (transgender) identities. An ally can help by remaining open to various possible gender identities and expressions, supporting the person’s articulation and comfort with a unique gendered identity.

Exploration – Transition Issues/Possible Body Modification. The fifth stage involves exploring options for transition regarding identity, presentation, and body modification. An ally can help by remaining open to this process, and advocating toward their manifestation.

Integration – Acceptance and Post-Transition Issues. In the sixth stage the person is able to integrate and synthesize (transgender) identity. An ally can help by supporting transition-related issues, such as on-campus safety, resources, and education.

(Adapted from *Transgender Emergence: Therapeutic Guidelines for Working With Gender-Variant People and Their Families* by Arlene Istar Lev C.S.W.-R, C.A.S.A.C)

Things Non-Trans Individuals May Take for Granted

- My validity as a man/woman/human is not based upon how much surgery I have had or how well I *pass* as a non-trans person.
- I don’t have to hear “So have you had the surgery?” or “Oh, so you’re really [an incorrect sex or gender]?” each time I come out to someone.
- Strangers do not ask me what my “real name” (birth name) is and assume they have a right to call me by that name.
- People do not disrespect me by deliberately using incorrect pronouns even after they were corrected.
- I do not have to worry about whether I will be able to find a bathroom to use or whether I will be safe changing in a locker room.
- When I go to the gym or a public pool, I can use the showers.

- Strangers don't assume they can ask me what my genitals look like and how I have sex.
- If I end up in the emergency room, I do not have to worry that my gender will keep me from receiving appropriate treatment nor will all my medical issues be seen as a product of my gender. (i.e. "Your nose is running and your throat hurts? Must be due to the hormones.")
- My health insurance provider (or public health system) does not specifically exclude me from receiving benefits or treatments available to others because of my gender.
- When I express the internal identities in my daily life, I am not considered mentally *ill* by the medical establishment.
- I am not required to undergo extensive psychological evaluation in order to receive basic medical care.
- The medical establishment does not serve as a "gatekeeper" which disallows self-determination of what happens to my body.

(Source: Jared [queerboysf@hotmail.com])

Supporting Transgender People

Apart from speaking out against transphobia and educating our communities about the realities of transgender people and their lives, allies can also make an effort to be respectful and supportive of transpeople and their experience. If you know transgender people in their community be sure to respect their identity and expression.

Validate their identity. Simply acknowledging and believing a transperson's gender can be an extreme relief. Be sure to use their preferred pronoun and name.

Respect their privacy. Many transpeople want only a few trusted people to know their history or physical status. Make sure it is okay with the person to discuss with other people that they are transgender or other related specifics of their lives.

Consider transgender people when announcing community events. At present, when a "men's event" or "women's event" is announced, transpeople cannot always assume they are welcome. Specify women or men-identified. Remember also that some people identify as both, neither, or other, "all genders welcome" is a good all-inclusive phrase.

Include protection for transgender people in worker contracts and laws. It is currently legal in most areas to discriminate on the basis of gender expression and/or identity. A big way allies can help is by advocating and implementing explicit protection for Trans workers and citizens.

Be aware of gendered spaces. Be sensitive to the fact that bathrooms, locker rooms, and gender-specific events can be a place of potential embarrassments or violence for transpeople.

Just ask! If you are not sure what pronoun a person prefers or how they identify, just ask. If for some reason asking doesn't feel comfortable, try to speak without using gender-specific pronouns.

If you make a mistake, apologize and move on. Occasionally you might accidentally use a wrong pronoun or say a wrong name when addressing someone transgender. Apologize and correct yourself, but not too profusely.

Acknowledge their experience. If a transperson does talk about their body, identity and experience, you might be surprised to hear that their lives do not match up to your expectations. For instance, a male you know might have given birth at some point. This is simply part of the Trans experience. Accept it and learn!

Above all it is important to send the message out to transgender people in our communities that they are welcome, appreciated, and that transphobia will not be tolerated. By holding people accountable for transphobic actions and by including transpeople in our events we can all benefit from living in safer communities.

(Adapted from a publication by Gender Queer (GQ), a subgroup of the University of Oregon Lesbian, Gay, Bisexual, Transgender, and Queer Alliance)

Additional Resources

In addition to reading and learning from this manual, allies and transgender people might find additional resources helpful, whether you need to find support, or are looking for a good book or movie. Please see the Safe Zones at SDSU resource list for suggestions.

Intersexed

Intersexed people do not neatly fall into the constructed biological categories of male or female. When intersexed individuals are born, often doctors cannot easily identify them as “male/boy” or “female/girl” and scramble to “fix the problem,” usually through painful surgeries that greatly compromise sexual function and well-being. Intersexed people are sometimes referred to as “hermaphrodites” which is a clinical term and label that is considered archaic and demeaning. Despite popular belief, intersexuality is relatively common in about one out of every one five hundred to one thousand births.

There is a lot of secrecy and shame in medical communities and families regarding intersexed people. Many families do not openly discuss the subject, and some individuals and/or their parents are not even aware that their bodies were altered while in infancy or young childhood. In fact, there are several intersexed people who attend this school and you are probably not even aware.

The following are personal experiences of intersexed individuals and their loved ones. When reading these experiences please open your hearts and minds with compassion.

Cheryl Chase, activist: “Until the age of 18 months, Cheryl Chase was known as Brian. She was born in the late 1950s and diagnosed as a ‘hermaphrodite’, which meant that her genitals were ‘ambiguous’. Such ambiguity was not acceptable to her doctors, so they decided that she would be ‘assigned’ a female. They performed a clitorrectomy, and her parents began raising her as a girl.

Chase explains: ‘There was no concern about sexual function, and no male doctor could fathom a man with such a small penis.’ Chase didn’t learn about her past until she was a young adult, because her parents were instructed to get rid of anything that suggested her male potential, like boyish clothing, photographs, and toys. The family even relocated. They were also told to never, ever discuss it with their new daughter. As a child, all Chase knew was that she wasn’t happy. She ran away from kindergarten and hated wearing dresses. ‘I knew I wasn’t like other girls, and I wasn’t going to marry a boy’, she recalls. ‘I was romantically attracted to women.’ Her pubescent revelation of her penchant for women was accompanied by recurring violent nightmares in which she was chased by killers. When trying to choose an escape route in those dreams, she didn’t know whether to slip into the public men’s or women’s room. All the while, her abdominal organs were falling out between her legs. Chase suffered in painful silence for years until she finally began gathering her medical records to determine how her past had shaped her future. Over the years Chase read histories of the gay and lesbian civil rights movement and in 1992 mustered the courage to come out as intersexed. She realized she had to start advocating for other intersexed individuals to raise awareness and create camaraderie. ‘I always thought there was no one like me in the world’, she explains. She created the Intersex Society of North America (ISNA) to not only develop an intersex community but, more importantly, because, ‘the sorts of things that my parents and doctors did to me were horrific. And they’re still doing these mutilating surgeries on people and they still tell parents it’s necessary, safe and the child will never have a normal life without it.’ ” [1].

Anonymous, parent of intersexed child: “When his child was born just over 20 years ago, his first question like most new fathers, was, ‘is it a boy or a girl?’. The doctor ignored him. He asked again, and this time the doctor responded, ‘I don’t know’. He called his mother to share his news, and when she asked if it was a boy or a girl, his response freaked her out mostly because she didn’t know what she was going to tell her friends when they asked the child’s sex. That’s when his newborn’s genitals began to weigh heavily on his mind. ‘To me it looked like a penis,’ he recalls. ‘To the doctors it was a clitoris, and they said ‘you should probably have surgery right away, then you can say yes, you had a girl and get on with your life.’’ He asked to speak with other parents who had made the same decision, but got no response. He asked to speak with other parents who had dealt with this issue. No names were forthcoming. So, with fear of losing a child as their motivation, he and his wife consented to the sex-assignment surgery when their baby was just three weeks old. ‘When they brought her back from surgery I was wild,’ he says. ‘She was sobbing and shaking uncontrollably. It was clear she was traumatized and I thought ‘Oh, my God, what have I done?!’” What was most disturbing to him was the doctor’s pride at his own handiwork. ‘Here I was devastated by how pathetic and upset my child was, and the surgeon comes in, pulls a piece of gauze out of the vaginal canal, slaps me on the back and tells me what a magnificent job he’s done. He might as well have been talking about a pizza or a great suit.’

