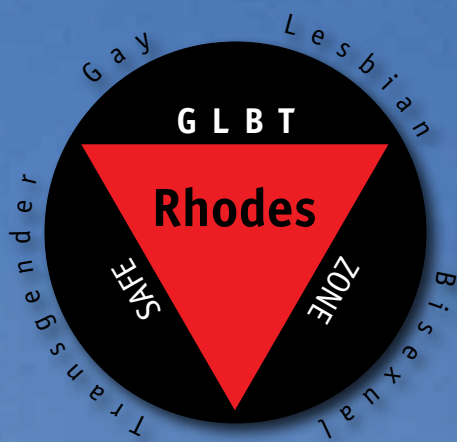


**ACCEPTANCE.
TRUST.
RESPECT.
UNDERSTANDING.
SUPPORT.**



Safe Zones at Rhodes



Rhodes College Safe Zone Training Manual

TABLE of CONTENTS

The information contained in this manual is based on Safe Zone & Ally programs at other colleges and universities throughout the country. Special thanks are due to Worcester Polytechnic Institute where this manual was originally developed and to Western Carolina University whose manual provided an outline for additions.

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AN INTRODUCTION



ACKNOWLEDGEMENTS

The Rhodes College Safe Zone program developed as the result of help from numerous people who offered their time, support, and care and as a result of the many emails and phone calls received from other institutions with Safe Zone and Allies programming.

A Special Thank You to the following:

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Arizona State University Safe Zone Program & Jessica Pettit

Office of Multicultural Affairs

The Student Counseling & Development Center

Laura Vargo

and many, many others!!!!

HOW to USE this MANUAL

The Safe Zone Manual is a resource for all Safe Zone members. You are encouraged to take time to read through the contents of the manual to become familiar with the information it contains. The manual can be a source of information to you so that you may more accurately respond to the needs of students who seek your support. It is important that you feel comfortable using the manual with any students you may help. Additionally, feel free to photocopy sections of the manual that may be particularly helpful for students you might encounter.

While this manual is fairly comprehensive, you are encouraged to seek other information and resources. If you find resources that might be helpful for future manual productions, please forward any information to the Counseling Center. Remember if you have any questions regarding the Safe Zone program you can contact the Counseling Center as well.

(Adapted from Western Carolina University Safe Zone Manual)

CONTACT INFORMATION

Student Counseling & Development Center
Moore Moore Student Health Center
Phone: (901) 843-3128
Monday-Friday 8:30am-5:00pm

PURPOSE of the SAFE ZONE PROGRAM at RHODES

Sponsored by the Student Counseling & Development Center and Rhodes Gay Straight Alliance at Rhodes (formerly F.O.S.T.E.R.), the Safe Zone program at Rhodes exists to support gay, lesbian, bisexual, transgender, intersexed, and questioning students, to improve the overall campus environment for these students, and to educate students, faculty and staff on issues related to GLBTIQ students. As part of Rhodes College's commitment to diversity, Safe Zones supports all GLBTIQ students.

All students deserve to learn in an environment that's supportive and friendly, regardless of their sexual orientation or gender identity/expression. Anti-GLBTI bias affects the school performance, school experience, and mental and emotional health of the students who experience it. Protection of actual or perceived GLBTI students is the exception, not the rule, in most schools across the country. Often, change has to start with the grassroots effort of a group that is willing to start positive changes through support, education, and publicity.

Another reason to take part—a reason just as valid as the reality of bias and its effects—is the fact that homophobia and transphobia hurt us all. They discourage diversity, encourage hurtful behaviors, and put limits on our relationships and roles in the school community. Being a part of the Safe Zone program will give you an opportunity to learn about yourself and others and will help you make Rhodes a better place for everybody – GLBTI or straight.

Safe Zones will serve as a source of support and information, free of judgment and hostility. They will display the Safe Zone logo to indicate that they have completed Safe Zone training and have signed a contract expressing their commitment to Safe Zone policies and procedures. Outside of their direct support for GLBTIQ students, Safe Zones will be expected to challenge assumptions and prejudices related to sexual orientation and gender and to address heterosexist comments or behaviors in an educational and informative manner.

*(Adapted from Western Carolina University Safe Zone Manual)
(Adapted from GLSEN Safe Space Manual)*

GOALS

The goals of the Rhodes College Safe Zone Program are:

- To increase the campus community's understanding and awareness of gay, lesbian, bisexual, intersexed, and transgender issues
- To provide a greater sense of safety for the gay, lesbian, bisexual, intersexed, and transgender student community
- To offer information to straight allies of gay, lesbian, bisexual, transgender, and intersexed people
- To act as a resource for information related to combating homophobia, heterosexism, transphobia, and other GLBTIQ misinformation and misconceptions.

(Adapted from Bridgewater State College Safe Zone Program)

WHO SHOULD YOU BE in order TO BE a SAFE ZONE at RHODES?

1. You believe that our campus is enriched and enlivened by the diversity of gay, lesbian, bisexual, transgender, and intersexed people.
2. You are aware of the presence of gay, lesbian, bisexual, transgender, and intersexed students and colleagues and are willing to engage them in genuine dialogue and interaction.
3. You are willing to discuss issues that have an impact on gay, lesbian, bisexual, transgender, and intersexed people in a nonjudgmental manner.
4. You are willing to help students access support and information on campus and in the community.
5. You understand the sensitive nature of GLBTIQ issues & respect the privacy of GLBTIQ students.
6. You use inclusive language, avoid stereotyping, and do not assume heterosexuality.

(Adapted from: Cal Poly Safe Zone Program)

“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 GLBTIQ 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 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 gay, lesbian, bisexual, and transgender people.

Signed, _____

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

STATEMENT on INCLUSION

1. We don't assume what your sexual orientation or gender identity is during this session and will never specifically ask you. Some of you may be GLBTIQ and others will be heterosexual.
2. If you are GLBTIQ you can get something out of this orientation by thinking about your own sexual identity development but most importantly you will begin to learn about the sexual identity development of your heterosexual peers and how to communicate with them. This SAFE orientation is a place for you too!

(Adapted from Duke University Safe Zone Training Manual)

REFERRING an INDIVIDUAL to the COUNSELING CENTER

Most of the individuals who will be talking with you will be seeking support, advice, or information. You may also be contacted about the Safe Zone program in general or approached away from where you have posted your sticker. In these cases, it is important to be sensitive to privacy issues. Occasionally, you may have an individual approaching you who is in a great deal of distress. It is imperative that you attend to the individual's behaviors, concerns, and language used. By actively listening to the student, you can assess whether or not you need to refer the individual to a mental health professional. Of course, you may consult with the Counseling Center or another Safe Zone member at any time for additional resources or assistance. The following information may help you in making a decision for a referral to a counselor and help in facilitating that referral.

Recognizing a Distressed Student

At one time or another, everyone feels depressed or upset. However, for GLBTIQ individuals, the pressures and challenges of dealing with or responding to the oppression of our culture creates added stress to the typically healthy non-heterosexual or questioning individual. When family, friends, significant other, acquaintances, or strangers engage in heterosexist behavior, the cumulative effect upon the individual can become quite debilitating. Particularly when someone experiences a significant loss or lacks support, he/she can be quite vulnerable. The following may help to identify some symptoms that, when present over a period of time, suggest that the problems are greater than “normal.”

Recent Loss or Limited Support System

- loss of previously supportive relationships due to identifying as GLBTIQ
- perceived loss of spirituality or religious confusion around GLBTIQ
- complete lack, or feeling a complete lack, of a support system
- loss of safety due to verbal, emotional, and physical victimization of GLBTIQ

Marked Changes in Performance or Behavior

- poor performance and preparation in work or school
- excessive absences or tardiness for classes or other commitments
- unusual or changed pattern of interaction
- avoiding participation or withdrawal from others
- excessively anxious
- disruptive behavior
- problems with house/roommates, peers, and/or family
- exaggerated emotional response that is obviously inappropriate to situation

Unusual Behavior or Appearance

- depressed or lethargic
- atypical outburst of anger, crying, or other erratic mood-related behaviors
- hyperactivity or very rapid speech
- swollen or red eyes
- change in personal hygiene or dress
- dramatic weight gain or weight loss

Psychosomatic Complaints

- tension headaches
- panic attacks
- significant changes in eating patterns
- sleep disturbances – sleeping too much or too little
- fatigue
- stomach aches or other pain symptoms

Reference to Suicide, Homicide, or Death

- **expressed feelings of hopelessness or helplessness**
- **overt references to suicide**
- **isolation from friends, peers, family**
- **homicidal threats, either verbal or written**
- **excessive talk about death and dying**

Effective Ways to Facilitate a Referral

- ✓ When you have determined that a person might benefit from a professional counseling, it is usually best to speak directly to that person in a straightforward, sympathetic fashion that will show your concern for his/her welfare.
- ✓ It is not advisable to attempt to deceive or trick someone into seeking counseling.
- ✓ Make it clear that this recommendation represents your best judgment based on your observations of the individual's behavior or the complexity of his/her situation.
- ✓ Be specific regarding behaviors that have raised your concerns and avoid making generalizations about the individual.
- ✓ Inform the person the services are strictly **confidential** and **free of any charges**.
- ✓ Do NOT force the issue if the person takes a defensive posture – simply restate your concerns and recommendations and that you are there to help.
- ✓ Remind the person that help is available, that they are not alone, and that utilizing the Counseling Center is a sign of strength, self-knowledge, and courage and not a sign of weakness. You may want to point out that seeking professional advice (medical, legal, car problems, or other advice) is considered good judgment and an appropriate use of resources.

If the person agrees to the referral, offer to call the Counseling Center immediately to arrange an appointment with a counselor. If you are willing to accompany the individual, feel free to offer and provide this support.

If the person is skeptical or reluctant, and they have not expressed suicidal ideation, simply express your respect for their ability to decide for themselves what is best for them at this time. Help the person consider the pros and cons of counseling as well as alternatives to therapy, and encourage them to take some time to think about what might be most helpful now or in the future.

If the person emphatically says “no.” If the student has expressed suicidal ideation, or if you are in any way concerned about possible suicidality, discuss your concerns with the student. Explain that because of your concerns, you must arrange a confidential referral to the Student Counseling Center. Reassure the student that information shared with the Student Counseling Center remains confidential. Call the Student Counseling Center while with the student and arrange a referral. If you become concerned about a student’s safety outside regular business hours, contact campus safety. They will provide contact information for the on-call counselor from the Counseling Center.

If the student has not expressed suicidal ideation and you are not concerned about their physical safety, respect their decision and leave the situation open for possible reconsideration at a later time.

If a student informs you of sexual harassment or sexual assault, you are required as a representative of the College to report such harassment or assault to the College, so that the College may insure that we are providing a safe environment for all students. Explain this to the student, and contact the Dean of Students.

Contact Information:

Student Counseling & Development Center
located in Moore Moore Student Health Center
Phone: (901) 843-3128
Hours: Monday-Friday 8:30am-5:00pm

DEFINING α COMMON LANGUAGE

Every thorough discussion about the GLBTIQ community starts with some very basic but often confusing terms. You may be surprised by some of the terms in this section. Please do not be afraid to ask for clarification. The definitions of many of these terms continue to change as the climates for GLBTIQ communities change.

Affectional Orientation

A recent term used to refer to variations in object of emotional or sexual attraction. 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, including heterosexual as well as GLBTI.

Ally

Any person whose attitude and behavior are anti-heterosexist and who is proactive and works toward combating homophobia and heterosexism, both on a personal and institutional level.

Androgyny

Displaying characteristics of both or neither male or female.

Asexual

A person who does not experience sexual attraction but may be emotionally attracted to any gender or biological sex.

Biological Sex

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

Biphobia

Fear or hatred of those assumed to be bisexual.

Bisexual/Bi

A person who is emotionally and/or physically attracted to persons of both sexes. (Sometimes referred to as “Bi.”)

Butch

A gay woman, who prefers stereotypically masculine (butch) dress, style, expression, or identity. Use caution with this term as it can still be taken offensively, because mainly it is still used offensively.

