Demystifying Homosexuality in Schools in the Chaudière-Appalachia Region: An Aid to Intervention

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Public Health Office of Planning and Evaluation
Chaudière-Appalachia Region
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Writing and Research

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1. The Context

The Community Health and Social Service Centres and the Public Health Planning and Evaluation Office of Chaudière-Appalachia agreed to implementing an awareness campaign in the schools about homosexuality and bisexuality that would target 14 to 20 year old students.

The school campaign was one of four parts of a STD and HIV/AIDS prevention project aimed at the homosexual and bisexual communities of the region. The project began in 1995. The first part focuses on training front line personnel (doctors, social workers, etc.). Its goal is to keep professionals who work with homosexual clients better informed about the reality of homosexuality thus improving the efficacy of the professional-client interaction. The second part sets up discussion and self-help groups. These groups are intended to serve the gay community and their families. These groups covers all sorts of areas including issues like self-esteem or how people live their lives with regard to their sexual orientation, as well as sexual health. The third element involves setting up a toll-free telephone service for anyone with specific needs related to homosexuality or bisexuality.

2. Survey Problems of Homosexuality

There is little in the way of hard statistical data on homosexual and bisexual populations. Most data have serious limitations. Respondents are often reluctant to reveal their homosexuality or wish to conform to a normative majority thus explaining, in part, why it is so difficult to estimate the population.

It is generally accepted that about 10% of the population is homosexual. That would represent about 30,000 people in the Chaudière-Appalachia Region. Appendix 1 offers estimates generally considered to be the most reliable in this area.

The researchers recognize homosexuality as a normal element on the spectrum of human sexuality. Further, the size and diversity of the population are such that it is important to recognize the specific problems these people experience, especially in the areas of health and welfare.

Recently, in its report “From Illegality to Equality”, the Human Rights Commission highlighted the experience of homosexuals and made the following recommendations, among others:

Recommendation 4

That the educational sector include in programs of health and social services an element dealing with homosexuality in its current social context.
Recommendation 13

That schools and professionals corporations include in training offered to students and to members who work with young people, an element dealing with problems that young people who are members of sexual minorities experience.

2.1 Young Homosexuals and Bisexuals and their Social Context

- The 1993 study by the Human Rights Commission shed light on a broad range of problems that young people confront when they are part of a sexual minority. The key elements of that study are set out here.
- Homosexuality is often thought of as immoral, sometimes even pathological in our society. It is held up to ridicule and scorn and pushed to the fringes of the mainstream. Gays, lesbians and bisexuals are often judged poorly.
- Homosexuals often must struggle with being rejected, excluded, harassed and sometimes even physically or verbally abused.
- In rural areas the isolation that is felt is accentuated by a lack of support facilities and by the near total absence of services that can accommodate the needs of a gay clientele.
- Adolescence is a very intense developmental period, in terms of personality and identity, no matter what one’s sexual orientation. Though for many young homosexuals adolescence is a most critical time because of the stress of coming to terms with their sexuality and dealing with their families and peers at the same time.
- To be different, to be part of a minority, is especially tough for young homosexuals who find themselves, like their straight friends, in the midst of an identity crisis.
- Surveys have shown that 75% of gay and lesbian students experience negative reactions at school. Such negativity expressed by their peers only reinforces feelings of inferiority, a sense of need and a predilection to self-destructive behaviour. Even the 1993 study by the Human Rights Commission revealed a prevalence of scornful attitudes towards gay and lesbian students among their peers and teachers.
- The study also demonstrated the lack of health and social services designed to meet the particular needs of a gay clientele. This leads to some failing to seek out assistance, fearing they will be rejected.
- A socially hostile environment pushes young homosexuals to live out their sexuality under the cover of anonymity, unable to accept their sexual orientation and leading to the fostering of low self-esteem.

2.2 Health and Welfare Problems

- It is broadly accepted that most of the mental health problems of homosexuals, especially homosexual youth, arise out of the social stigma associated with being gay in our society.
- Problems of low self-esteem and the ostracism of gays both contribute to unhealthy attitudes about sexuality and can lead to depression and sometimes even to suicide. It is important, because of this, to intervene.
Risky Sexual Behaviour
- In Canada the group most affected by HIV infection and Aids comprises men who have sex with men (MSM). More than 75% of the registered Aids cases are of this group.
- The latest study of the Quebec Aids Co-ordination Centre shows encouraging signs that preventive measures undertaken with this community have worked. Yet there is some disturbing evidence that younger gay men are more likely to engage in risky sexual behaviour than older bisexual and homosexual men. Moreover young gay men who are just coming out and men demonstrate greater risk of contracting HIV/AIDS.
- Most recent studies indicate that a positive self-image contributes to people protecting themselves in adopting safer sex practices whereas low self-esteem may be considered a risk factor.
- In the 1996 report the Aids Co-ordination Centre recommended that an important step in getting more people to adopt safer sex practices would be for society to move toward greater social recognition of men who have sex with men. Action must be increasingly targeted to the social context in an effort to better comprehend how work on these parameters may contribute to individuals assuming control over their own health.

Alcohol and drug abuse
- Many studies show that young people are at greater risk when it comes to alcohol and substance abuse.
- Alcoholism and drug addictions are prevalent among homosexuals.
- Additionally, homosexuals are less likely than others are to seek out help for the addictions for fear of having to delve into issues about their sexual orientation.

Homelessness
- According to one American researcher (Kruks), gays and lesbians are likelier than the general population to be homeless. He demonstrated an overrepresentation of homosexuals among the homeless that varies between 25 and 40%, depending on the city.