Lynell Stephanie Long, African-American Intersex activist: I was born at 11:45pm on June 11th, at Cook County Hospital in Chicago. After 14 hours of labor and massive blood loss I was born breech, and with ambiguous genitalia. My life during high school was sickening. I was teased daily because I looked very androgynous, and no one knew if I was a boy or girl unless they asked me. When asked I said I did not know for sure. When my mother overheard me saying that at the age of 15 she whipped me and told me I was an embarrassment to her.

I attended college after high school, even though I had no idea what I wanted to do with my life – besides die. Being hospitalized for over a week every summer gave me the notion that maybe I should be a doctor, but I wasn't smart enough. So I settled on being a medical assistant. I did have a genuine passion for working in the medical profession, I wanted to save children from the horror I received from the multiple tests, and examinations. I didn't want any children to feel the shame of having resident student doctors pile in your room and be lectured by a doctor while he lifted my gown, and pretended I wasn't there.

The most horrible experience I remember is lying in bed with IV's in both arms, having my doctor and at least fifteen student doctors stare at my genitals, and leaving without pulling down my hospital gown. I laid there exposed for over an hour until the nurse finally came in to change the IV bag. At the age of 29 I married a girl I met in college. I married because I was told that's what was expected of me. Needless to say, the marriage didn't last long.

After that I spent years and years abusing drugs and alcohol. I did everything I could to kill myself, but nothing worked. Eventually I got addicted to crack cocaine, and went into the rehab. Getting sober and drug-free was the best choice "I" made regarding my life.

It wasn't until I got sick in 1997 that I found out that I was Intersex. My endocrinologist asked a lot of questions, particularly about the scar that runs from the tip of my penis to my anus. I needed to trust someone; I knew I was going to try to kill myself again unless I was able to be the woman I am. I told him my story, and he listened. Today I love me the way I am, and my girlfriend loves me as well. Someone once said, if you love yourself that's good, if someone else loves you as well that's great. It's great because there are people that are opening their mind and learning more about Intersex conditions. After appearing on the Montel Williams show twice, and after receiving a lot of fan mail, I'm convinced that one day people will accept that there is a third gender, Intersex.

S. Asher Hanley, gay intersexed person: I, like one out of every 500 infants, was born intersexed. This means I'm neither here nor there, biologically speaking—I don't fit neatly into one of the expected options ("male" or "female"). Every day, on campus and off, I pass for the average queer (if there is such a thing). I am capable of passing until someone finds out what I am underneath my clothes, and then, once again, I become an outsider. This has defined my existence for so long that it is easy for me to forget I can be accepted at all. I am generally open with anyone who asks me whether I'm male or female (and you'd be surprised how many people will ask). I am glad that people ask and usually answer them honestly, as long as it seems safe to discuss. If it doesn't seem safe, I just say, "I'm a boy. I just reached puberty late." In a way I have been blessed with having an intersexed life. Not to say my biology makes me any more free of these gendered expectations—it doesn't. My biology only makes it clear that, at a more basic level, it makes as little sense to define only two sexes as it does to define only two genders. I believe I am, for better or for worse, living proof that human beings are far more complicated than that."

Intersexed individuals should not have to face secrecy, shame, disrespect, or cruelty in their lives. We can all help by educating ourselves about intersexuality and the experiences of intersexed people. Below is a short list of resources about this topic. It is important to recognize

and understand that people who are intersexed are not “mistakes” or “monsters,” but are human beings who deserve to be treated with respect and dignity.

(Written by Jesse Pack, '03)

Works Cited:

Stukin, Stacy. “Neither, Nor; Either, Or: The Intersex Question”. *Pride.02*: Profile Pursuit, Inc.: New York, 2002.

Long, Lynell Stephani. “My Story: Hermaphro-DYKE”.

<http://mypages.blackvoices.com/intersex/aboutus/>: copyright, 19993.

Hanley, S. Asher. “Different: My Experiences as an Intersexed Gay Boy”. *Revolutionary Voices: A Multicultural Queer Youth Anthology*. Ed. Amy Sonne. Alyson Publications: Los Angeles, 2000.

Coming Out

Imagine, for a moment, that you are back in high school. Remember your first big crush or your first kiss. Now imagine that you were in that same memory with a same sex crush. How would your experiences have been different? Now, we'll jump all the way back to elementary school. Because love in America is assumed to be straight, the discovery that one does not fit the mold can be frightening. From the time we are little, we are bombarded with images and sounds of the heterosexual experience in TV, music, movies, books, and fairy tales. We are encouraged to dream about living out the normal straight existence; marriage, kids, white picket fence, etc. by our families, friends, teachers, and religious mentors. Even the big Puberty talk with the school nurse in fifth or sixth grade mentions only the “straight and narrow path.”

Young children rarely seem to learn about other people's differences unless they are different. By the time we reach high school and college, many of our prejudices are formed and ingrained, but many aspects about our identities are only beginning to develop. At some point during sexual development, the gay teen/young adult realizes there is something “different” about himself or herself. This realization is the first step to “coming out.” The gay youth may feel ashamed, frightened, confused, isolated or may rejoice at this newfound identity.

In a series of narratives written by LGBTQ youth in the midst of the coming out process, a book *Two in Twenty* documents some stories about acceptance and love, while others are about rejection and sadness. The book is a sequel to *One in Ten*. The numbers are doubled because the author had hoped that in the ten years between the two books, the LGBTQ movement would come so far, that the stories of loneliness would be fewer. Unfortunately, the teens who contributed essays to the book still speak of isolation from other queer teens and overwhelming feelings of being “the only one.”

Eventually, the queer teen comes out a little further. He or she must decide whom to tell about this new discovery. She must figure out who will accept her and who will not. This is one of the most difficult parts of the coming out process. At times, one feels as if everything is on the line: home, family, and friendships. A straight teenager rarely feels this sort of risk when admitting his or her fondness for the opposite sex. How might this fear of rejection, labeling, discrimination,

and stereotype affect a person's self image in a negative way? How could he or she be affected in a positive way?

Luckily, more and more schools have stronger LGBTQ supports and resources such as Safe Zone programs, clubs, and mentors.

(By Leah Shier, Worcester State '03)

Coming Out: Students on Campus

Coming out is a term used to describe the process of identifying oneself as lesbian, gay or bisexual. There are two parts to this process: coming out to oneself and coming out to others. Coming out to oneself is perhaps the first step toward a positive understanding of one's orientation. It includes the realization that one is homosexual or bisexual and accepting that fact and deciding what to do about it.

Coming out to others is an experience unique to gay, lesbian and bisexual students. The decision to come out to another person involves disclosing one's sexual side, which is for the most part viewed as being a private matter. Some are afraid of being rejected but others worry that their sexual identity will be the overriding focus in future interactions with the other person. However, coming out does not always result in negative consequences. It can develop a sense of relief and a sense of closeness. Other issues are the extent of the revelation (should everyone know or should disclosure be selective?), timing and anticipation consequences.

The decision not to come out to others is called passing. Our culture tends to assume heterosexuality and persons who do not correct the heterosexual assumption are considered to be passing as heterosexuals. College students may believe that passing is preferable in an environment built on heterosexual events. These students usually experience some conflict as they make decisions on when to pass and when to be open and some live with fear about their secret being revealed. These students may also experience some hostility from those who are open and feel that they are not being honest with themselves or others.

Coming Out: Recent Trends

Students today are coming out at earlier ages. For example, studies conducted in the 1970s and 1980s found that the average age that gay males self-identified as gay was 19 to 23 years old. Recent studies indicate that the average age of self-identification has dropped to 14 or 16 years old. Many students are entering college already "out" and therefore have a very different set of expectations than students in previous generations.

LGBTQ people and issues have much greater visibility in pop culture. Today's students have grown up watching television shows such as "Will and Grace" with openly gay characters and many high schools have Gay/Straight Alliances or similar organizations, some were even taught by openly gay teachers. Students entering college are much more likely than those of previous generations to have openly LGBTQ friends and family members and are far more likely than their parents or grandparents to support equal rights for LGBTQ people, including marriage equality.

Ryan, C. (2003). "LGBT youth: Health concerns, services and care." *Clinical Research and Regulatory Affairs*, 20(2): 137-158.

Ways to Prepare for Coming Out

If you are LGBTQ and are considering coming out, or if someone confides in you that they may wish to come out, please keep these in mind.