Camp

In GLBTI 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.

Closeted/In the Closet

The confining state of being secretive about one’s true sexual identity or sexual orientation which may be done to keep a job, housing situation, friends, or in some other way to survive. Many GLBTI individuals may be “out” in some situations and “closeted” in others.

Come Out (of the Closet)

To acknowledge one’s true sexual identity or sexual orientation, either to oneself or to others. Most often used in terms of “publicly coming out.”

Drag

Wearing the clothing of another gender, often exaggerating stereotypical characteristics of that gender. Drag queen refers to men dressing as women. Drag king refers to women dressing as men. To be a drag queen or king is not the same as being a transsexual though some may be in the process of reassignment. Dressing in drag is often meant to be a pun on gender stereotypes and to be comical.

Dyke

Once known as a derogatory term for lesbian, the word dyke was reclaimed by lesbians in the 1970’s as slang, and many lesbians now refer to themselves as dykes. However, the term can still be offensive, especially when used by heterosexuals as its intent is to be offensive.

FTM

Female to Male. A terms used in the GLBTI community that refers to male-identified people who were categorized as female at birth.

A gay woman who prefers stereotypically feminine dress, style, expression, and identity.

Flaming

This term refers to stereotypically effeminate gay men whose mannerisms, speech, and other forms of expression are generally considered stereotypically feminine.

Gay

Preferred term for men who are primarily emotionally and/or physically attracted to men. Gay is also used as a blanket term for homosexuals and bisexuals, male and female.

Gender

Characteristics of masculinity and femininity that are learned or chosen. A person's assigned sex does not always match their gender (see Transgender), and most people display traits of more than one gender. Gender is different from sexuality.

Gender Recognition

Recognizes only two genders and regulate behavior. The idea is that all males should be male-identified and masculine, and all females should be female-identified and feminine.

Gender Bending

Blurring the binary gender roles.

GLBTIQ

Is an acronym for gay, lesbian, bisexual, transgender, intersexed, and queer/questioning. The acronym can be used interchangeably: GLBT, GLBTQ, LGBT, etc.

Heterosexism

A bias toward heterosexuality or the exclusion of homosexuality. Also, the presumption that heterosexuality is superior to homosexuality.

Homophobia

Fear or hatred of those assumed to be GLBTI and anything connected to their culture. It is when a person fears homosexuality, either in other people or within themselves; homophobia can range from mild discomfort to hateful speech and violence.

Homosexual

A person who is mostly physically and/or emotionally attracted to the same gender.

Internalized Homophobia

The fear and self-hate of one's own homosexuality or bisexuality that occurs for many 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.

Intersexed

A person who is 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 individuals may vary. The older term "hermaphrodite" is considered by many to be offensive. Although intersexuality is fairly common, intersexed people and infants are often considered "deformed" or "monsters" and are subjected to surgery while still infants.

Invisibility

The constant assumption of heterosexuality renders gay and lesbian people, youth in particular, invisible and seemingly nonexistent. GLBTI people and youth are usually not seen or portrayed in society, and especially not in schools and classrooms.

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 has been criticized for being too linear and only accounting for behavior and not sexual identity.

Lesbian

Preferred term for women who are primarily emotionally and/or physically attracted to women.

MTF

Male to Female. A term used in the GLBTI community that refers to female-identified people who were categorized a male at birth.

Openly Gay

Used in instances where the sexual orientation of the individual is relevant to the story and the individual has previously Outed her/himself. As in: "The openly gay legislator voted against the measure denying civil rights to gay people."

Outing

Publicly revealing the sexual orientation of an individual who has chosen to keep that orientation a secret. Some activists, political groups, and media believe outing is justified and/or newsworthy when a person involved works against interests of lesbians and gays. Others oppose it entirely as an invasion of privacy.

Pansexual

An individual who is attracted to all types of people regardless of their sexual orientation and gender identity.

Passing

With regards to sex, gender, and sexuality, passing means being read as a sex, gender, or sexuality other than the one you were assigned or with which you identify.

Pride

A healthy safe 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

A public procession or parade to proclaim the pride, solidarity, and unity of gay people.

Queen/Poof

A gay man who is seen as stereotypically effeminate and may prefer stereotypically feminine styles and expressions. However, those who identify as straight should use caution when using this term.

Queer

Originally a derogatory label used to refer to lesbian and gay people or to intimidate and offend heterosexuals. More recently this term has been reclaimed by some lesbians, gay men, bisexuals, and transgender people as an inclusive and positive way to identify all people targeted by heterosexism and homophobia.

Questioning

Refers to individuals who are unsure about their sexual orientation and as a result “question their identity.”

Sex

The biological traits used to categorize someone as either male or female. The meaning we impose upon sex is called gender.

Sexuality

Who you like and what you do. Sexuality is distinct from gender identity and sex. It refers to the labels we assign to sexual desires and practices: homosexual, heterosexual, bisexual, asexual, etc.

Sexual Identity

How you identify your sexual desires and feelings; not necessarily your practices. Sexual identification, depending on a person’s sexual relationships or affinity. Innate sexual attraction. In all instances, use this term instead of sexual preference or other misleading terminology.

Sexual Orientation

A person’s emotional, physical, and sexual attraction and the expression of that attraction. Although a subject of debate, sexual orientation is probably one of the many characteristics with which people are born.

Sexual Preference

Avoid this term as it is a misleading term that implies an element of choice or preference in attraction to a certain sex.

Straight

A heterosexual person.

Transgender

An “umbrella term” for someone whose self-identification, anatomy, appearance, manner, or behavior challenges traditional societal definitions of male and female. Transgender people include transsexuals and others who do not conform to traditional gender boundaries or consider their gender blended to any degree.

Transphobia

Hatred and/or discrimination against people who break or blur gender roles and sex characteristics. Like biphobia, it is present in both straight and gay/lesbian communities.

Transsexual

A person whose gender identity is different from the sex they were assigned at birth. Some individuals may take hormones to aid in transitioning from one sex to another, and some individuals will undergo sex-reassignment surgery.

(Adapted from Western Carolina University Safe Zone Manual; Clemson Safe Zone Program; and other various internet sites)

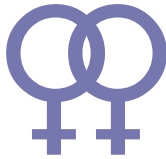
SYMBOLS of PRIDE

Listed below are some symbols that have been adopted by GLBTI communities and their allies along with the significance of each.

Stonewall & Pride Celebrations

During the last weekend of June of 1969, police and Alcoholic Beverage Control Board agents entered a gay bar-The Stonewall Inn, on Christopher Street, in New York City. Allegedly there to look for violations of the alcohol control laws, they made the usual homophobic comments and then, after checking identification, threw the patrons out of the bar, one by one. Instead of quietly slipping away into the night, as they had done for years, hustlers, drag queens, students and other patrons held their ground and fought back. Someone uprooted a parking meter and used it to barricade the door. The agents and police were trapped inside, and they wrecked the place and called in reinforcements. Their vehicles raced to the scene with lights glaring and sirens blaring. The crowd grew. Someone set a fire. More people came. For three days, people protested. And for the first time, after innumerable years of oppression, the chant, Gay Power, rang out. This rebellion, started by drag queens and bar patrons, marked the beginning of the modern gay and lesbian movement. Each June, Pride marches, rallies, and celebrations are held throughout the nation commemorating Stonewall.

(Adapted from www.stonewall-place.com)



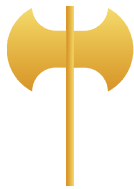
Double Woman's Symbol

Also known as "the mirror of Venus." This symbol represents the planet Venus, metal, copper, and femininity. The double woman's symbol represents woman loving woman.



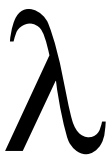
Double Man's Symbol

Derived from the astrological symbol of Mars. Mars was the Greek god of war and patron of warriors. The arrow is a phallic symbol. A double-man's symbol represents man loving man.



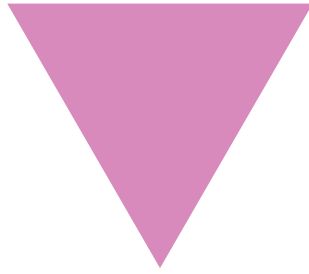
The Labrys

The double-bladed ritual ax comes from a myth as the scepter of the goddess Demeter (Artemis). It may have originally been used in battle by female Scythian warriors. Use of the labrys has been documented on medieval charms used to attract women. Today, it is often used as a sign of identity and solidarity among lesbians.



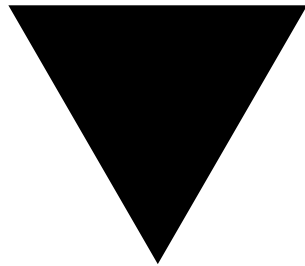
The Lambda

Chosen by the Gay Activist Alliance in 1970 as the symbol of the gay movement, the lambda is the Greek letter "L." A battle flag with the lambda was carried by a regiment of ancient Greek warriors who were accompanied in battle by their young male lovers and noted for their fierceness and willingness to fight to the death.



The Pink Triangle

During World War II, the Nazi regime created a set of colored triangles so that prisoners or concentration camps and other labor camps could be easily identified for the reasons of their interment. In 1935, a German law included the prohibition homosexual relations to include kissing, embracing, and gay fantasies in addition to sexual acts. Convicted offenders, of which there were an estimated 25,000 between 1937 and 1939, were sent to prison and then later to concentration camps. Their sentence was to be sterilized, which was most often accomplished by castration. In 1942, the punishment was extended to death. Estimates of the gay men killed during the Nazi regime range from 50,000 to twice that figure. When the war was finally over, countless gay men remained imprisoned in the camps, because the law regarding homosexuals remained in the books until its 1969 repeal in West Germany.



Black Triangle

Like the pink triangle, the black triangle is also rooted in Nazi Germany. Although lesbians were not included in the Paragraph 175 prohibition of homosexuality, there is evidence to indicate that the black triangle was used to designate prisoners with anti-social behavior. Considering that the Nazi idea of womanhood focused on children, kitchen, and church, black triangle prisoners may have included lesbians, prostitutes, women who refused to bear children, and women with other “anti-social” traits. As the pink triangle is historically a male symbol, lesbians and feminists have similarly reclaimed the black triangle as a symbol of pride and solidarity.



The Rainbow Flag

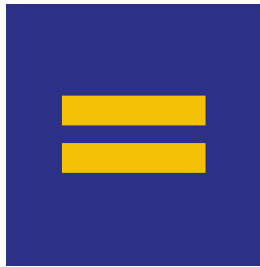
The Rainbow Flag has been adopted by the gay and lesbian community as its own design. It depicts not the shape of a rainbow but its colors in horizontal stripes. Created in 1978 for San Francisco’s Gay Freedom Celebration by local artist Gilbert Baker, it was inspired by the “Flag of the Races,” which had five stripes – one for each of the color’s of humankind’s skin – that was flown at the 1960 college campus demonstrations. The different colors of the flag symbolize different components of the community: red for life, orange for healing, yellow for sun, green for nature, blue for art, and purple for spirit. A black stripe added at the bottom symbolizes a hope for victory over AIDS.

Major gay and lesbian parades in New York City, Houston, Vancouver, and Toronto began to fly the six-stripe Rainbow Flag. It is prominently displayed at GLBT community events or may be seen draped over the coffins of a GLBT community member who has died from AIDS. Some hospitals display the flag as a symbol of hope for those suffering from HIV and AIDS.



Freedom Rings

Designed by David Spada with the Rainbow Flag in mind, these six colored aluminum rings have come to symbolize independence and tolerance of others. They were quickly adopted by the gay community. The rings are frequently displayed or worn as jewelry and can be found as necklaces, bracelets, rings, and key chains.



Actions of the HRC

The Human Rights Campaign is a visible entity in U.S. politics. It lobbies Congress for support of LGBT-positive bills, works to build an LGBT-friendly Congress by funding those politicians that support the LGBT community, mobilizes grassroots action amongst its members, and encourages members to employ their right to vote in every election. Through its website, the HRC also assists members in identifying state and local lawmakers, researching state and local laws regarding issues central to the LGBT cause, reviewing scorecards of how lawmakers rate on LGBT issues, and drafting and sending letters to lawmakers.