Have a serious talk with yourself. Clarify specifically what you hope will happen as a result of disclosure, what you expect will really happen. Without a clear purpose, your presentation of self may be a scary and risky experience without an attainable objective.

Select the particular person or persons to whom you wish to disclose. Tell the person(s) that you want to share something important, that you want to have a serious personal conversation. Although you cannot make someone ready to hear what you have to say, you can create a situation in which the other person feels ready for a serious personal conversation.

Select a time and a place. Avoid situations that may result in a lack of time or privacy. Neither you nor the other person can interact honestly and fully if he/she does not feel there is enough situational privacy. Coming out is a continuing process, not a hit and run bombing mission or something done well in a crowded public place.

Keep your disclosure as simple as you can. That is, don't clutter it up with attempts to punish, cause guilt or gain sympathy. Talk about yourself, your feelings and your experiences. Stay with "I" statements such as "Sometimes I feel left out when people only ask me if I have an opposite sex crush." Being gay is no one's fault. What you as a person decide to do with your gayness is your responsibility.

Allow time for surprise reactions. It is doubtful that you came into self- acceptance overnight. Asking that another accept and appreciate you faster than you have learned to appreciate yourself is self-defeating.

Be ready to provide educational resources for the person you are coming out to; for example, books, films, magazine articles, journals, counselors, etc. Just as your recognition and learning process has taken time and energy, the "significant other" will need time to digest your disclosure and ingest a new understanding.

An important step, certainly not the last priority, is the setting up of a gay support system. Participating in a gay, lesbian, bisexual support group can help prepare you for disclosure to significant others in your life. It can also provide you with support and understanding during and after the disclosure. If this type of group is not available to you, having supportive friends, teachers, relatives, etc. is also a good source of support for the coming out process.

Coming out in our society is an endless process and being proud to be who you are requires constant affirmation of self.

(Source: Stephen Lanton, <http://clem.msced.edu/~LGBTQss/safezone.html>)

Possible Questions and Responses Students May Consider Before Coming Out

1. Are you sure about your sexual orientation?

Response: Don't raise the issue unless you're able to respond with confidence to the question, "Are you sure?" Confusion on your part will increase your parents' confusion and decrease their confidence in your conclusions.

2. Are you comfortable with your gay sexuality?

Response: If you are wrestling with guilt and periods of depression, you might be better off waiting to tell your parents. Coming out to them may require tremendous energy on your part and a positive sense of self will help.

3. Do you have support?

Response: In the event that your parents' reaction devastates you, there should be someone or a group that you can confidently turn to for emotional support and strength. Maintaining your sense of self-worth is critical.

4. Are you knowledgeable about homosexuality?

Response: Your parents may respond based on a lifetime of information from a homophobic society. If you have educated yourself on the subject, you will be able to assist them by sharing reliable information and research. It is important to remember that it took you time to understand this; it may take others time as well.

5. What's the emotional climate at home?

Response: If you have the choice of when to tell, consider the timing. Choose a time when they're not dealing with significant life changing issues such as death or taxes.

6. Can you be patient?

Response: Your parents will require time to deal with this information if they haven't considered it prior to your sharing. The process depends on the individual – but remember resources like Parents and Friends of Lesbians and Gays (PFLAG) can help.

7. What's your motive for coming out now?

Response: Hopefully, it is because you love them and are uncomfortable with the distance you feel. Never come out in anger or during an argument using your sexuality as a weapon.

8. Do you have available resources?

Response: Homosexuality is a subject most non-gay people know little about. Have information and resources available such as PFLAG flyers, a book addressed to parents, and contact information for a non-gay counselor who can deal fairly with the issue.

9. Are you financially dependent on your parents?

Response: If you suspect they are capable of withdrawing college finances or forcing you out of the house, you may choose to wait until they do not have this weapon to hold over you.

10. What is your general relationship with your parents?

Response: If you've gotten along well and have always known they love you and shared your love for them in return then chances are they will be able to deal with the issue in a positive way, but there still may be a period of questioning and adjustment.

11. What is their moral societal view?

Response: If they tend to see social issues in clear terms of good/bad or holy/sinful, you may anticipate that they will have serious problems dealing with your sexuality. If, however, they've evidenced a degree of flexibility when dealing with other changing societal matters, you may be able to anticipate a willingness to work this through with you.

12. Is this your decision?

Response: Not everyone should come out to their parents. Don't be pressured into it if you're not sure you'll be better off by doing so, no matter what their response.

(Source: Texas A&M University, Gay and Lesbian Student Services Speaker's Bureau Manual.
From <http://www.salp.wmich.edu/lbg/GLB/Manual>)

Family: The People Who Raised You

In coming out to family members, you hope they will show you love and support. They may actually need your support at the moment of revelation. Think about the following in advance: Your family may be shocked, confused, or afraid, which may show on their faces or through their words. Think back to how you felt when you first realized you were gay. How long did it take you to get used to the idea yourself? Be patient. Your family may wonder why you kept this secret from them. They may be saddened that you felt you could not share this information and that you did not seem to trust them. However, let them know that you are showing great courage and trust in coming out to them now; this should be the focus.

Your family members may be sad and they might cry. They may grieve for a lost dream of your future or for an image that started when they learned they were expecting you and then later imagined your first day of school, college, marriage and even grandchildren. These dreams may appear to be lost to them and they may need to grieve before they can build new dreams with the new information you have shared with them.

Your family may have concerns based on religion, culture, or what they have been taught. Religion is often a perceived obstacle. If you are familiar with your parents' and family members' religious beliefs, you may be able to anticipate their reactions. A point to try to understand is that we are all individuals, with our own opinions or interpretations of religious beliefs.

(Source: <http://clem.mscd.edu/~LGBTQss/safezone.html>)

Cass Model Of Homosexual Identity Development

What follows is a model for gay identity development. It can help you in understanding how an individual's perspective may be affected by that person's developmental stage. However, as with most developmental models, this model cannot capture the variety of paths different individuals follow. It is important to keep in mind that not all LGBTQ individuals go through all the stages, that they may not do it in order, and that they may not clearly fit in any one stage at a particular time.

Identity Confusion

"Could I be gay?" Person is beginning to wonder if "homosexuality" is personally relevant. Denial and confusion is experienced.

Task: Who am I? - Accept, Deny, Reject.

Possible Responses: Will avoid information about lesbians and gays; inhibit behavior; deny homosexuality ("experimenting," "an accident," "just drunk"). Males: May keep emotional involvement separate from sexual contact; Females: May have deep relationships that are non-sexual, though strongly emotional.

Possible Needs: May explore internal positive and negative judgments. Will be permitted to be uncertain regarding sexual identity. May find support in knowing that sexual behavior occurs along a spectrum. May benefit from being permitted and encouraged to explore sexual identity as a normal experience (like career identity, and social identity).

Identity Comparison

"Maybe this does apply to me." Will accept the possibility that she or he may be gay. Self-alienation becomes isolation.

Task: Deal with social alienation.

Possible Responses: May begin to grieve for losses and the things she or he will give up by embracing their sexual orientation. May compartmentalize their own sexuality. Accepts lesbian, gay definition of behavior but maintains "heterosexual" identity of self. Tells oneself, "It's only temporary"; "I'm just in love with this particular woman/man," etc.

Possible Needs: Will be very important that the person develops own definitions. Will need information about sexual identity, lesbian, gay community resources, encouragement to talk about loss of heterosexual life expectations. May feel the need for "permission" to keep some "heterosexual" identity (it is not an all or none issue).

Identity Tolerance

"I'm not the only one." Accepts the probability of being homosexual and recognizes sexual, social, emotional needs that go with being lesbian and gay. Increased commitment to being lesbian or gay.

Task: Decrease social alienation by seeking out lesbians and gays.

Possible Responses: Beginning to have language to talk and think about the issue. Recognition that being lesbian or gay does not preclude other options. Accentuates difference between self and heterosexuals. Seeks out lesbian and gay culture (positive contact leads to more positive sense of self, negative contact leads to devaluation of the culture, stops growth). May try out variety of stereotypical roles.

Possible Needs: Be supported in exploring own shame feelings derived from heterosexism, as well as external heterosexism. Receive support in finding positive lesbian, gay community connections. It is particularly important for the person to know community resources.

Identity Acceptance

"I will be okay." Accepts, rather than tolerates, gay or lesbian self-image. There is continuing and increased contact with the gay and lesbian culture.