(Adapted by Vernon Wall, 1992 and from Arizona State University Safe Zone Program)

WHO WE ARE: CONTEMPORARY GLBTI FIGURES

Martina Navratilova (tennis player)

John Waters (director)

k.d. lang (musician)

Dick Sargent (actor)

Becky Bertha (writer)

Glen Maxey (Texas state representative)

Morrissey (singer)

Portia de Rossi (actress)

Samuel Delaney (writer)

George Michael (musician)

Holly Near (singer)

Del Martin (writer)

Angelina Jolie (actress)

Freddie Mercury (musician)

Amelie Mauresmo (tennis player)

Robert Rauschenberg (artist)

Kate Moennig (actress)

Michael Stipe (musician)

Heather Mattarazzo (actress)

Rosie Jones (golfer)

Bob Paris (body builder)

Sara Gilbert (actress)

Christopher Rice (writer)

Melissa Etheridge (musician)

Joe Norton (writer)

Ellen DeGeneres (comedian)

Elton John (musician)

Joan Guetschow (Olympian)

Jerry Studds (US Congressperson)

Rosie O'Donnell (comedian)

Harvey Fierstein (actor/playwright)

Cindy Olavarri (Olympian)

David Sedaris (writer)

Fanny Flagg (writer/actor)

Boy George (musician)

Sandra Bernhard (comedian)

Perry Farrell (musician)

Linda Morales (activist)

RuPaul (drag queen)

Ian McKellan (actor)

Barney Frank (US Congressperson)

Ani diFranco (musician)

Divine (drag queen)

Annie Leibowitz (artist)

HISTORICAL GLBTI FIGURES

Sappho (Greek philosopher)
Alexander the Great (Macedonian ruler)
Plato (Greek philosopher)
Julius Caesar (Roman emperor)
Richard the Lion-hearted (English king)
Caligula (Roman emperor)
Catherine the Great (Russian empress)
Leonardo da Vinci (Italian artist, inventor)
Desiderius Erasmus (Dutch monk, philosopher)
Michelangelo (Italian artist)
Joan of Arc (French heroine)
Montezuma II (Aztec ruler)
Francis Bacon (English statesman, author)
Christopher Marlowe (English author)
Queen Christina (Swedish queen)
Peter the Great (Russian czar)
Frederick the Great (King of Prussia)
Lord Byron (English poet)
Hans Christian Anderson (Danish author)
Margaret Fuller (US writer, educator)
Herman Melville (US author)
Collette (French novelist)
Walt Whitman (US author, poet)
Willa Cather (US author)
Oscar Wilde (Irish author)
Gertrude Stein (US author, poet)
Horatio Alger, Jr. (US author, founder of orphanages)
Amy Lowell (US poet)
Peter Ilyich Tchaikovsky (Russian composer)
Virginia Woolf (English author)
John Maynard Keynes (English economist)
Bessie Smith (American singer)
Tennessee Williams (US playwright)
Greta Garbo (actress)
T.E. Lawrence (English soldier, author)
Margaret Mead (anthropologist, writer, educator)
Julius III (Catholic pope)
Langston Hughes (writer, poet)
Emily Dickinson (writer)
James Baldwin (US author)
Susan B. Anthony (women's rights activist)
Baynard Rustin (US civil rights leader)
Noel Coward (English author, composer)
Rosa Bonheur (French artist)
Michael Foucault (French philosopher)

(Source: Gay & Lesbian Alliance Against Defamation, Los Angeles)

THE KINSEY SCALE

There have been a number of reputed studies on homosexuality in recent decades. The most widely discussed material came from the work of Dr. Alfred Kinsey and his associates in the late 1940's and early 1950's. The pioneering work of Dr. Kinsey and his associates is still referred to in most of the current literature regarding sexual orientation. There are other studies that provide helpful statistics for gay workshops, though the number and variety of these projects are disappointing. Kinsey's results continue to be supported by current research.

The most revealing point from these studies is that there is a broad spectrum of sexual orientation, not just two orientations: heterosexual and homosexual. Instead of picturing sexual orientation as an either/or issue, Kinsey developed a seven-point continuum based on the degree of sexual responsiveness people have for members of the same and other sex:

- 0 – exclusively heterosexual
- 1 – predominantly heterosexual, incidentally homosexual
- 2 – predominantly heterosexual, but more than incidentally homosexual
- 3 – equally heterosexual and homosexual
- 4 – predominantly homosexual, but more than incidentally heterosexual
- 5 – predominantly homosexual, incidentally heterosexual
- 6 – exclusively homosexual

Kinsey suggested that it is necessary to consider a variety of activities in assessing an individual's ranking on the continuum:

- Fantasies
- Dreams
- Thoughts
- Frequency of Sexual Activity
- Emotional Feelings

Therefore, many "heterosexuals," in fact, would fall somewhere between numbers 0-3, because they occasionally think/dream/fantasize about sexual activities with members of the same sex and/or occasionally act on these feelings. Some more key findings from the Kinsey research include:

- 6% of the adult males ranked a "6"
- 10% ranked 4-6
- 18% ranked 3-6
- Ranks for women were about ½ that of men. However, note that the research occurred during the 1940's and 1950's.

The interesting results for women concerned the relationship of incidence of gay relationships with post-high school education:

- 17% of college educated women had at least one gay experience during puberty
- 24% of women with graduate degrees had at least one gay experience during puberty

The following statistics about men:

- 37% of all men had experienced an orgasm in a sexual activity with another male sometime in their life
- 60% of all men had some type of homosexual relationship before they were 16 years old
- 30% of all men had some type of homosexual relationship between ages of 20-24

(Handout developed by Jamie Washington, 1990)

A REVIEW: SEX, GENDER, & SEXUALITY

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). Again, an individual may fall anywhere along these spectra.


Sexuality

Sexuality (sexual/affectional orientation; who you are attracted to) also varies greatly from individual to individual. If you think of males being on one end of the spectrum and females on the other, it may be males/females to whom a person is attracted. Could it also be that a person is attracted to masculinity or femininity? For someone in the middle of the spectrum, would gender variants change the attraction?

SEX/GENDER/SEXUALITY CONTINUUMS

Is there a difference?


Sex at Birth
(Biological/Medical Assignment)



Male

Female


Sex after Changes
(Biological/Medical Assignment)



Male

Female

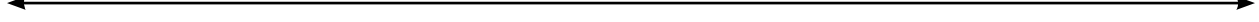
Gender Identity – views of self in relation to how society defines a man or woman
(Internal)



Man

Woman


Gender Expression – the way one allows others to see him/her
(External presentation)



Masculine

Feminine

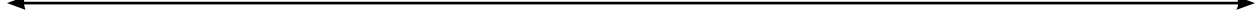
Gender Attribution – what someone assumes about your gender when they look at you
(External presentation)



Masculine

Feminine


Sexual Orientation
(Affection/Attraction)



Males

Females

Sexual Expression
(Behaviors)



Male

Female

Yes, sex and gender are different! Yet they are interrelated aspects of our identity.

It is commonly thought that sex is binary (male or female) and individuals can only be identified as men or women. Yet sex, gender, and sexual orientation are much more fluid and complex. Sex is the biological/medical assignment of “male” or “female” based upon the genitalia an individual possesses at birth. It is often believed that a person’s sex should dictate their gender identity and expression (those born with “male” genitalia should identify as men and behave in a masculine way/ those born with “female” genitalia should identify as women and behave in a feminine way). Yet gender is socially constructed and can change over time and varies in different cultures. Gender includes roles expected of or engaged in by individuals, perceptions or attributions about another person’s gender, and how each individual identifies their gender. Each of us expresses our gender via our clothing, mannerisms, and other behaviors. Gender is who we are.

Sexual orientation is connected to gender but not tied to our sex or gender. Regardless of one’s sex or gender identity, one can be heterosexual, bisexual, homosexual, or anywhere on the continuum. A person may engage in sexual behaviors with partners whose sex or gender does not appear to adhere to the person’s identified sexual orientation. Sexual orientation is to whom we are emotionally and/or physically attracted.

(Influenced by: Kaschak, E. (1992). Engendered Lives: A New Psychology of Women’s Experience. New York, NY: BasicBooks)

SEXUAL IDENTITY DEVELOPMENT: THE CASS MODEL

1. **Identity Confusion:** Could I be gay? Person is beginning to wonder if “homosexuality” is personally relevant. Denial, confusion, and disownment are often experienced.

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

Possible Responses: Avoids information about lesbians/gays/bisexuals; inhibits behavior; denies homosexuality (“experimenting,” “an accident,” just drunk”) Males: keep emotional involvement separate from sexual contact; Females: keep relationships non-sexual, though strongly emotional

Possible Needs: Explore internal positive and negative judgments. Be permitted to be uncertain regarding sexual identity. Find support in knowing that sexual behavior occurs along a spectrum. Receive permission and encouragement to explore sexual identity as a normal experience (such as career identity, social identity).

2. **Identity Comparison:** “Maybe this does apply to me.” Accepts possibly that she or he may be gay. Self-alienation becomes isolation.

Task: Deal with social alienation.

Possible Responses: Begin to grieve for losses, the things she or he will give up by embracing a “alternative” lifestyle. Compartmentalizes own sexuality. Accepts lesbian/gay definition of behavior but maintains “heterosexual” identity of the self. Tells oneself: “It’s only temporary,” “I’m just in love with this particular woman/man,” etc.

Possible Needs: Very important that the person develops own definitions. Need information about sexual identity, lesbian/gay community resources. Need encouragement to talk about loss of heterosexual life-expectations. Be permitted to keep some “heterosexual” identity (**It is not an all-or-none issue**).

3. **Identity Tolerance:** “I’m not the only one.” Accepts the probability of being gay and recognizes sexual/social/emotional needs that go with being lesbian/gay/bisexual. Increased commitment to being gay/lesbian/bisexual.

Task: Decrease social alienation by seeking out lesbians/gays/bisexuals.

Possible Responses: Beginning to have language to talk and to think about the issue. Recognition

that being gay/lesbian/bisexual does not preclude other options. Accentuates differences between the self and heterosexuals. Seeks out lesbian/gay/bisexual culture (positive contact leads to more positive sense of self; negative contact leads to devaluation of culture and stops growth). May try out variety of stereotypic 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/bisexual community connections. It is particularly important for the counselor or ally to know of community resources.

- 4. Identity Acceptance:** “I will be OK.” Accepts rather than tolerates gay/lesbian/bisexual self-image. There is continuing and increased contact with the lesbian/gay/bisexual culture.

Task: Deal with the inner tension of no longer subscribing to society’s norms. Attempt to bring congruence between private and public view of self.

Possible Responses: Accepts lesbian/gay/bisexual self-identification. May compartmentalize “gay life.” Maintains less and less contact with heterosexual community. Begins some selective disclosures of sexual identity. Attempts to “fit in” and “not make waves” within the gay/lesbian/bisexual community. More social coming out. More comfortable being seen with groups of men or women identified as “gay.” More realistic evaluations of situation.

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

- 5. Identity Pride:** “I’ve got to let people know who I am!” Immerses self in gay/lesbian/bisexual 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/she is less willing to “blend in.” Identifies gay culture as sole source of support. May have all gay friends, business connections, social connections (alienates self from heterosexual environment).

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

- 6. Identity Synthesis:** Develops holistic view of self. Defines self in more complete fashion not just in terms of sexual orientation.

Task: Integrate gay/lesbian/bisexual identity so that instead of being the identity, it is one aspect of the self.

Possible Responses: Continues to be angry at heterosexism but with decreased intensity. Allows trust of others to increase and build. Gay/lesbian/bisexual identity is integrated with all aspects of “self.” Feels all right to move out into the community (both GLB and heterosexual) and not simply define space according to sexual orientation. Re-embracing heterosexuals.

*(Adapted from Cass, V. Homosexual Identity Development, 1979.
adapted by Susan Young, SIUC, 1995)*

OBSTACLES to OVERCOME in DEVELOPING α POSITIVE GLBTI IDENTITY

1. Silence – few openly “out” role models; little sense of GLBTI history or culture; invisibility of GLBTI contributions to history.
2. Lies – distorted images and stereotypes/myths by news media, church, tv/films; lack of accurate/responsible research; etc.
3. Isolation – without the freedom to gather or be open, gays/lesbians/bisexuals cannot easily share ideas and strategize ways to combat heterosexism and homophobic oppression
4. Intimidation – as gay people become more open, society becomes more overt; ridicule, dehumanizing jokes; legal threats, blackmail, prison; custody battles; job loss, eviction; etc.
5. Physical Violence – assaults, rape, murder; psychological and psychiatric violence (aversion therapy & electroconvulsive therapy); etc.
6. Denial of Basic Civil Rights – employment, housing, child custody, marriage, freedom of association/assembly, freedom of speech, etc.

(Adapted from Ruth Baetz, “The Coming-Out Process: Violence Against Lesbians”)

HOMOSEXUALITY & BISEXUALITY



WHAT IS HOMOPHOBIA?

Homophobia takes many different forms. Sometimes it takes the form of physical acts of hate, violence, verbal assault 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 insignificant. It is important for allies of the GLBT community to recognize homophobic assumptions and behaviors so that we may take steps toward changing those attitudes and behaviors.

- Looking at a lesbian or gay man and automatically thinking of her/his sexuality rather than seeing her/him as a complex person.
- Changing your seat in a meeting because a lesbian sat in the chair next to yours.
- Assuming you can spot a gay or lesbian person.
- Using the term “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 significant other or a man’s male significant other although you regularly ask “How is your husband/wife?” when you run into a heterosexual friend.
- Feeling that gays and lesbians are too outspoken about lesbian and gay civil rights.
- Feeling that 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 that 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 your 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 don’t know the answers.

HOMOPHOBIA in CLINICAL TERMS

Homophobia is an intense, irrational fear of same sex relationships. In common usage, homophobia is the fear of intimate relationships with a person of the same sex. Below are 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

- **Repulsion:** Homosexuality is seen as a “crime against nature.” Gay people are sick, crazy, immoral, sinful, wicked, etc., and anything is justified to change them (e.g. prison, hospitalization, aversion therapy, or 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, gay people 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 that there is something to “accept,” characterized by such statements as “What you do in bed is your own business,” and “That’s fine as long as you don’t flaunt it.” Denies social and legal realities. Ignores the pain of invisibility and the stress of closet behavior. “Flaunt” often means say or do anything that makes people aware.

POSTIVE LEVELS of ATTITUDE

- **Support:** Work to safeguard the rights of gays and lesbians. Such people may be uncomfortable themselves, but they are aware of the hostile climate and the unfairness or prejudice against gays and lesbians.
- **Admiration:** Acknowledge that being gay and lesbian in our society takes strength. Such people are willing to truly look at themselves and to work on their own homophobic attitudes.
- **Appreciation:** Value diversity and see gays and lesbians 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. View gays and lesbians with affection and delight and be willing to be gay advocates and allies.

HOW HOMOPHOBIA HURTS US ALL

You do not have to be gay, lesbian, bisexual, transgender, or intersexed, or know someone who is, to be negatively affected by homophobia. Though homophobia actively oppresses GLBTI, 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.
- 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 GLBTI; children of GLBTI parents; parents of GLBTI children; and friends of GLBTI people.
- Compromises human integrity by pressuring people to treat others badly.
- Results in the invisibility or erasure of GLBTI lives and sexuality in school-based sex education discussions, keeping vital information from students. Such erasures can kill people in the age of AIDS.
- Pressures young people of all sexual identities 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 GLBTI 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.

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 & 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. We cannot fit our sexuality into nice neat clean categories that 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 bisexual 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 on how she/he defines her/himself rather than on a rigid standard. Bisexuals in this country share with lesbians and gays the debilitating experience of heterosexism (the assumption that everyone is heterosexual which renders other sexual identities invisible) and homophobia (hatred, fear, and discrimination against homosexuals.)

Myth: Bisexuals are equally attracted to both sexes. Bisexual means having concurrent significant others 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 sex. Bisexuality is about dreams and desires and capacities as much as it is about acts. Bisexuals are people who can have a significant other of either sex not people who must have partners of both sexes. Some bisexual people, like any other person, may have concurrent partners, 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, gay men, or heterosexuals, some have multiple partners, some have one partner, and some go through periods without any partners.

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

Reality: Obviously, there are bisexuals who pass as heterosexual to avoid trouble. There are also many lesbians and gays who do this. To "pass" as 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 a 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 upon her/his bisexuality. Bisexuals don't radiate raw sex any more than lesbians, gay men, 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 GLB community are unique and do not fit into distinct categories. The community sometimes needs to use these labels for political reasons and to increase their visibility. Their sexual esteem is facilitated by acknowledging and accepting the differences and seeing the beauty in diversity.

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

TRANSGENDER



SOME BASICS

As briefly mentioned in the terminology section of this manual, “transgender” is a very 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 necessarily 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 a male or female at all. We must recognize that no two people experience gender the same way, which is a good thing. Transgender youth may identify as shape shifters, non-male/non-female, intersex, butch queens, boy dykes, femme queens, boy-girls, transvestites, cross dressers, gender queers, bi-genders, transsexuals, FTMs (female to males), MTFs (male to females), new women, new men, transgressively gendered. . and so on.

When it comes to their gender, sex, and sexuality, most individuals 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. The terms “bisexual”, “lesbian”, “gay”, and “heterosexual” sometimes separate the gay community unnecessarily.

(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.)

UNDERSTANDING TRANSPHOBIA

Transphobia is defined as a 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 can blend into local communities. 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.

Transphobia can be found in a range of forms including demeaning jokes, violence, or refusal to acknowledge that transgender people exist. Most importantly, transphobia hurts not only transpeople, but it hurts us all. It sends a message to the population at large that anyone who exhibits 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 best way to combat transphobia is to speak out against violence and hateful speech about or directed towards transpeople. When someone speaks of transpeople as “disgusting”, “exotic,” “funny,” “sick,” or other stereotypes that dehumanize transpeople, let them know that those remarks are both offensive and wrong. Then, you should provide them with reliable information about transgender persons.

TRANSPHOBIC MYTHS

Another way to support 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 and simply express or think of themselves in terms of the gender opposite of their assigned gender.

Myth: *Transpeople are miserable/ disturbed people.*

Reality: Many transgender people have a lot of stress and anxiety, in large part due to the 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 transgender people and their sexuality. The objectification and eroticization of transpeople hurts and detracts from their basic humanity, as it does for any group of people.

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 the gender to which they identify. While it is true their experience at times differs from someone who might have been assigned their gender at birth, this does not change their gender identification..

THINGS NON-TRANSGENDER INDIVIDUALS TAKE for GRANTED

- My validity as a man/woman/human is not based upon how much surgery I’ve 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 then assume they have a right to call me by that name.
- People do not disrespect me by deliberately using incorrect pronouns even after they’ve been 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 of 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 PERSONS

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-identified 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. Allies can help by advocating and implementing explicit protection for trans-workers and trans-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 by accident, you might use a wrong pronoun or say a wrong name when addressing someone who is 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 the following resources helpful, whether you need to find support, or are looking for a good book or movie. Professors and administrators might use some of the listed books and movies as part of their courses or diversity programming.

Online Resources:

TGTS Youth Info Page: <http://www.geocities.com/transboys/tgts-youth.html>
Transgender Mailing Lists Pages: <http://www.otherbear.com/mail.html> and http://dmoz.org/society/transgendered/internet/mailling_lists/
Youth Resource's Trans*topia: <http://www.youthresource.com/community/transgender/index.cfm>
Transsexual Women's Resources: <http://www.annelawrence.com/twr/>
FTM International: <http://www.ftm-intl.org/>

Books:

My Gender Workbook and Gender Outlaws, Kate Bornstein
Stone Butch Blues and Transgender Warriors, Leslie Feinberg
Dear Sir or Madam, Loren Cameron
The Last Time I Wore a Dress: A Memoir, Daphne Scholinski
Pomosexuals, Carol Queen
As Nature Made Him: The Boy Who Was Raised as a Girl, John Colapinto
Read My Lips: Sexual Subversion and the End of Gender, Riki Anne Wilkins
Sex Changes: The Politics of Transgenderism, Pat Califia
Changing Ones: 3rd and 4th Genders in Native North America, Will Roscoe
'O Au No Keia: Voices from Hawaii's Mahu and Transgender Communities, Matzner
Female Masculinity, Judith Halberstam
Transmen and FTMs: Identities, Bodies, Genders, and Sexualities, Jason Cromwell
Call Me Kate: The Story of Katherine Marlowe, a Transsexual, Nelson
Transgender Nation, Gordene Olga Mackenzie
Who's Really From Venus? The Tale of 2 Genders, Dr. Peggy Rudd
Crossdressers and Those Who Share Their Lives, Dr. Peggy Rudd

Movies:

The Adventures of Priscilla, Queen of the Desert (Mainstream, 1994), Stephan Elliott
The Adventures of Sebastian Cole (Mainstream, 1998), Tod Williams
All About My Mother (Spanish, 1999), Pedro Almodovar
A Boy Named Sue (Independent, 2000), Julie Wyman
The Brandon Teena Story (Documentary, 1998), Susan Muska and Greta Olafsdottir
Boys Don't Cry (Mainstream, 1999), Kimberly Pierce
The Cockettes (Documentary, 2002), David Weissman and Bill Webber
The Crying Game (Mainstream, 1992), Neil Jordan
Eunuchs: India's Third Gender (Documentary, 1991), Michael Yorke
Farewell My Concubine (Mainstream, 1993), Chen Kaige
Hedwig and the Angry Inch (Mainstream, 2000), John Cameron Mitchell
Lola and Bilidikid (German, 1999), E. Kutlug Ataman
M. Butterfly (1993), David Croneberg
Ma Vie en Rose (French, 1997), Alain Berliner
Paris is Burning (Documentary, 1990), Jennie Livingston
Sir: Just a Normal Guy (Documentary, 2001), Melanie La Rosa
Shinjuku Boys (Japanese/UK Documentary, 1995), Longinotto and Williams
Southern Comfort (Documentary, 2000), Kate Davis
Transsexual Menace (Documentary, 1996), Rosa Van Praunheim
Trappings of Transhood (Short, Independent Documentary, 1997), Lee and Huriwitz
Wigstock: The Movie (Mainstream Documentary, 1994), Barry Shils
You Don't Know Dick (Documentary, 1997), Candace Schermerhorn and Bestor Cram

(Sources: Jess Pack, based on his personal experiences. Adaptations from a publication by Gender Queer (GQ), a subgroup of the University of Oregon, Lesbian, Gay, Bisexual, Transgender, and Queer Alliance)

INTERSEXUALITY



WHAT IS 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 a “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 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.

FOUR STORIES from INTERSEXED INDIVIDUALS

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

Cheryl Chase, activist:

Until the age of 18 months, Cheryl Chase was known as Brian. She was born in the late 1950's 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 hate 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 don't tell parents it is necessary, safe, and the child will never have a normal life without it.

Anonymous, parents 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 3 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 age 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 15 student doctors stare at my genitals, and leaving me 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 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 I 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.

(Adapted from Western Carolina University Safe Zone Manual)

INTERSEXED RESOURCES

- Intersex Society of North America (ISNA): <http://www.isna.org>. An excellent organization that has outreach, books, films, and articles about intersexuality that can be ordered or read online.
- The UK Intersex Association: <http://www.ukia.co.uk/>. Though based in the United Kingdom, this site offers extensive information.
- Introduction to Intersex Activism: <http://www.survivorproject.org/is-intro.html>. Good basic resource put out by the Survivor Project.