Task: Deal with inner tension of no longer subscribing to society's norm, attempt to bring congruence between private and public view of self.

Possible Responses: Accepts gay or lesbian self identification. May compartmentalize "gay life." Maintains less and less contact with heterosexual community. Attempts to "fit in" and "not make waves" within the gay and lesbian community. Begins some selective disclosures of sexual

identity. More social coming out; more comfortable being seen with groups of men or women that are identified as "gay." More realistic evaluation of situation.

Possible Needs: Continue exploring grief and loss of heterosexual life expectations. Continue exploring internalized "homophobia" (learned shame for heterosexist society). Find support in making decisions about where, when, and to whom he or she self discloses.

Identity Pride

"I've got to let people know who I am!" Immerses self in gay and lesbian culture. Less and less involvement with heterosexual community. Us-them quality to political/social viewpoint.

Task: Deal with incongruent views of heterosexuals.

Possible Responses: Splits world into "gay" (good) and "straight" (bad). Experiences disclosure crises with heterosexuals as he or she is less willing to "blend in." Identifies gay culture as sole source of support; all gay friends, business connections, social connections.

Possible Needs: Receive support for exploring anger issues. Find support for exploring issues of heterosexism. Develop skills for coping with reactions and responses to disclosure of sexual identity. Resist being defensive!

Identity Synthesis

Develops holistic view of self. Defines self in a more complete fashion, not just in terms of sexual orientation.

Task: Integrate gay and lesbian identity so that instead of being the identity, it is an aspect of self.

Possible Responses: Continues to be angry at heterosexism, but with decreased intensity. Allows trust of others to increase and build. Gay and lesbian identity is integrated with all aspects of "self." Feels all right to move out into the community and not simply define space according to sexual orientation.

Adapted from: Cass, V. Homosexual Identity Development, 1979, Susan Young, SIUC, 1995, and Western Michigan University's "Safe on Campus" Program by Gregory M. Weight, Lesbian Gay Bisexual Transgender Community Office, University of Delaware, March 2000

People of Color Issues:

Same Gender Loving and other Share Experiences

The words "gay" or "lesbian" may be uncomfortable with some people. Many people do not feel as though those terms apply to them or were created with them in mind.

"For a lot of young Black same gender loving individuals being 'gay' is problematic with their families, troubling to society as a whole and miserable for them, personally.

I love to read and through research I found out that the term 'gay' was coined by homosexual White men back in the sixties. That is another reason I cannot and will not identify with it."

Same-Gender Loving (SGL) serves as an alternative to the LGBTQ terms. It is also encouraged by members of some minority groups, particularly people of African- American or Latino descent. To rid the presumption that "homosexual" just refers to what goes on (and what doesn't) in a bedroom, SGL brings it back to the basis of affection and relationships. Other wordings such

as “in the life” (from the days of the Harlem Renaissance) and “two-spirited” (representing special community members of some Native American cultures, vaguely similar to transgender) have been used.

The following contain comments from people of color that reflect their experience and thoughts on being LGBTQ.

Where am I?

There is an apparent lack of visibility of minorities in the gay subculture. Images and issues pertaining to people of color are often left out or ignored in the main forms of media.

“I look up pages of XY, OUT, Genre, and The Advocate [gay-related magazines], and all I see are articles suited for the ‘gay white male.’”

Unfortunately, when people of varying ethnicity are featured in such publications, we run the risk of exoticizing that culture or easily dismissing important aspects of their peoples’ lives. It is often hard to find support, resources, or individuals who are knowledgeable to special difficulties that minorities may face. There are not a lot of minority students to begin with, and an even smaller fraction is LGBTQ/SGL, so finding other people “like you” can be very difficult and may lead to disconnection and loneliness.

Two Worlds

Being a same-gender loving person of color can cause the need to deal with racism and homophobia together. Often times, there is a feeling of separation between when a person can acknowledge their racial/ethnic identity and their sexual orientation. Within groups of friends, some subjects are more tolerated or accepted than in others and frequently there is a separation between the “gay” friends and the “people of color” friends. There tends to be a separation between the “LGBTQ/SGL” world and the “POC” world. It is difficult to ascertain and integrate the two in a social environment that does not fully accept either, so many do not bother to try at the sign of resistance.

“It seems that being gay and Asian in America, one has to uphold his self-respect in two fronts. The first is being Asian... The second front is being gay.” For immigrants and non-native English speakers, lingual barriers and lack of knowledge about American cultural issues can lead to confusion and a lack of support. In some cultures, a word for “homosexuality” does not exist and the concept is often avoided from discussion. This can cause difficulty in coming out to parents who do not even understand that affection or who have been raised in environments that strongly condemn it.

“Most of my Korean and Asian friends referred [to] homosexuality as a thing that only existed in non-Korean and non-Asian groups.” Another major issue that can be magnified in people of color is having to deal with family expectations. In some minority families there is a strong expectation that a child will go to school, make money for his/her family, and create a family of their own. Some feel that by being same-gender loving they could not fulfill their family’s expectations, and are somehow letting their family down. Traditional views of marriage, career, and family are difficult requirements with which to comply. Within some cultures, there is a strong aversion to LGBTQ people and issues. Sexual taboos and traditional sex roles lead to a lot of sexual orientation identity conflicts, and possibly cause people to remain closeted or be

involved in high-risk behavior in order to hide their feelings. Check out the resources for more information.

Dual Prejudice

Unfortunately, stereotypes and prejudice can exist in individuals who are LGBTQ, like heterosexuals. For this reason, SGL people of color are referred to as being a “minority within a minority.” Here is an excerpt on such cultural racism from an Asian gay male’s perspective on relationships:

Here, they have terms like rice queen, potato queen, sticky rice, and banana. Gay culture insists that I am rice, and my boyfriend should be potato. My skin should be smooth, brown and hairless, and his should resemble that of a Wonder Bread. Now if I go against this, I am labeled as sticky rice and condemned as going against the natural way. I am introduced to films such as *M. Butterfly* and *The Wedding Banquet* wherein Asians are introduced with their respective white American partner.

(Ryan Pesigan Reyes: <http://www.youthresource.com/community/yoc/apiryan.cfm>)

When same-gender loving people can’t find resources specific to their own ethnicity and try to reach out to other minority groups, they can also face prejudice as well. For example, a Japanese woman could not find a support group for Asian women who love women, so she attempted to join a group for Black SGL women. Women from that group responded sharply, “What are you doing here? You ain’t black.”

(Written by Joey Bufanda, WPI BiLaGA '03)

Safer Sex - Education is the Key

There is a definite need to promote safer sex among gay, lesbian, bisexual, and transgender youth. The ideal of abstinence (despite it being a very heterosexual marriage-oriented concept) in preventing infection and disease tends to remain unrealistic and difficult to convey. If someone is going to abstain from sexual activity for now, that’s safe, but it’s also important to make sure the people that are sexually active have the necessary information and means of protection.

As with heterosexual students, some people when away from family for the first time may have the inclination to do things they normally would not be able to get by with at home, including sexual activity. However, very few high schools give the necessary sex education for gay, lesbian, and bi students, so many students are out there without a clue to how to protect themselves or partner. The recent moves to push for abstinence to reduce teen pregnancy have affected high school programs and considerably limited their scope of topics. For example, in North Carolina the topic of “homosexuality” in schools is against the law. Teachers are mandated to mention that homosexuality is a crime in the state, as well focus any sexual education classes on abstinence and are not permitted to touch upon issues of safer sex at all. A gay or bisexual male may incorrectly assume that condoms are only for pregnancy prevention, not a potential safeguard against STIs, such as HIV/AIDS. And few women know prevention through the use of dental dams or how to use “female condoms.”

Some people are uncomfortable requesting information about Sexually Transmitted Infections (STIs) and asking for protection (condoms, dental dams, etc). LGBTQ people may feel uncomfortable to discuss pertinent issues with their health care provider and lack the necessary education to know about safer sex measures and prevention of the spread of STIs.

(By Joey Bufanda, WPI BiLaGA '03)

What is AIDS?

AIDS (Acquired Immune Deficiency Syndrome) is a condition believed to be caused by a virus called HIV. This virus attacks the immune system, the body's "security force" that fights off infections. When the immune system breaks down, you lose this protection and can develop many serious, often deadly infections and cancers. These are called opportunistic infections because they take advantage of the body's weakened defenses. You may have heard it said that someone "died of AIDS." This is not entirely accurate, since it is the opportunistic infections that cause death. AIDS is the condition that lets the other bad stuff inside.