- Human Rights for Intersexuals: <http://www.luckymojo.com/tkintersex.html>. An excellent article about the recent movement for the civil rights of Intersexed people.
- Inside Intersexuality: <http://www.healthyplace.com/communities/gender/intersexuals/index.html>. A good site for information and resources.
- Intersex People: <http://www.itpeople.org/frameset.html>. Good site full of information and articles that can be read online.

(Adapted from Stutkin, 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>, 1999; 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.)

HETEROSEXISM



THE HETEROSEXUAL QUESTIONNAIRE

The following are examples of the types of questions the GLBTI community has been asked in the past and is still being asked today. We have reversed the audience of the questions to put the heterosexual community in question. Note that assumptions in the questions are untrue/unfair to the heterosexuals **and** GLBTI individuals.

1. What do you think caused your heterosexuality?
2. When and how did you decide you were a heterosexual?
3. Is it possible that your heterosexuality is just a phase that you may grow out of?
4. Is it possible that heterosexuality stems from a neurotic fear of others of the same sex?
5. Isn't it possible that all you need is a good Gay lover?
6. Heterosexuals have histories of failures in Gay relationships. Do you think you 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 that you wouldn't prefer that?
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 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 majority of child molesters are heterosexuals (97%). Do you really consider it safe to expose your child 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. Do your parents know you are straight? Do your friends, co-workers and/or your roommates know?
17. Why do heterosexuals put so much emphasis on sex?
18. Just what do men and women do in bed together?
19. Considering the menace of overpopulation, how could the human race survive if everyone was heterosexual?
20. There seem to be very few happy heterosexuals. Techniques have been developed that might enable you to change if you really want to. Have you considered aversion therapy?

WHAT IS HETEROSEXUAL PRIVILEGE?

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

- 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 you 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 homeowner's 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 are creating.
- Not questioning your normalcy, sexually or 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 that their friends might reject them because of their parent's sexuality and culture.
- Dating the person of your desire in your teens.
- 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, teacher, artist, etc. without being labeled the heterosexual farmer, the heterosexual teacher, etc.)

(Source from Clemson University Safe Zone Program)

EXAMPLES of HETEROSEXISM

- Someone's life partner was excluded from intensive care patient visitation on the basis they are "friends" not family.
- Some GLBTI found that living in rural areas generally means being isolated and "in the closet."
- When they find their posters for support meetings or dances defaced or removed, GLBTI feel discounted and physically threatened. This is not good for their well-being or sense of safety.
- GLBTI 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 including suicide attempts.

FORUMS for OPPRESSION and DISCRIMINATION

- housing
- public accommodations
- employment
- rejection by family members & friends
- violations of due process
- limitations regarding freedom of speech, association, and equal protection under the law
- police harassment
- court cases involving child custody
- verbal harassment & ridicule
- threats of prison
- arrest, public court trials, and imprisonment
- physical assault & violence
- dishonorable discharges from military service
- difficulty or inability to adopt
- no access to legal, economic, and social supports of heterosexual married couples
 - joint tax returns
 - joint credit
 - insurance & medical benefits
 - wills, inheritance
 - social security payments
 - pensions of partner
 - joint custody
 - divorce
- attempts to "cure" sexuality: electro-shock therapy, aversion therapy, castration, clitoridectomies, pharmacologic and hormonal injections, etc.

(From: Texas A&M University Gay and Lesbian Student Services Speaker's Bureau Manual)

COSTS of HETEROSEXISM

You do not have to be gay, lesbian, bisexual, transgender, or intersexed, or know someone who is, to be negatively affected by homophobia. Though heterosexism and homophobia actively oppress gay men, lesbians, bisexuals, transgender, and intersexed individuals, they also hurt heterosexuals.

Heterosexism hurts by teaching us:

- To have negative stereotypes about others that keep us from connecting with them.
- To be dualistic – to think in either/or, right/wrong, good/bad patterns.
- Men should be logical, rational, stoic, reserved, dominant, macho, strong, courageous and should be punished for being too emotional, “soft,” spontaneous, affectionate, or expressive.
- Women should be passive, sensitive, dependent, “pretty,” petite, polite, nurturing, supportive, put other’s needs before their own and should be punished for being assertive, intelligent, independent, or strong.
- To minimize differences and uniqueness
- To believe in myths, lies, misinformation through “educational” institutions

Heterosexism reinforces feelings:

- fear of the unknown or different
- fear of taking risks outside of prescribed traditional gender role norms
- fear of what could happen to us if we “break the silence” and challenge the system
- inner struggle/conflict between doing what feels “right” and “just” and doing what society demands
- seemingly instinctive fear of people who are different
- the pain of having to choose between personal integrity and familial/peer approval and acceptance

Heterosexism attitudes, beliefs, and behaviors result in:

- distancing from those who are different
- a false sense of superiority
- self-righteous attitude
- false source of self-esteem
- a mono-cultural understanding of life
- unconsciously colluding with the system of heterosexism
- unknowingly acting on our privileges and power without understanding how we are hurting or oppressing others
- forced to conform to socialized standards of the dominant heterosexual culture

Heterosexism creates these losses:

- being prejudged as an active heterosexual, a threat, an oppressor without being given the chance to demonstrate otherwise
- not encouraged to develop communities with GLBTI or to work collectively to create or change things
- stereotypes and myths that undermine attempts to build coalitions for the “scrap and leftovers” from the table of oppression
- kept from having a deeper understanding of the inter-relatedness of all forms of oppression
- lack of meaningful relationships and true community with GLBTI
- being so full of negative thoughts, feelings, or stereotypes and hatred toward others adversely affects our mental health
- the realities of “punishments” from individuals, groups, and societal institutions if we choose to act as heterosexual allies and challenge heterosexism
- not being taught the interconnections between all of the “isms:” racism, classism, sexism, heterosexism, ageism, anti-semitism, etc.
- being drawn into the destructive competition over “which form of oppression is the worst” and pits people against each other
- aids the oppressors in their own work

(prepared by Kathy Obear, The Human Advantage, 1991)

ACTIONS STEPS for INTERRUPTING HETEROSEXISM

1. Stop Heterosexist Behavior

- notice and ask people not to tell heterosexist jokes
- notice and stop heterosexist language in yourself and others
- establish guidelines and professional expectations & enforce them gently but firmly
- no name calling, joking, etc.

2. Educate Yourself

- go to more workshops
- read about GLBTI and gender & sexuality phobias
- talk about the issue with others
- attend GLBTI events
- go to see films with GLBTI characters or themes
- join organizations (National Gay & Lesbian Task Force; GLSEN; etc.)
- make some GLBTI friends

3. Support Change in Others

- acknowledge when someone is non-heterosexist
- rename heterosexist acts and comments as being unfair or unbecoming

4. Initiate and Prevent

- plan strategies together as a staff
- develop an agency policy statement against heterosexism
- add sexual orientation to the non-discrimination policy
- analyze educational materials for heterosexist bias

5. Model Non-Heterosexist Behaviors

- don't joke or tease someone for non-traditional gender behaviors
- avoid heterosexual credentializing – making a point of your heterosexuality
- don't assume that everyone/anyone is/are heterosexual
- don't assume that heterosexual relationships take precedence over same-sex ones
- expand your repertoire of interests to non-traditional ones

(Social Issues Training Project, University of Massachusetts School of Education, 1984)

SUGGESTIONS for COMBATING HETEROSEXISM

1. Don't assume that everyone you meet is heterosexual. Assume that wherever you go to work there are lesbians, gay men, bisexuals, transgender, or intersexed individuals who are wondering how safe the environment is for them. Provide safety by making clear your support for GLBTI identities.
2. Challenge heterosexism whether or not a GLBTI person is present. Don't always leave it to GLBTI individuals to challenge heterosexism.
3. Remember that silence is complicity. Challenge and confront anti-GLBTI statements and structures as well as the assumptions behind them. Do not promote institutionalized invisibility of GLBTI individuals.
4. When speaking of your heterosexual partner/lover/companion, don't point out that he/she is of the opposite sex.
5. Confront your own fear, memories, and bad feelings about GLBTI individuals. Recall and release those feelings to diminish their influence.
6. Do not assume that a gay, lesbian, or bisexual individual is automatically attracted to you. Do you assume that all straight people are attracted to you? If they are attracted to you, be flattered rather than offended. If it still bothers you, try to talk about it.
7. Change your use of language from "Do you have a girl(boy) friend?" to "Are you seeing anyone?" Heterosexism is promoted and maintained powerfully through language. Respect the profound personal-ness

and delicacy of the “coming out” process.

And the Biggest Challenge

8. If people jump to the conclusion that you are a lesbian or gay, resist your impulses to deny it. Challenge yourself to experience GLBTI oppression rather than taking advantage of heterosexual privilege.

(Distributed by the Progressive Student Alliance at Western Carolina University)

GLBTQ STUDENT LIFE ISSUES



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 GLBTIQ teen/young adult realizes there is something "different" about himself or herself. This realization is the first step to "coming out." The GLBTIQ youth may feel ashamed, frightened, confused, isolated or may rejoice at this newfound identity.

There is a book entitled "Two in Twenty." This book is a series of narratives written by GLBTI youth in the midst of the coming out process. Some are joyful 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 year intermission between the two books, the GLBTI movement would come so far, the endless stories of loneliness would be less in number. Unfortunately, the teens who contributed essays to the book still speak of isolation from other queer teens and of 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 GLBTI supports and resources such as Safe Zone programs, clubs, and mentors.

(Adapted from Western Carolina University Safe Zone Manual)

COMING OUT: STUDENTS on CAMPUS

Coming out is the term used to describe the process of and the extent to which one identifies 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 realizing that one is gay or bisexual, 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 of 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 involve the extent of the revelation (should everyone know or should disclosure be selective?), timing, and anticipating 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. 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.

WAYS to PREPARE for COMING OUT

If you are GLBTI 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 clean. 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 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 clearly identify learning resources that are available to the person. For example, books, films, magazine articles, journals, counselors, etc. As your learning has taken time and energy, your friends and family 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 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.mscedu/~glbtss/safezone.html>)

QUESTIONS STUDENTS MAY CONSIDER BEFORE COMING OUT

1. *Are you sure about your sexual orientation?* 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?* If you're wrestling with guilt and periods of depression, you'll be better off waiting to tell your parents. Coming out to them may require tremendous emotional energy on your part as you may encounter intense negative responses to your identity; it will require a positive self-image to handle this emotional event.
3. *Do you have support?* 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?* Your parents will probably respond based on a lifetime of information from a homophobic society. If you've done some serious reading on the subject, you'll be able to assist them by sharing reliable information and research.
5. *What's the emotional climate at home?* If you have the choice of when to tell, consider the timing. Choose a time when they're not dealing with such matters as the death of a close friend, pending surgery, or the loss of a job.
6. *Can you be patient?* Your parents will require time to deal with this information if they haven't considered it prior to your sharing. The process may last from six months to two years.

7. *What's your motive for coming out now?* 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?* Homosexuality is a subject most non-gay people know little about. Have available at least one of the following: a book addressed to parents, a contact for the local or national Parents and Friends of Lesbian and Gays (PFLAG), and/or the name of a non-gay counselor who can deal fairly with the issue.
9. *Are you financially dependent on your parents?* 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?* If you've gotten along well and have always known their love and shared your love for them in return then chances are they'll be able to deal with the issue in a positive way.
11. *What is their moral societal view?* 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?* 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*.)

FAMILY: THOSE 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.
- Our 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/~glbtss/safezone.html>)

PEOPLE of COLOR ISSUES

Beyond GLBT: Same-Gender Loving

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 GLBT 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.

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 those 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 are GLBT/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 “LGBT/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 LGBT 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 GLBTI, 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.youthbresource.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)

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, bisexual, transgender, and intersexed 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). GLBTI people may feel uncomfortable discussing pertinent issues with their health care provider and may lack the necessary education to know about safer sex measures and prevention of the spread of STIs.

(By Joey Bufanda)

WHAT IS HIV & AIDS?

Human immunodeficiency virus (HIV) is a virus that attacks the immune system, making it difficult for the body to fight infection and disease. HIV is the same virus that also causes acquired immunodeficiency syndrome (AIDS). However, having HIV does not mean you have AIDS. AIDS is the last and most severe stage of the HIV infection. Some people live with HIV for years or even decades before the condition progresses to AIDS. Once HIV enters the body, it infects a type of white blood cell called CD4+ cells. These white blood cells are an important part of the immune system that helps you fight infections. As CD4+ white blood cells are attacked and destroyed by HIV, the immune system becomes less able to fight infection and disease.

AIDS is the final stage of HIV infection. When the immune system CD4 cells drop to a very low level, a person’s ability to fight infection is lost. In addition, there are several conditions that occur in people with HIV infection with this degree of immune system failure -- these are called AIDS defining illnesses.

(Adapted from WebMd Health)

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

Since we know that 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. Spermicidal 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, make these condoms break.
4. After ejaculation, hold the base of the condom and pull out. Never reuse a condom.

Oral Sex and Latex

In oral sex 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.

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



I AM ONLY ONE PERSON

I am only one person.
What can one person do?
Rosa Parks,
Was just one person.
She said one word.
She said it on December 1, 1955.

One person
Said one word
She said it on a bus.
She said it to the bus driver.
On the Cleveland Street Bus in Montgomery.

The bus driver said,
“Stand up, Nigger woman.
And give up your seat.
To that white man!”
Rosa Parks,
One person,
Said one word
The word was “No!”

One woman
Said one word
And a nation
blushed!

One woman
Said one word
And a world
Talked!

One woman
Said one word
And the Supreme Court
Acted!

One woman
Said one word
And the buses were
Desegregated.
I am only one person.
What can one person do?

QUALITIES of ALLIES

An ally:

- Is an advocate for gay, lesbian, bisexual, transgender, and intersexed people.
- Has worked (or is currently working) to develop an understanding of heterosexism and transphobia
- Chooses to align with GLBTI 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 their lives
- Is a “safe person” for someone who is GLBTI to speak with. This means that one is committed to providing support and to maintaining confidentiality. This commitment extends to people with a GLBTI 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 as an ally, they have 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 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 they are making a difference in the lives of others.

(Source: Shawn-Eric Brooks 1990 and CMU Allies <http://www.contrib.andrew.cmu.edu/~allies/flyer.html>)

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. One-on-one, group programming, 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)

ASSESSMENT of PERSONAL HOMOPHOBIA

Homophobia may be defined as an unrealistic fear of or generalized negative attitude toward gay, lesbian, and bisexual individuals. Homophobia may be experienced and expressed by lesbians, gay men, and bisexuals as well as by heterosexuals.

1. Do you stop yourself from doing or saying certain things because someone might think you’re gay, lesbian, or bisexual? If yes, what kind of things?
2. Do you ever intentionally do or say things so that people will think you are heterosexual?
3. Do you believe that gays or lesbians can influence others to become homosexual? Do you think someone could influence you to change your sexual orientation or your gender identity?
4. If you were a parent, how would you (or do you) feel about having a lesbian daughter, gay son, or a bisexual, transgender, or intersexed child?
5. How do you think you would feel if you discovered that one of your parents or parent figures, or a brother or sister, were gay, lesbian, bisexual, transgender, or intersexed?
6. Are there any jobs, positions, or professions that you think lesbians, gays, bisexual, transgender, or intersexed

- individuals should be barred from holding or entering? If yes, why?
7. Would you go to a physician whom you knew or believed to be gay, lesbian, bisexual, transgender, or intersexed if that person were of a different gender from you? If that person were of the same gender as you? If not, why not?
 8. If someone you care about were to say to you, “I think I’m gay,” would you suggest that the person see a therapist?
 9. Have you ever been to a gay or lesbian bar, social club, party, or march? If not, why not?
 10. Would you were a button that says, “How dare you presume I’m heterosexual”? If not, why not?
 11. Can you think of three positive aspects of a gay, lesbian, bisexual, transgender, or intersexed lifestyle? Can you think of three negative aspects of a heterosexual lifestyle?
 12. Have you ever laughed at a “queer” joke?

(By: A. Elfin Moses and Robert O. Hawkins, Jr.)

BEYOND TOLERANCE: Toward Understanding, Appreciation, & Celebration

There are 8 stages of response described on this continuum. The actions move from being extremely homophobic or heterosexist on the left end of the continuum (1) to extremely anti-homophobic and anti-heterosexist on the right side of the continuum (8).

1. **Actively Participating.** This stage of response includes actions that directly support lesbian/gay/bisexual/transgender oppression. These actions include laughing at or telling jokes that put down GLBTI persons, making fun of people who don’t fit the traditional stereotypes of what is masculine or feminine, discouraging others and avoiding personal behavior that is not sex-stereotyped, and engaging in verbal or physical harassment of any individuals who do not conform to traditional sex- role behavior. It also includes working for anti-GLBTI legislation.
2. **Denying or Ignoring.** This stage of response includes inaction that supports GLBTI oppression coupled with an unwillingness or inability to understand the effects of homophobic and heterosexist actions. This stage is characterized by a “business as usual” attitude. Though responses in this stage are not actively and directly homophobic or heterosexist, the passive acceptance of these actions by others serves to support the system of LGBT oppression.
3. **Recognizing, But No Action.** This stage of response is characterized by a recognition of homophobic or heterosexist actions, and the harmful effects of these actions. However, this recognition does not result in action to interrupt the homophobic or heterosexist situation. Taking action is prevented by homophobia or a lack of knowledge about specific actions to take. This stage of response is accompanied by discomfort due to the lack of congruence between recognizing homophobia or heterosexism yet failing to act on this recognition. An example of this stage of response is a person hearing a friend tell a “queer joke” recognizing that it is homophobic, not laughing at the joke, but saying nothing to the friend about the joke.
4. **Recognizing and Interrupting.** This stage of response includes not only recognizing homophobic and heterosexist actions, but also taking action to stop them. Though the response goes no further than stopping, this stage is often an important transition from passively accepting homophobic or heterosexist actions to actively choosing anti-homophobic and anti-heterosexist actions. In this stage, a person hearing a “queer joke” would not laugh and would tell the joke teller that jokes that put down lesbians and gays are not funny. Another example would be a person who realized that he or she is avoiding an activity because others might think she or he is lesbian or gay if he or she participates in it, and then decides to participate.
5. **Educating Self.** This stage of response includes taking action to learn more about GLBTI persons, heterosexism and homophobia. These actions can include reading books, attending workshops, talking to others, joining organizations, listening to lesbian or gay music, or any other actions that can increase awareness and knowledge. This stage is also a prerequisite for the last three stages; all three involve interactions with others about homophobia and heterosexism. In order to do this confidently and comfortably, people need first to learn more.
6. **Questioning and Dialoguing.** This stage of response is an attempt to educate others about homophobia and heterosexism. This stage goes beyond interrupting homophobic and heterosexist interactions to engaging people in dialogue about these issues. Through questions and dialogue, this response attempts to help others

increase their awareness of and knowledge about homophobia and heterosexism.

7. **Supporting and Encouraging.** This stage of response includes actions of that support and encourages the anti-homophobic and anti-heterosexist actions of others. Overcoming the homophobia that keeps people from interrupting this form of oppression even when they are offended by it is difficult. Supporting and encouraging others who are able to take this risk is an important part of reinforcing anti-homophobic and anti-heterosexist behavior.
8. **Initiating and Preventing.** This stage of response includes actions that actively anticipate and identify homophobic institutional practices or individual actions and work to change them. Examples include teachers changing a “family Life” curriculum that is homophobic or heterosexist, or counselors inviting a speaker to come and discuss how homophobia can affect counselor-client interactions.

BENEFITS of BEING an ALLY

- Become less locked into sex roles and gender stereotypes
- Can help the lives of members of the GLBTIQ community
- Able to make a difference in the campus environment.
- Forms of oppression impact everyone, and you can take an active role in relieving oppression.
- You can be there for your friend, classmate, roommate, teammate, co-worker, brother, sister, professor, mother, father, other peers, and other people you know who are GLBTIQ.
- Safe Zones help GLBTIQ people develop stronger self-esteem and can lower occurrences of depression, drug and alcohol abuse, and suicide.

GUIDELINES for ALLIES

In today’s world, GLBTIQ issues are being discussed more than ever before. The discussions taking place in the homes are often emotionally charged. In general, GLBTI topics can be uncomfortable and confusing to people on a personal level. Being an ally is important and can have certain challenges. These guidelines are by no means exhaustive but simply provide a starting point. Feel free to add your own ideas and suggestions.

- Don’t assume heterosexuality. In our society, we generally assume that everyone we meet is heterosexual. However, many GLBTIQ people will hide their identities until they feel safe to “come out.”
- Use gender neutral language when referring to someone’s partner if you do not know the person well. Be aware of the gender language you use and its implications this language may have.
- Educate yourself about GLBTIQ issues. There are many resources available that include: reading materials, books, and videos available through F.O.S.T.E.R. and the Student Counseling & Development Center. Don’t be afraid to ask questions.
- Educate yourself on transgender and intersexed issues as these are highly misunderstood areas. Do not assume that everyone falls into the categories of male/man or female/woman.
- Explore ways to creatively integrate GLBTIQ issues into your work, classroom, and other responsibilities. Establishing a dialogue and educating others about GLBTIQ issues can be a valuable process for everyone regardless of sexual orientation or gender identity. Make sure to integrate rather than separate GLBTIQ issues to establish a safe place for people to discuss these issues.
- Challenge stereotypes that people may have about GLBTIQ individuals as well as other people in our society. Challenge derogatory comments and jokes made about any group of people. Avoid making those remarks yourself. Avoid reinforcing any stereotypes and prejudices.
- Examine the effects 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 an opposite 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. If you don’t know how to identify a particular group, it’s okay to ask. (“How do you identify 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, etc.) to always be the experts on issues pertaining to their particular identity group. Avoid tokenizing or patronizing individuals from certain groups.
 - Encourage and allow disagreement on topics of sexual identity and related civil rights. These issues are highly charged and confusing. If there is not any disagreement, it probably means that people are tuned out or hiding their true feelings. Keep disagreement and discussion focused on principles and issues rather than personalities. Keep disagreement respectful.
 - Remember that you are human. Allow yourself not to know everything, to make mistakes, and to be insensitive occasionally. Avoid setting yourself up as an expert unless you are one. Give yourself time to learn the issues, to ask questions, and to explore your personal feelings.
 - Ask for support if you are getting harassed or if problems are surfacing related to your raising issues around sexual orientation and gender identity. Do not isolate yourself in these situations and try to identify your supporters. You may be labeled as gay, lesbian, bisexual, transgender, or intersexed whether you are or not. Use these opportunities to deepen your understanding 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 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 a person's life.

(Source: "Being an Ally for Lesbians, Gay Men, and Bisexuals." from Clemson University Safe Zone Program)

CREATING a NON-HOMOPHOBIC CAMPUS ENVIRONMENT

- Object to and eliminate jokes and humor that put down or portray GLBTIQ individuals in stereotypical ways.
- Counter statements about sexual orientation 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 GLBTIQ topics and other topics of their expertise.
- Do not force GLBTIQ individuals 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. This 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. Always question job applicants about their ability to work with gay and lesbian faculty, staff, and students.
- Do not refer all gay/lesbian issues to gay or lesbian staff/faculty. Do not assume their only expertise is gay and lesbian issues. Check with staff about their willingness to consult on lesbian and gay issues with other staff members.
- Be sensitive to issues of oppression and appreciate the strength and struggle it takes to establish a positive gay and lesbian 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 agency 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.

SUGGESTIONS for WORKING with GLBTIQ 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 GLBTIQ 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. Be wary of the mix-up between sexual orientation and sexual preference.
- Deal with feelings first. You can be helpful by just listening and allowing a GLBTIQ student the opportunity to vent feelings.
- Help, but don't force. GLBTIQ 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 and friends of Lesbians and Gays")

WHEN a GLBTIQ PERSON "COMES OUT" TO YOU

Please keep in mind that a GLBTIQ 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 that 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 GLBTIQ 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 know you were gay/lesbian/bi/trans ?
- 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?