(Modified from: Gay Men's Health Crisis. <http://www.gmhc.org/basics>)

How is HIV Transmitted?

HIV can be transmitted through certain body fluids: blood, semen, vaginal secretions and breast milk. There is no evidence that the virus is transmitted through saliva, tears or sweat. HIV enters the body through mucous membranes (the lining of the rectum, the walls of the vagina, or the inside of the mouth and throat) or through direct contact with the bloodstream. The virus cannot enter through the skin, unless the skin is broken or cut and another person's infected body fluids enter the bloodstream. The virus cannot be transmitted through the air by sneezing or coughing. This is why there is absolutely no danger in casual contact with people with HIV.

High Risk

You have heard that people in "high-risk groups" can get HIV. But it's not who you are, it's what you do. High-risk behavior will leave you open to HIV infection, no matter who you are. High-risk behavior is having unprotected anal or vaginal sex with someone who is infected. "Unprotected" means without a latex condom. Although it's easier for the receptive partner to be infected, research has shown that the virus can also move in the opposite direction, infecting the insertive partner. Therefore, it doesn't matter if you're a "top" or "bottom," man or woman because you can be infected if you don't use protection. Oral sex is less risky, but it is possible to become infected orally.

Sharing needles with an infected person or injecting any substance with a used or dirty needle is probably the most direct way to become infected. Sex partners of people who shoot drugs are also at greater risk if they have unprotected sex.

Donating blood in the U.S. is absolutely safe. Needles used to take blood are sterile and individually packaged. They are also destroyed after use. People who received donated blood are also not at risk of contracting HIV. Although there have been cases of infection in the past, it is now nearly impossible to become infected with HIV by receiving blood via a transfusion. Screening procedures to detect infected blood have been in place for several years. Receiving transfusions, too, puts you at virtually no risk for HIV at the present time. The only other way to

get HIV is to be born with the virus. It can be transmitted before or at birth from the infected mother to her child, or through breastfeeding.

Protect Yourself: Condoms and Dental Dams

Since we know the virus is transmitted by body fluids entering another body, the best way to prevent infection is to block that entrance. Latex condoms (rubbers) have been proven to be the most effective prevention against HIV infection. Lambskin and other “natural membrane” condoms are not as good as Latex ones because they may allow HIV to pass through. The use of spermicidal (sperm-killing) lubricants, especially those with nonoxynol-9, may increase your protection, though some studies have also shown that nonoxynol-9 can increase irritation of the vagina or anus.

Spermicide should always be used with a condom and never instead of a condom. Condoms still provide the greatest protection, and relieve you of the worry about the risk involved. Both men and women can learn how to use condoms properly. Make them an integral part of sex and not an embarrassing, fumbling intermission.

How to Put on a Condom

1. When the penis is hard, squeeze the air out of the tip of the condom and place it on the head of the penis.
2. Hold the tip of the condom and roll it down completely. Apply plenty of water- based lubricant on the outside of the condom.
3. Use only water-based lubricants on latex condoms (KY®, Wet®, etc). Oil-based lubricants, such as Vaseline®, Crisco®, and hand lotions, can weaken the condom, resulting in a tear or break.
4. After ejaculation, hold the base of the condom and pull out. Never reuse a condom.

Protect Yourself: Oral Sex and Latex

In oral sex with a female bodied person or oral-anal sex, dental dams may be used. A dental dam is a six-inch square piece of thin latex that’s available in dental and medical supply stores. You can make a home-made dam by cutting a rolled condom to the center and opening it up, or by using plastic wrap. You should also use condoms as a barrier during oral sex with a male- bodied person, or when using sex toys. (Plastic wrap, however, has not been tested for protection against HIV.) The dam should cover the entire vulva or anal area and should be held at both edges. Be careful not to turn the dam inside-out during oral sex, since this will totally defeat the purpose. Remember: Never re-use condoms or dental dams.

(WPI Safe Zone Manual)

How to Use a Dental Dam

1. Rinse the powdery talc from the dental dam, pat dry with a towel or let air dry.
2. Place water-based lubricant on the side that faces either the female genital (vulva) or the anus.
3. Place barrier on the appropriate area. Do not move the barrier back and forth between areas as this can cause infection.
4. Throw away barrier after using. Don’t share or reuse dams.

Being An Ally

Four Levels in Ally Development

1. **Awareness:** It is important to become more aware of who you are and how you are different from and similar to lesbian, gay, bisexual, and transgender people.

Strategies to do this include:

- Conversations with gay, lesbian, bisexual and transgender individuals
- Attending awareness building workshops such as the Safe Zone training
- Reading about LGBTQ issues
- Self-examination

2. **Knowledge/Education:** You must begin to, and continue to, acquire knowledge about sexual orientation and gender identity and what the experience is for LGBTQ persons in society and your campus community.

You can do this by:

- Learning about laws, policies and practices and how they affect the LGBTQ person
- Educating yourself about LGBTQ cultures and norms of your community
- Contacting local and national LGBTQ organizations for information.
- Utilizing the educational materials and resources on the SDSU Safe Zones Web site and other websites of LGBTQ organizations, e.g. Human Rights Campaign (HRC); National Gay and Lesbian Task Force(The Task Force); Parents, Friends and Families of Lesbians and Gays (PFLAG); Gay, Lesbian and Straight Education Network (GLSEN); Lambda 10 Project (National Clearing House for LGBTQ Issues in Fraternities and Sororities); Campus Pride; and of course, SDSU Safe Zones
- Reading LGBTQ publications
- Attending LGBTQ events on campus and in the community

3. **Skills:** You must develop skills in communicating the knowledge that you have

You can do this by:

- Attending workshops such as Safe Zone continuing education events
- Role playing situations with friends
- Developing support connections
- Practicing interventions or awareness raising

4. **Action:** Action is, without a doubt, the only way that we can affect change in society as a whole, for, if we keep our awareness, knowledge, and skills to ourselves, we deprive the rest of the world of what we have learned, thus keeping them from having the fullest possible life.

You can do this by:

- Supporting LGBTQ students and colleagues
- Actively working to support social justice and equality for all people regardless of sexual orientation or gender identity
- Challenging homophobia/biphobia/transphobia and heterosexism

Qualities of Allies

An ally:

- is an advocate for gay, lesbian, bisexual, and transgender people
- has worked (or is currently working) to develop an understanding of heterosexism and transphobia
- chooses to align with LGBTQ people and responds to their needs
- believes that it is in her or his self-interest to be an ally
- expects support from other allies
- is able to acknowledge and articulate how patterns of oppression have affected his/her life
- is a “safe person” for someone who is gay, lesbian or bisexual to speak with. This means that one is committed to providing support and to maintaining confidentiality. This commitment extends to people with a gay, lesbian or bisexual roommate, friend or family member who may wish to speak with someone.
- can refer someone to another ally if they feel they can’t assist them with their particular concern
- expects to make some mistakes but does not use it as an excuse for non-action
- knows that an ally has the right and ability to initiate change through personal, institutional, and social justice
- tries to remain aware of how homophobia and other oppressions exist in her or his environment
- does not put down other groups of people on the basis of their race, religion, culture, gender, social status, physical appearance, or physical or mental abilities
- speaks up when a homophobic joke or stereotype is related and encourages discussions about oppression, or looks within herself or himself to unlearn the “myths” that society has taught
- promotes a sense of community and knows that he or she is making a difference in the lives of others

(Source: Shawn-Eric Brooks 1990 and CMU Allies:

Ten Ways to Be an Ally

1. Don’t assume everyone is heterosexual. Be aware that transgender and intersexed people exist.
2. Do not ever “out” someone. Just because you might know, don’t assume that others do.
3. Avoid anti-gay jokes and conversations.
4. Create an atmosphere of acceptance.
5. Use all-inclusive language. Use “partner” instead of “boyfriend” or “girlfriend.”
6. Actively pursue a process of self-education. Read and ask questions.
7. Acknowledge and take responsibility for your own socialization, prejudice, and privilege.

8. Educate others through one-on-one discussions, group programming, and utilizing teachable moments.
9. Interrupt prejudice and take action against oppression even when people from the target group are not present.
10. Have a vision of a healthy, multicultural society.

(Source: Delta Lambda Phi Fraternity)

Benefits of Being an Ally

Becoming less locked into sex roles and gender stereotypes.

Helping the lives of members of the LGBTQ community.

Making a difference in the campus environment.

Relieving oppression – oppression impacts everyone.

Supporting your friend, classmate, student roommate, teammate, brother, sister, colleague, mother, father, other peers, and other people you know who are LGBTQ.

Developing stronger self-esteem and lowering occurrences of depression, abuse of drugs and alcohol, and suicide.

Guidelines for Allies

These are some guidelines for people wanting to be allies for lesbians, gay men, bisexuals, and transgender people. In today's world, LGBTQ issues are being discussed more than ever before. The discussions are often highly charged and emotional and can be a scary and confusing to people on a very personal level. Being an ally is important, but it can be challenging as well as exciting. This list is by no means exhaustive, but provides a starting point. Add your own ideas and suggestions.

Don't assume heterosexuality. In our society, we generally assume that everyone we meet is heterosexual. Often people hide who they really are until they know they are safe to come "out". Use gender neutral language when referring to someone's partner if you don't know the person well. Be aware of the gender language you use and the implications this language might have.

Educate yourself about LGBTQ issues. There are many resources available, including reading lists, books, and videos available from the SDSU Pride Resource Office. Don't be afraid to ask questions.

Educate yourself on transgender and intersex issues.

Do not assume that everyone falls into the two categories of male/man and female/woman.

Explore ways to creatively integrate LGBTQ issues in your work. Establishing dialogue and educating about lesbian, gay, and bisexual issues in the context of your other work can be a valuable process for everyone regardless of sexual orientation. Integration of lesbian, gay and bisexual issues into work you are doing instead of separating it out as a separate topic is an important strategy to establishing a safe place for people to talk about many issues in their lives.

Challenge stereotypes that people may have about lesbians, gays and bisexuals, as well as other people in our society. Challenge derogatory remarks and jokes made about any group of people. Avoid making those remarks yourself. Avoid reinforcing stereotypes and prejudices.

Examine the effect sexual orientation has on people's lives and development. Identify how race, religion, class, ability and gender intersect with sexual orientation and how multiple identities shape our lives.

Avoid the use of heterosexist language, such as making remarks implying that all people of the same gender date or marry members of the other gender. Respect how people choose to name themselves. Most people with a same-sex or bisexual orientation prefer to be called gay, lesbian or bisexual rather than homosexual. "Queer" is increasingly used by some gay, lesbian, or bisexual people (especially in the younger generations), but don't use it unless you are clear that it is okay with that person. If you don't know how to identify a particular group, it's okay to ask. ("How do you define your sexuality? Do you like to use certain terms over others?")

Don't expect members of any population that is a target of bias (e.g. gays, Jews, people of color, women, and people with disabilities) to always be the experts on issues pertaining to their particular identity group. Avoid tokenizing or patronizing individuals from different groups.

Encourage and allow disagreement on topics of sexual identity and related civil rights. These issues are very highly charged and confusing. If there isn't some disagreement, it probably means that people are tuned out or hiding their real feelings. Keep disagreement and discussion focused on principles and issues rather than personalities and keep disagreement respectful.

Remember that you are human. Allow yourself not to know everything, to make mistakes, and to occasionally be insensitive. Avoid setting yourself up as an expert unless you are one. Give yourself time to learn the issues and ask questions and to explore your own personal feelings.

Ask for support if you are getting harassed or problems are surfacing related to your raising issues around sexual orientation and gender identity. Don't isolate yourself in these kinds of situations and try to identify your supporters. You may be labeled as gay, lesbian or bisexual, whether you are or not. Use this opportunity to deepen your understanding of the power of homophobia and heterosexism. Make sure you are safe.

Prepare yourself for a journey of change and growth that will come by exploring sexual identity issues, heterosexism, transphobia and other issues of difference. This can be a painful, exciting and enlightening process and will help you to know yourself better. By learning and speaking out as an ally, you will be making the world a safer, more affirming place for all. Without knowing it, you may change or even save people's lives.

(Source: "Being An Ally For Lesbians, Gay Men And Bisexuals."
Metropolitan State College of Denver)

Creating a Non-Homophobic Campus Environment

- Object to and eliminate jokes and humor that put down or portray LGBTQ people in stereotypical ways.
- Counter statements about sexual orientation or gender identity that are not relevant to decisions or evaluations being made about faculty, staff, or students.
- Invite “out” professionals to conduct seminars and provide guest lectures in your classes and offices. Invite them for both LGBTQ topics and other topics of their expertise.
- Do not force gay men or lesbian women out of the closet nor come out for them to others. The process of coming out is one of enlarging a series of concentric circles of those who know. Initially the process should be in control of the individual until (and if) they consider it public knowledge.
- Don’t include sexual orientation information in letters of reference or answer specific or implied questions without first clarifying how “out” the person chooses to be in the specific process in question. Because your environment may be safe does not mean that all environments are safe.
- Recruit and hire “out” gay and lesbian staff and faculty. View sexual orientation as a positive form of diversity that is desired in a multicultural setting. Question job applicants about their ability to work with LGBTQ faculty, staff, and students.
- Do not refer all LGBTQ issues to LGBTQ staff/faculty. Do not assume their only expertise is LGBTQ issues. Check with staff about their willingness to consult on LGBTQ issues with other staff members.
- Be sensitive to issues of oppression and appreciate the strength and struggle it takes to establish a positive LGBTQ identity. Provide nurturing support to colleagues and students in phases of that process.
- Be prepared. If you truly establish a safe and supportive environment, people that you never thought of will begin to share their personal lives and come out in varying degrees. Secretaries, maintenance personnel, former students, and professional colleagues will respond to the new atmosphere. Ten percent is a lot of people.
- View their creation of this environment as a departmental or organizational responsibility, not the responsibility of individual persons who happen to be gay, lesbian, or bisexual. Always waiting for them to speak, challenge, or act, adds an extra level of responsibility to someone who is already dealing with oppression on many levels.

(Buhrke, R. A., & Douce, L. A. (1991). “Training issues for counseling psychologists in working with lesbian women and gay men.” *The Counseling Psychologist*, 19, 216-234

Suggestions for Working with Lesbian, Gay, Bisexual and Transgender Students

- Don’t be surprised when someone comes out to you.
- Respect confidentiality. It is imperative that you can be trusted.

- Be informed. Most of us are products of a homophobic society. It is important that you are aware of the needs of gay, lesbian and bisexual students.
- Examine your own biases. If you are uncomfortable with dealing with the issue, and know that you are unable to be open and accepting, refer the student to someone else.
- Know when and where to seek help. Know all available resources.
- Maintain a balanced perspective. Sexual thoughts and feelings are only a small (but important) part of a person's self.
- Understand the meaning of "sexual orientation." Each person's sexual orientation is natural to that person. Avoid the term "sexual preference" and understand that sexual orientation is not a choice.
- Deal with feelings first. You can be helpful by just listening and allowing a lesbian, gay or bisexual student the opportunity to vent feelings.
- Help, but don't force. LGBTQ people need to move at the pace with which they feel most comfortable.
- Be supportive. Share with them that this is an issue that others must deal with, too.
- Don't try to guess who's gay.
- Challenge bigoted remarks and jokes. This shows support.

(Source: PFLAG "Parents, Families and Friends of Lesbians and Gays")

When a Gay Person Tells You They Are Gay

Please keep in mind that a LGBTQ person can not accurately predict your reaction to their coming out to you. You have lived in a society that often teaches intolerance of gay people. Therefore, by telling you, this person is putting a large amount of trust in those few words. At that one point, they have the possibility of losing you as a friend or family member, so often times the decision to first share that piece of their life is not one taken lightly.

Please understand that that the person has not changed. They are still the same person they have always been. You might be uncomfortable or surprised by the news at first, but make an effort to understand why you are surprised or uncomfortable. Also, this person may share things with you related to that part of their life. If he/she does so, please keep in mind all the times which you may have pointed out an attractive person, spoken about a significant other, or similar things. Also, do not assume this person is coming on to you or finds you attractive. That is silly.

If you want to learn more, then say so. Ask questions, but try not to offend or be rude to the person. Also, understand that it is not this person's job as a LGBTQ person to educate you fully. After awhile of people asking the same questions over and over, it can get a bit annoying. But, if you would like, ask questions such as:

How long have you known you were gay/lesbian/bi/trans?