MAKING GLBTIQ 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 kid and a male-female couple or the kid and a single parent.

DO: Assume any kid might live in a family consisting of the kid and a single parent, the kid and an opposite-sex couple, or the kid 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 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; with a male partner, she would need birth control.

(source: <http://www.salp.umich.edu/lbg/GLB/Manual/freetobe.html>)

SCENARIOS YOU MIGHT FACE as an ALLY

Below are some example situations and reactions you could have as an ally to the GLBTIQ 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.
 - o Ignore it.
 - o Refuse to laugh.
 - o Casually leave.
 - o Offer Information to give a different perspective.
 - o Use "soft" confrontation and tell them it is not funny and possibly offensive.
 - o Tell them your supportive feelings about GLBTI people.
 - o 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.
 - o Ignore them.
 - o Tell them you don't care.
 - o Tell them it doesn't matter what sexual orientation she is.
 - o Tell them it's harmful to pass on such information.
 - o Say that if she is a lesbian, let her come out on her own terms.
 - o Ask them not to spread it.
 - o Talk about some of the discrimination and abuse that GLBTI people could 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.
 - o Listen to them thoughtfully and compassionately.
 - o Tell them of a bathroom you know of that's safe or unisex.
 - o Notify appropriate staff and/or administration of the lack of safe facilities, while maintaining the o

- o confidentiality of the student.
- o Support students in their suggestions of creating more unisex bathroom 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.”
 - o Ignore it.
 - o Refuse to laugh.
 - o Tell them you find their behavior rude.
 - o Say you don’t care.
- A professor refers to intersexed people as “strange medical anomalies” during a lecture or meeting.
 - o Speak up in class and provide a more accepting/positive view of intersexuality.
 - o Tell the professor afterwards that you found their language inappropriate.
 - o Send the professor information or literature that is positive towards intersexed people.

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.
- t 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 GLBTI person or has friends or family who are GLBTI.
- Model acceptance of differences for friends.
- Build a sense of personal integrity.

When to Refer a Student to a Mental Health Professional

Most of the students you will encounter will be seeking support, advice, or information.

Occasionally, you may advise a student who is experiencing a good deal of psychological distress. This may be evident in the following ways:

- When a student states they are no longer able to function in their normal capacity within their classes. When they have seen a drop in grades or academic performance.
- When a student can no longer cope with their day-to-day activities and responsibilities. A student may state they are no longer going to classes or they have been late for their job and may be fired soon if this continues.
- A student expresses depressive symptoms such as: sleep disturbance, sudden weight loss or weight gain, crying spells, fatigue, loss of interest or pleasure in previous enjoyable activities, and/or inability to concentrate or complete tasks.
- A student expresses severe anxiety symptoms such as: feelings of panic, shortness of breath, headaches, sweaty palms, dry mouth, or racing thoughts.
- A student expresses suicidal thoughts or feelings.
- A student has no support. They have no friends or have no friends they can talk to about their sexual orientation. This person may not need counseling, but could benefit from a support group and the Counseling Center can make that assessment and referral.
- A good guideline to use if all else fails: If you are feeling overwhelmed or worried about a student, referring them to a mental health professional would probably be appropriate.
- To make a referral, contact the Student Development & Counseling Center at (901) 843-3128.

RESOURCES



RHODES COLLEGE LGBTQ ORGANIZATIONS AND RESOURCES

STUDENT ORGANIZATIONS

Gay-Straight Alliance: The Rhodes College Gay-Straight Alliance seeks to create an atmosphere of acceptance and respect for all students on this campus, regardless of sexual orientation or gender identity, and to promote the awareness of sexuality and gender issues through education and activism. We hope to provide a community of friendship and support for gay, lesbian, bisexual, transgender, and questioning students, as well as a forum for the discussion of issues relating to gender, sexuality, and the GLBT community. The GSA meets weekly. We also host and co-sponsor a number of other events on campus, including a week of events organized around National Coming Out Day, a Fly Your Colors picnic with kites, and a bake sale to support the Vagina Monologues. Find us on Facebook or email Sherrie Lemons (lemsm@rhodes.edu) or Taylor Sieben (sietl-15@rhodes.edu) for more information.

Officer List 2012-2013:

Co-Presidents: Sherrie Lemons (lemsm)

Taylor Sieben (sietl-15)

Secretary: Jazlyn Phelps (phejt-15)

Treasurer: Xany Moore (moaaa-15)

Queer Advocacy: Queer Advocacy is an area under the Rhodes Kinney Program, which focuses on involving students in service and social action (kinneyprogram.com). Our mission is to promote integrated community learning, raise awareness about issues, engage and empower students, as well as build a community of service minded students through serving the greater queer community of Memphis. As queer advocates we meet weekly for an Issue Based Team Meeting, which involves a check-in, discussion about current events, and weekly updates about service opportunities. We perform community service plunges weekly. Some past examples include: Mid-South Pride Parade, Friends For Life Halloween Party, and Cooper Young Festival supporting the Memphis Gay and Lesbian Community Center. We have volunteers that work with our LGBTQIA community partners including: Memphis Gay and Lesbian Community Center, Friends for Life, Tennessee Equality Project, Mid-South Pride, and Memphis Area Gay Youth. For information about joining the Queer Advocacy team check the In-Rhodes page for upcoming meetings or contact Tyler Adams (adatj-15@rhodes.edu) or Phat Ho (hopt@rhodes.edu).

Co-coordinators 2012-2013: Tyler Adams (adatj-15)

Phat Ho (hopt)

SUPPORT/RESOURCES

LGBT Peer Mentoring Program: The LGBT Peer Mentoring Program is meant to provide interested queer Rhodes students with an older queer student mentor who can serve as a resource in a number of ways. Whether mentees want to discuss the process of coming out at Rhodes, different ways of finding queer community, or other issues related to being queer on campus and in Memphis, mentors will provide a resource and a social connection.

Contact: Pam Detrie (detricp)

Safe Zones: Safe Zones is a program designed to help Rhodes become a more welcoming and supportive environment for all students regardless of sexual orientation or gender identity. Participants are trained by the Campus Counseling Center, which prepares them to increase the campus community's understanding and awareness of LGBTQ issues, provide a greater sense of safety for the LGBTQ community, offer information to straight allies, and act as a resource for information related to combating homophobia, heterosexism, transphobia, and other LGBTQ misinformation and misconceptions. Safe Zones include faculty and staff members and students, and they display the Safe Zone logo on their office or dorm door to indicate their commitment. Visit the Rhodes website for more information and a current list of participants.

Contact: Pam Detrie (detricp)

Link: <http://www.rhodes.edu/campuslife/11503.asp>

See attached list of current safe zones.

LGBT Resource Room: Located in the basement of the Briggs Student Center, the LGBT Resource Room is a space dedicated to providing queer students and allies with information and resources about queer life on campus, in the Memphis community, and in the world. The Resource Room has its own small library, magazines, and binders listing Rhodes and Memphis resources from LGBT-friendly organizations in Memphis to the current GSA and Queer Advocacy officers.

OTHER

LGBT Working Group: In fall 2011, Dean and Vice President for Academic Affairs Michael Drompp convened an ad hoc committee of faculty, students, and staff, and charged the group with assessing the lesbian, gay, bisexual, and transgender (LGBT) supportiveness of current college policies and programming. The group's purpose is to help facilitate change in the areas of concern that have been identified, with the goal of improving the quality of life for LGBT students, faculty, and staff in the Rhodes community.

Contact: Pam Detrie (detriep)

Current Safe Zones:

Alan Jaslow (ajaslow@rhodes.edu)

Amy Oakes (oakesa@rhodes.edu)

Anita Davis (adavis@rhodes.edu)

Anthony Siracusa (siracusa@rhodes.edu)

April Brasfield (brasfielda@rhodes.edu)

Ashley Bianchi (bianchia@rhodes.edu)

Ashley Newman '13 (newal@rhodes.edu)

Becky Klatzkin (klatzkinr@rhodes.edu)

Bernadette McNary-Zak (mcnary_zak@rhodes.edu)

Bethany Larkin '13 (larbj@rhodes.edu)

Bill Short (short@rhodes.edu)

Bob Johnson (johnsonb@rhodes.edu)

Brian Ray (rayb@rhodes.edu)

Carlissa Lovette (lovcj-15@rhodes.edu)

Carol Casey (casey@rhodes.edu)

Carolyn Jaslow (cjaslow@rhodes.edu)

Charles Frame (framec@rhodes.edu)

Chenobia Webster (websterc@rhodes.edu)

Chris Wetzal (wetzal@rhodes.edu)

Courtenay Harter (harterc@rhodes.edu)

Dan Gritti (grittid@rhodes.edu)

Daniel Ullucci (ulluccid@rhodes.edu)

Darlene Loprete (loprete@rhodes.edu)

David Jilg (jilg@rhodes.edu)

David Kabelik (kabelikd@rhodes.edu)

David McCarthy (mccarthy@rhodes.edu)

Dee Garceau-Hagen (garceau@rhodes.edu)

Dena Selmer (selmerd@rhodes.edu)

Devon Greig (gredu-15@rhodes.edu)

Dorothy Cox (coxd@rhodes.edu)

Eden Johnson '14 (johea@rhodes.edu)

Eliott King (kinge@rhodes.edu)

Elisha Vego (vegoe@rhodes.edu)

Elizabeth Bridges (bridgese@rhodes.edu)

Elizabeth Daggett (daggette@rhodes.edu)

Elizabeth Gates (archives@rhodes.edu)

Elizabeth Thomas (thomase@rhodes.edu)
Eric Gottlieb (gottlieb@rhodes.edu)
Erin Harmon (harmone@rhodes.edu)
Erin Hillis (hillise@rhodes.edu)
Evelyn Perry (perrye@rhodes.edu)
Francesca Tronchin (tronchinf@rhodes.edu)
Gail Murray (murray@rhodes.edu)
Gail Streete (gstreete@rhodes.edu)
Hamlett Dobbins (dobbinsh@rhodes.edu)
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Jacob Powers '14 (powjl@rhodes.edu)
James Cornfoot (cornfootj@rhodes.edu)
Jane Wells (wellsj@rhodes.edu)
Janet Panter (panterj@rhodes.edu)
Jazlyn Phelps (phejt-15@rhodes.edu)
Jeanne Lopiparo (lopiparoj@rhodes.edu)
Jenna Goodloe Wade (goodloe@rhodes.edu)
Jennifer Brady (brady@rhodes.edu)
Jennifer Logan (loganj@rhodes.edu)
Jenny Vaydich (vaydichj@rhodes.edu)
Jessica Holcomb (holcombj@rhodes.edu)
Joe Vari (varij@rhodes.edu)
John Blaisdell (blaisdellj@rhodes.edu)
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Webster Heath (heaww-15@rhodes.edu)
Xany Moore (mooaa-15@rhodes.edu)

RESOURCES IN THE MEMPHIS COMMUNITY

COMMUNITY ORGANIZATIONS

Memphis Gay and Lesbian Community Center

Located in the Cooper-Young District of Memphis, the Memphis Gay and Lesbian Community Center is the only center of its kind in the Mid-South. It serves the community by providing a space for discussion and events important to the LGBTQ community. From HIV testing to a housing program for homeless LGBTQ youth to Outflix, the annual film festival, MGLCC hosts and provides support for countless programs for the community. Every Friday night, MGLCC hosts GenQ, a program where LGBTQ college-aged youth in Memphis hang out, eat, play games, watch a movie, or do karaoke.

Facebook: Memphis Gay and Lesbian Community Center

mglcc.org

892 South Cooper Street, Memphis, TN 38104

901.278.6422

info@mglcc.org

Mid-South Pride

Mid-South Pride is an organization that supports and promotes Unity, Diversity and Equality in all human endeavors. Stand up and be counted...home is where you make it.

Mission: To unite and educate the community by creating and sponsoring diverse LGBT events across the Mid-South region. Mid-South Pride was founded in 2004 to promote diversity, unity and equality among all people and groups in the Mid-South region.