Have you come out to others?

Has there been difficulty in your life because of this?

Is there someone special in your life?

Is there some way I can help you? Have I ever offended you without knowing?

(Source: unknown)

"What Should I Do If...?"

Answers to Commonly Asked Ally Questions

How can I tell if someone I know is lesbian, gay, or bisexual?

Ultimately, the only way to tell if a person is lesbian, gay, or bisexual is if that person tells you so. Many lesbians, gay men, and bisexuals don't fit the common stereotypes, and many people who fit the stereotypes aren't lesbian, gay, or bisexual. Assumptions on your part can be misguided. The important thing to remember is that it is very likely that someone you interact with on campus is lesbian, gay, or bisexual, and to try to be sensitive to that fact.

What should I do if I think someone is lesbian, gay, or bisexual, but they haven't told me?

Again, remember that assumptions on your part may be inaccurate. The best approach is to create an atmosphere where that individual can feel comfortable coming out to you. You can do this by making sure that you are open and approachable and by giving indications that you are comfortable with this topic and are supportive of lesbian, gay, and bisexual concerns. If the person is already out to themselves, and they feel that you are worthy of their trust, then they may tell you. If the person seems to be in conflict about something, it may or may not be because of their sexuality. In this case, it is best simply to make sure that they know you are there if they need to talk. Remember, they may not have told you because they don't want you to know.

How do I make myself more approachable to people who are lesbian, gay, or bisexual?

Demonstrate that you are comfortable with topics related to sexual orientation and that you are supportive of lesbian, gay, and bisexual concerns. Be sensitive to the assumptions you make about people—try not to assume that everyone you interact with is heterosexual, that they have a partner of a different gender, etc. Try to use inclusive language, such as by avoiding the use of pronouns that assume the gender of someone's partner or friends. Be a role model by confronting others who make homophobic jokes or remarks. Become knowledgeable about lesbian, gay, and bisexual concerns by reading books and attending meetings and activities sponsored by LGB organizations.

What kinds of things might a person who is lesbian, gay, or bisexual go through when coming out?

Because of the difficulty of growing up in a largely homophobic society, people who are lesbian, gay, or bisexual may experience guilt, isolation, depression, suicidal feelings, and low self-esteem. As LGB people become more in touch with their sexual orientation, they may experience any number of these thoughts and feelings to some degree. On the positive side, coming out can be an extremely liberating experience, as lesbians, gay men, and bisexuals learn who they are, gain respect for themselves, and find friends to relate to. Coming out to others can be an anxious process, as the individual worries about rejection, ridicule, and the possible loss of family, friends, and employment. For students, college life is already stress filled, and adding the process of grappling with one's sexual identity to that mix can be overwhelming.

If someone wants advice on what to tell their roommate, friends, or family about being lesbian, gay, or bisexual, how can I help?

Remember that the individual must decide for themselves when and to whom they will reveal their sexual identity. Don't tell someone to take any particular action; the person could hold you responsible if it doesn't go well. Do listen carefully, reflect on the concerns and feelings you hear expressed, and suggest available resources for support. Help the person think through the possible outcomes of coming out. Support the person's decision even if you don't agree with it, and ask about the outcomes of any action taken.

What do I do if someone who is lesbian, gay, or bisexual wants to come out in my office, on my residence hall floor, or within the context of any other group I am a part of?

Again, help the individual think through the possible outcomes. Discuss how others might react and how the person might respond to those reactions. Mention the option of coming out to a few people at a time, as opposed to the entire group. If someone has decided to come out, let them know you will support them. Suggest additional resources such as PFLAG, support groups, resource centers, or other materials that may help their coming out process.

How should I respond to heterosexual friends or coworkers who feel negatively about a person who is lesbian, gay, or bisexual in our office, on our residence hall floor, or in any group I am a part of?

When such problems arise, it is most useful to discuss this with the people involved. Help them to see that they are talking about a person, not just a sexual orientation. Make sure that you have accurate information so that you may appropriately discuss the myths and stereotypes that often underlie such negative reactions. Note the similarities between LGB people and heterosexual people. Be clear with others that while they have a right to their own beliefs and opinions, you will not tolerate anti-gay comments or discrimination. Remember that others may take their cues from you—if you are uncomfortable with, hostile to, or ignore someone who is lesbian, gay, or bisexual, others may follow suit. Conversely, if you are friendly with the person and treat them with respect, others may follow suit.

How can I support LGB people without my own sexual orientation becoming an issue?

Be aware that if you speak out about issues related to sexual orientation, some people may take this as an indication of your own sexual orientation. Take time in advance to think through how you might respond to this. How do you feel about your own sexual identity? Are you comfortable with yourself? Regardless of your sexual orientation, a confidence in your own self-image will make you less vulnerable.

How should I respond to rumors that someone is lesbian, gay, or bisexual?

Let others know that the sexual orientation of any individual is irrelevant unless that person wishes to disclose that information. If you can, address any myths or stereotypes that may be fueling such speculation. If a particular person continues to spread rumors, talk to that person individually.

How can I get others to be more open-minded about LGBTQ people?

In brief, be a role model for others by being open and visible in your support. Share your beliefs with others when appropriate. When LGBTQ topics come up, talk about them, don't simply

avoid them. Show that you are comfortable talking about these issues, and comfortable with LGBTQ people. Remember that part of your goal as an ally is to create bridges across differences and to increase understanding. While you may be motivated to share your views with others, be careful of being self-righteous; others can't learn from you if they are turned off from listening to begin with. Of course, your views are more convincing if they are supported by sound knowledge. Take the time to educate yourself so that you know what you are talking about.

How can I respond when someone tells a homophobic joke?

Many people believe that jokes are harmless and get upset by what they perceive as the "politically correct" attitudes of those who are offended by inappropriate humor. Labeling a belief as "politically correct" is a subtle way of supporting the status quo and resisting change. Most people who tell jokes about an oppressed group have never thought about how those jokes perpetuate stereotypes, or how they teach and reinforce prejudice. Someone who tells jokes about LGBTQ people probably assumes that everyone present is heterosexual, or at least that everyone shares their negative attitudes toward LGBTQ people. However, most people do not tell jokes to purposefully hurt or embarrass others, and will stop if they realize this is the effect. Responding assertively in these situations is difficult, but not responding at all sends a silent message of agreement. No response is the equivalent of condoning the telling of such jokes. It is important to remember that young people, particularly those questioning their own sexual identity, will watch to see who laughs at such jokes, and may internalize the hurtful message. In some instances, the inappropriateness of the joke could be mentioned at the time. In other situations, the person could be taken aside afterward. Try to communicate your concerns about the joke with respect.

How can I respond to homophobic attitudes?

If you disagree with a negative statement someone makes about LGBTQ people, the assertive thing to do is to say so. Again, silence communicates agreement. Remember what your goal is in responding: not to start an argument or foster hostility, but to attempt to increase understanding. Disagreement can be civil and respectful. Share your views without accusing or criticizing. You are simply presenting another way of thinking about the topic. It can be difficult to speak out in support of LGBTQ people. You might be afraid that others will question your sexual orientation, morals, and values, or that you will be ostracized. It is easy to forget that there might be positive effects of your outspokenness as well.

How can I respond to people who object to LGBTQ people for religious reasons?

Usually, there is no way to change the minds of individuals who base their negative beliefs about LGBTQ people on strict religious convictions. However, while respecting their right to believe as they wish, you can share some information with them. Concerning "conflicts" between LGBTQ people and Christianity, it can be useful to point out that identifying as Christian is not necessarily incompatible with being supportive of LGBTQ people. There is a great deal of diversity among the Christian community with regard to beliefs about same-gender sexuality. In addition there is much disagreement about the Biblical basis for condemning LGBTQ people. Many religious scholars argue that the Biblical passages which are said to refer to same-gender sexuality have been misinterpreted. It is also important to point out that while individuals are

entitled to their personal religious beliefs; these opinions should not be used to deny LGBTQ people equal treatment under the law.

Source: Adapted from the Northern Illinois University Safe Zone Program by Anthony Papini Center For Multicultural and Academic Initiatives, Bowling Green State University
Available online at <http://web.missouri.edu/~umcstudentlifeLGBTQ/resources/allyfaq.pdf>

Making Lesbian, Gay, and Bisexual Inclusive Assumptions

When you are interacting with people whose sexual orientation is unknown to you:

DON'T: Assume all mothers/fathers are heterosexual.

DO: Assume that a parent might be heterosexual or a lesbian or gay man.

DON'T: Assume when interacting with a "single" adult, that person's only "family members" are parents, siblings, grandparents, etc.

DO: Assume that any "single" person might be involved in a life-long committed relationship with a same sex partner who is as much a "family member" as a husband or wife.

DON'T: Assume that all children live in families consisting of the child and a male-female couple or the child and a single parent.

DO: Assume any child might live in a family consisting of the child and a single parent, the child and an opposite-sex couple, or the child and a same-sex couple.

DON'T: Assume that the term "women" refers only to heterosexual women, and that the term "men" refers only to heterosexual men.

DO: Include lesbians in your use of the generic "women" and gay men in your use of the generic "men", for example in a discussion of women's sexuality include relating with same-sex and opposite-sex partners, or in a list of organizations for fathers include groups for gay fathers.

DON'T: Assume that everyone will find male-female sexually suggestive imagery erotic, or that everyone will find banter about male-female sexual intrigue funny or playful.

DO: Assume that in any group of people, it is highly likely that there is at least one person who is much more interested in same-sex imagery and intrigue.

DON'T: Assume all sexually active women use birth control.

DO: Assume that a sexually active woman might have either a male or female sexual partner;

(GLB Manual, Western Michigan University)

Close Calls, Reporting Harassment: Secondary Victimization

A gay or lesbian crime survivor may experience increased discrimination or stigma from others who have learned about his or her sexual orientation as a consequence of the victimization. Representatives of the criminal justice system, including police officers and judges, often express such secondary victimization, which can further intensify the negative psychological consequences of victimization. It also extends outside the criminal justice system.

If their sexual orientation becomes publicly known as a result of a crime, for example, some lesbians and gay men risk loss of employment or child custody. Even in jurisdictions where statutory protection is available, many gay people fear that disclosure of their sexual orientation as a result of victimization will result in hostility, harassment, and rejection from others. Secondary victimization may be experienced as an additional assault on one's identity and community, and thus an added source of stress. The threat of secondary victimization often acts as a barrier to reporting a crime or seeking medical, psychological, or social services.

(By Gregory M. Herek, Professor of Psychology, University of California, Davis)

When a Student Informs You They Have Been Harassed

1. Ask the student if they are safe. Assess their situation regarding safety.
2. Inform the student that you will protect their confidentiality to the best of your ability.
3. If the student is not safe, call University Police (619-594-1991) and work together on a solution.

Helpful Suggestions

- Do not handle the situation alone if at all possible. Try to refer the student to the Ombudsman, Counseling & Psychological Services, Center for Student Rights and Responsibilities and/or University Police.
- SDSU Police Officers have had training in working with victims of hate crimes, including LGBTQ-related incidents. Do not assume, however, that any particular individual will be sensitive to the issues of LGBTQ students. Make sure that the people assigned to your particular case understand that the identity of the student is information that should be treated as confidential. In keeping with normal Public Safety protocol and the California Public Records Act, victim information in police records is not released to the media and general public.
- **To report an incident that occurred at SDSU, call (619-594-1991) from any phone and speak to the Dispatcher (In case of an immediate threat to life or safety off-campus, call 911).** You may also go in person to the University Police Department located on the corner of 55th Street and Remington Rd. next to Peterson Gym.
- If the problem occurred in a residence hall, you are encouraged to discuss it with the Residence Hall Coordinator or Director of Residential Education about the problem so that

any future incidents can be handled appropriately. If an incident involved a fraternity or sorority you may contact the Coordinator of Fraternity and Sorority Life, and if the incident involved an athletic team you may contact the coach or the Director of Athletics.

- File an incident report with the Pride Resource Center to provide documentation of harassment on or near campus.

(GLB Manual, Western Michigan University)

When to Refer a Student to Mental Health Services

Most of the students you encounter will be seeking support, advice, or information. Occasionally, you may meet a student who is experiencing significant emotional or psychological distress. This may be evident in the following ways:

A student states either directly or indirectly, that they are having difficulty coping or functioning academically. They may state that their grades are falling or they are missing classes despite their best efforts.

A student states they are having difficulty or can no longer cope with day-to-day activities and responsibilities. They may appear disheveled and unconcerned about their appearance. They will often report that they are overwhelmed by relatively simple tasks.

A student reports that they are experiencing symptoms of depression that have persisted for greater than two weeks. These symptoms include: a sense of hopelessness and helplessness, decreased concentration and focus, decreased motivation, and increased social isolation. Other symptoms include sleep disturbance, sudden weight loss or weight gain, crying spells, fatigue, and loss of interest or pleasure in previous enjoyable activities.

A student expresses excessive worry or concern that has persisted for more than a month. Symptoms of anxiety include: restlessness, fatigue, irritability, sleep disturbance, and difficulty concentrating. Students might also report feelings of panic, shortness of breath, headaches, sweaty palms, dry mouth, and racing thoughts.

A student may express suicidal thoughts or feelings. Talking about dying, wanting to disappear, jump, shoot oneself or otherwise cause self-harm are cause for concern. Stating that others would be better off without them, or expressing hopelessness that things will ever get better are other clues to be alert to. **Any indication that a student may take his or her life should be brought to the attention of a mental health professional immediately.**

A student may state that they have no support. While this person may not need formal psychotherapy they could benefit from the support and guidance of a mental health professional.

Follow your instincts! If you find yourself concerned, worried and unable to stop thinking about a student or their well-being then you should probably refer that student for mental health services. If you are unsure, call Counseling & Psychological Services at 619-594-5220 and discuss the situation with a therapist. If you need consultation on a weekend or after regular business hours, call the Access and Crisis Line at 1-800-479-3339.

Scenarios

Below are some example situations and reactions you could have as an ally to the LGBTQ community. Take these reactions as suggestions for things you might say. Use your own style and stick to what you feel comfortable saying. Remember, if you don't feel comfortable speaking up with a lot of people around, you almost never have to confront someone in a group. You could pull someone aside and tell them one on one how you feel.

You're sitting with a group of friends, and a couple of them make an obnoxious comment about gays.

- Ignore it.
- Refuse to laugh.
- Casually leave.
- Offer information to give a different perspective.
- Use "soft" confrontation and tell them it is not funny and possibly offensive.
- Tell them your supportive feelings about LGBTQ people.
- Ask them not to make such comments around you.

A friend comes up to you and tells a rumor that a floor member or classmate is supposedly a lesbian.

- Ignore them.
- Tell them you don't care.
- Tell them it doesn't matter what sexual orientation she is.
- Tell them it's harmful to pass on such information.
- Say that if she is a lesbian, let her come out on her own terms.
- Ask them not to spread it.
- Talk about some of the discrimination and abuse that LGBTQ people face on the hall floor or in class

A student complains to you that they can't find a bathroom that's safe for them to use in buildings where their classes are held.

- Listen to them thoughtfully and compassionately.
- Tell them of a bathroom you know of that's safe or unisex.
- Notify appropriate staff and/or administration of the lack of safe facilities, while maintaining the confidentiality of the student.
- Support students in their suggestions of creating more unisex bathrooms on campus.

Some of your friends make fun of a student or coworker, remarking that he/she is "disgusting" because "you can't tell what sex they are."

- Ignore it.
- Refuse to laugh.
- Tell them you find their behavior rude.
- Say you don't care.

A professor refers to intersexed people as “strange medical anomalies” during a lecture or meeting.

- Speak up in class and provide a more accepting/positive view of intersexuality.
- Tell the professor afterwards that you found their language inappropriate.
- Send the professor information or literature that is positive towards intersexed people.
- Report it to the department chair.

What’s difficult about these responses?

You could be ridiculed.

They might think or accuse you of being gay.

Friends might get mad at you.

It might create an awkward situation.

What are the tradeoffs? What do you gain?

Self-respect.

Respect from friends.

You could possibly support a person in the group who is a closeted LGBTQ person or has friends or family who are LGBTQ.

Model acceptance of differences for friends.

Build a sense of personal integrity.

SDSU Safe Zones is Here to Provide Information

All you need to do for more information is talk to one of the program trainers or email us at www.safezones.sdsu.edu. We can provide:

- Answers to questions/concerns regarding the program
- Requests for additional Safe Zone Training Sessions
- Additional copies of this manual
- Additional stickers to those who have completed the training



Rainbow Flag at SDSU