Facebook: Mid-South Pride

midsouthpride.wordpress.com

YOUTH GROUPS

Memphis Area Gay Youth

Memphis Area Gay Youth (MAGY) is an affirming, youth run, adult advised, multi-cultural support group for all gay, lesbian, bisexual, transgender and questioning (GLBTQ) youth ages 13-20 in the greater Memphis area.

Facebook: Memphis Area Gay Youth

GenQ

A group for college-aged students and allies that meets every Friday night for dinner and a group activity at the Memphis Gay and Lesbian Community Center.

Facebook: Gen-Q Memphis

POLITICAL ORGANIZATIONS

Tennessee Equality Project-Shelby County

TEP works for the equality of LGBT persons through the establishment of fair and equitable laws.

Facebook: Tennessee Equality Project

tnep.org/shelby/

shelbycounty@tnequalityproject.com

Tennessee Transgender Political Coalition

The Tennessee Transgender Political Coalition is an organization designed to educate and advocate on behalf of transgender related legislation at the Federal, State, and local levels. The Coalition is dedicated to raising public awareness and building alliances with other organizations concerned with equal rights legislation.

Facebook: Tennessee Transgender Political Coalition

ttgpac.com

TRANS RESOURCES

Perpetual Transition

Perpetual Transition is a transgender support and social group for people in the Memphis metropolitan area that has been meeting since 2005. The new group has expanded to meet the growing needs of our community and meets every Monday night from 7:00 - 9:00 pm at Memphis Gay and Lesbian Community Center. Perpetual Transition is safe, confidential, and open to transgender people of any variety.

PT@mglcc.org

AFRICAN AMERICAN IDENTITY

As I Am, As We Are

As I Am, As We Are is a discussion group for LGBTQ men of color. The purpose of the group is to provide a safe, welcoming place for men to discuss topics of interest to the group such as, being a sexual minority, heterosexism, living in a same-sex household, partner selection, self-efficacy and other topics. The group meets each Sunday from 5:00-7:30 pm at MGLCC. For more info, please contact Martavius at MMMV@mglcc.org

Brothers United of Memphis

This organization serves to provide comprehensive health & education services to African American Same Gender Loving Men while supplying an empowerment structure for personal growth, community building, and positive self-actualization.

<http://www.brothersunited.com/memphis.htm>

Memphis Contact: Anthony H. at hardawayarg@yahoo.com

BUTCH IDENTITY

Studs with a Profound Purpose (SWAPP)

SWAPP is a group of dominant, butch, stud, head of household women that are seeking an outlet that wouldn't be found anywhere else. It is a support group that offers some form of ministry, camaraderie, and all around focus on each other and issues in our community.

Our purpose is to become one voice for this battle of equality:

- To S.W.A.P.P. everything except wives, girlfriends or jumpoffs
- To Make our presence known, as the strength of our community
- To Give ourselves and time whenever possible, wherever needed.

In a nutshell, just to be able to be ourselves with women of our own kind and the world. This group meets on the 3rd Thursday of each month at MGLCC.

ajkflores@yahoo.com

CLUBS/BARS

Venue Entertainment Complex (901)

2514 Mt. Moriah Road Memphis, TN 38115

901.522.8455

Facebook: Venue Entertainment Complex

Dru's Place

1474 Madison Avenue Memphis, TN 38104

901.275.8082

Facebook: Dru's Place

drusplace.com

Monday - Thursday: 11 a.m. - 12 midnight

Friday-Saturday: 11:00 a.m. - 3:00 a.m./Sunday: Noon - Midnight

Mollie Fontaine Lounge
679 Adams Avenue
901.524.1886
Facebook: Mollie Fontaine
molliefontainelounge.com
21+
Wednesday-Saturday, 5pm until...

Spectrum
616 Marshall Ave
thespectrummemphis.com
Facebook: Club Spectrum Memphis
Fri: 8:00 pm-4:00 am
Sat:8:00 pm-5:00 am

The Pumping Station
1382 Poplar Avenue
901.272.7600
Facebook: The Pumping Station
pumpingstationmemphis.com
Monday thru Friday 4pm - 3 am
Saturday & Sunday 3pm - 3am

SPIRITUALITY

First Congregational Church
1000 S. Cooper St, Memphis, TN 38104
901.278.6786
www.firstcongo.com
Facebook: First Congregational Church (Memphis)

First Presbyterian Church
166 Poplar Ave, Memphis, TN 38103
901.525.5619
www.firstpresmemphis.org

Holy Trinity United Church of Christ
685 S. Highland, Memphis, TN 38111
901.320.9376
www.holytrinitymemphis.org

Calvary Episcopal Church/Integrity Memphis
102 N. Second St, Memphis, TN 38103
901.525.6602
www.calvarymemphis.org
Facebook: Calvary Episcopal

Living Word Christian Church
1015 S. Cooper St, Memphis, TN 38104
www.livingwordchristianchurch.net
Facebook: Living Word Christian Church

Neshoba Unitarian Universalist Church
7350 Raleigh-Lagrange Rd, Cordova, TN 38018
901.266.2626
www.neshobauu.org

Open Heart Spiritual Center
2489 Broad Ave, Memphis, TN 38112
901.339.0906
www.openheartspiritual.org
Facebook: Open Heart Spiritual Center

Prescott Church
961 Getwell Rd, Memphis, TN 38111
901.327.8479
www.prescottchurch.org
awab.org (Association of Welcoming and Affirming Baptists)

Temple Israel
1376 East Massey Road Memphis, TN 38120
901.761.3130
timemphis.org
Facebook: Temple Israel (Memphis)

Church of the Holy Communion Episcopal
4645 Walnut Grove Road Memphis, TN 38117
901.767.6987
holycommunion.org
Facebook: Church of the Holy Communion

Idlewild Presbyterian
1750 Union Avenue Memphis, TN 38104
901.726.4681
idlewildchurch.org
Facebook: Idlewild Presbyterian Church

First Baptist Church of Memphis
200 East Parkway North Memphis, TN 38112
901.454.1131
First Baptist Church of Memphis

PARENTS, FREINDS, AND FAMILIES OF LESBIANS AND GAYS (PFLAG)

PFLAG Memphis supports GLBT folks and the ones who love them (whether they are confused or not). Our Mission: PFLAG promotes the health and well-being of lesbian, gay, bisexual and transgender persons, their families and friends through: support, to cope with an adverse society; education, to enlighten an ill-informed public; and advocacy, to end discrimination and to secure equal civil rights. Parents, Families and Friends of Lesbians and Gays provides opportunity for dialogue about sexual orientation and gender identity, and acts to create a society that is healthy and respectful of human diversity.

Our Vision: We, the parents, families and friends of lesbian, gay, bisexual and transgender persons, celebrate diversity and envision a society that embraces everyone, including those of diverse sexual orientations and gender identities. Only with respect, dignity and equality for all will we reach our full potential as human beings, individually and collectively. PFLAG welcomes the participation and support of all who share in, and hope to realize this vision.

Facebook: PFLAG Memphis
memphisflag@yahoo.com
901.268.2511
PFLAG.org

HIV/AIDS

Friends for Life

The mission of Friends For Life Corporation is to help persons affected by HIV/AIDS live well. Our comprehensive, client-centered approach includes education, housing, food, transportation and healthy life skills training. We strive to enlighten the Mid-South community in a manner that heightens awareness, facilitates acceptance and promotes prevention.

The goal of Friends For Life is to be the provider of hope, help and healing for Mid-Southerners affected by HIV/AIDS until ultimately HIV/AIDS is cured and we can proudly cease to exist.

For 27 years, Friends For Life has been enriching the lives of the men, women and children affected by HIV/AIDS through a compassionate and holistic approach to the management of the disease.

friendsforlifecorp.org
43 North Cleveland
Memphis, TN, 38104
901.272.0855

Free HIV Testing

The Memphis Gay and Lesbian Community Center has partnered with Planned Parenthood - Greater Memphis Region to provide free HIV testing and safer sex education.

Every Wednesday night at MGLCC from 6:00-9:00 pm, testers and counselors are on hand to give free, rapid HIV tests.

Each rapid HIV test:

- Takes about 20 minutes to provide results
- Consists of a painless oral swab (no blood!)
- Comes with a short HIV prevention counseling session

Trained professionals are on hand to answer related sexual health questions. No appointment necessary.

For more information: mglcc.org

SPORTS

Bluff City Sports Association

Mission

The mission of Bluff City Sports is to provide a safe environment for the GLBT Community and friends of the GLBT Community to play softball. We work to promote growth of the athletes both on and off the field. We work to support the Memphis GLBT Community.

Company Overview

We are a Memphis area gay, lesbian, bi-sexual, transgendered organization that provides a safe environment to play the game of softball. We range from competitive to newcomers. We offer an environment of fun and friendship. We are apart of the North American Gay Amateur Athletic Alliance (NAGAAA), a national gay softball organization that hosts the world largest gay sporting event...the Gay Softball World Series.

Facebook: Bluff City Sports Association

memphisgaysoftball.com

Brothers and Sisters Bowling League

The oldest and longest running gay sports organization in Memphis.

Facebook: Brothers and Sisters Bowling League

Other General Resources

- **Broido, E. M.** (2000). Ways of being an ally to lesbian, gay and bisexual students. From V. Wall and N. Evans (ed.), *Toward acceptance: Sexual orientation and today's college campus*. ACPA Media.
- **Thompson, C.**, (1992). *On being heterosexual in a homophobic world*. Homophobia: How we all Pay the Price, Beacon Press.
- **Washington, J., Evans, N. J.**, (1991) *Becoming an Ally*. In N. J Evans and V. A. Wall (eds.), *Beyond tolerance: Gays, lesbians and bisexuals on campus*. Alexandria, VA: American College Personnel Association.
- **Windmeyer, Shane and Pamela W. Freeman** (ed.). *Out on Fraternity Row: Personal Accounts of Being Gay in a College Fraternity*. 1998. Resources related to Same Gender Loving People of Color Issues
- **Ambiente Joven**. (<http://www.ambientejoven.org/>) (website for Latino/Latina LGBT/SGL youth.)
- **Bergmann, Emilie and Paul J. Smith** (ed.). *Entiendes? : Queer Readings, Hispanic Writings*. Duke University Press. 1995.
- **Black Stripe**. (<http://www.blackstripe.com>) (website pertaining to African Americans and contains the “Black-list” bios of current and historical Black individuals who were same-gender-loving.)
- **Boykin, Keith**. *More River to Cross: Black and Gay in America*. Doubleday. 1998.
- **Boykin, Keith**. *Respecting the Soul: Daily Reflections for Black Lesbians and Gays*.
- **Brandt, Eric**. *Dangerous Liaisons: Blacks, Gays, and the Struggle for Equality*. New Press. 1999.
- **Brown, Lester B** (ed.). *Two Spirit People: American Indian Lesbian Women and Gay Men*. 1997.
- **Chavez-Silverman, Susana** (ed.). *Reading and Writing the Ambiente: Queer Sexualities in Latino, Latin American, and Spanish Culture*. University of Wisconsin Press. 2000.
- **Constatine-Simms, Delroy** (ed.). *The Greatest Taboo: Homosexuality in Black Communities*. Alyson Publications. 2001.
- **Eng, David**. *Q & A : Queer in Asian America (Asian American History and Culture)*. Temple Univ Press. 1998.
- **LLEGO**. National Latina/o Lesbian, Gay, Bisexual & Transgender Organization. <http://www.llego.org>.
- **Moore, Lisa C.** (ed.). *Does Your Mama Know? An Anthology of Black Lesbian Coming Out Stories*. 1998.
- **Munoz, Jose Estaban**. *Disidentifications: Queers of Color and the Performance of Politics*. University of Minnesota Press. 1999.
- **Riggs, Marlon** (dir.) *Tongues Untied*. (a film that focuses on issues regarding SGL African-Americans and homophobia.)

(Source: Worcester Polytechnic Institute Safe Zone Manual)