Suicide
- According to a study of the US Department of Health and Human Services written by Gibson, et. al., suicide is the number one cause of death among young gays and lesbians. They account for 30% of all adolescent suicides.
- The same study indicated that close to 40% of youth suicides are related to issues around sexual orientation.
- It was calculated that the risk of suicide among young gays and lesbians is three to six times greater than among their heterosexual peers. Most gay and lesbian suicide attempts occur in youth and are two to three times more likely than in the heterosexual population.
- Another writer (Remafedi) demonstrated that half of the suicides recorded in a group of 29 homosexuals could be traced directly to trouble in accepting their sexual orientation. Thus suicide is more likely in those people who have been unable to establish a positive gay identity.
Many of the studies cited by the Human Rights Commission concluded that issues around sexual orientation lay at the cause of attempted suicide and suicidal thoughts among youth. One study showed that most attempted suicides occur in the under 20 age group.

Being different, social isolation, harassment, potential for violence, family ostracism all contribute to heightening the risk.

3. Proposed Intervention

Overall the project’s objectives aim at a broader target than simply short-term goals of preventing the spread of STDs and HIV. The project aims to set up programs with a goal to improving self-esteem among homosexuals and bisexuals thus ultimately inducing that population to adopt and maintain safer sex practices.

3.2 Target Population

Young people between 14 and 20 at the secondary 3, 4 and 5 levels and junior college.

3.3 Program Goals for the Schools

A) Sensitise and inform students and teachers about homosexuality with the hope of lifting taboos and breaking down prejudice and thus:

- Create an environment that contributes to the well-being of homosexuals and bisexuals
- Promote the development of a positive self-image among homosexuals leading to a more ready acceptance of their sexuality.

B) Offer support to youth that are troubled by their sexuality and guide them to the resources available in the region.

3.4 Program Description

The program will take the form of workshops in secondary schools and colleges, private and public.

The leaders are gays and lesbians who will have been trained in this sort of intervention and will be regularly evaluated.

The goal of the meetings is to inform students about STDs as well as about homosexuality. Through personal anecdotes and role playing students will be introduced to concepts and situations intended to lessen their concern and help them with some of the difficulty they may be experiencing. They will also learn about the sorts of assistance available to them.

Holding workshops has proven successful in other regions of Quebec. Appendix 2 offers the workshop outline, Appendix 4 surveys some reactions to this method as practised at other schools, and Appendix 5 is a plan for setting up workshops.
3.5 Training for People Working in Schools

No matter what their background, many people who work with youth have little in the way of real knowledge about homosexuality. This knowledge gap contributes to perpetuating prejudice that may lead to behaviour patterns that make integrating homosexuals at school more difficult and impedes their own acceptance of their sexuality. So it is important for the success of the program that as many people as possible that work in the school environment be able to benefit from training.

A free training session provided by the Quebec Aids Co-ordination Centre is designed to improve what professionals know about the reality of homosexual and bisexual life as well as teach them about how stigmatising arises. It aims to make the professional comfortable in dealing with gay clients.

Training sessions were provided on several occasions last year to professionals in the health and social service network and were greatly appreciated.

Appendix 6 offers more information about the training sessions as well as instructions on how to register.

Conclusion

To summarise:

Homosexuals and bisexuals have their own health and social welfare issues that arise, in large measure, out of a hostile social environment.

Adolescence is a particularly critical period in life. Youth have a hard time acknowledging their sexuality and belonging to a sexual minority. It becomes important to intervene in the school environment to make sure that the resources are available that will allow them to better adapt to their sexual orientation and thus reduce their problems of health and well-being.

Critical to this is training professionals who work in schools to be more sensitive to and aware of homosexuality so they can assist in combating prejudice and ignorance. That way they can actually help youth come to terms with their sexuality which exists on the margins of society. Training sessions are therefore offered to all who work in the schools with young people.
Appendix 1

Summary Table on Homosexual Demographics

Comparisons between North American Reports

Men having felt homosexual desire.

<table>
<thead>
<tr>
<th>Bisexual Men</th>
<th>Homosexual Men</th>
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Woman having felt homosexual desires.

<table>
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<tr>
<th>Bisexual Women</th>
<th>Homosexual Women</th>
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<The data contained in these three studies are probably the most reliable. According to Kinsey homosexuality and heterosexuality are poles on a continuum. He built a scale where people are categorized from 0 (exclusively heterosexual with no homosexuality) to 6 (exclusively homosexual).

Thirty years later Kinsey’s findings were validated by Shere Hite: “...11% of all the men surveyed declared themselves homosexual. Among women, 9% said they were bisexual and 8% homosexual; that, in fact, is the only real change compared to Kinsey’s research which evaluated that number at roughly half.” (Dorais, 1993, p. 30) Samuel and Cynthia Janus showed that in terms of sexual practice, 5% of women and 9% of men that they frequently or exclusively had homosexual relations. Dorais notes just how similar the studies are in describing homosexual and bisexual reality. That reality seems relatively stable over several decades.

While attempting to establish as close an estimate as possible of the homosexual and bisexual population, the researchers conclude that the number and diversity of that population (youth, parents, adults, seniors, immigrants) are significant enough to warrant attention from various strata of the health and social services.
Appendix 2
Describing the Workshop

Framework:

- The workshop is geared to secondary 3, 4, and 5 and college level students.
- Two animators generally take part in the workshop: one gay, one lesbian. One of them will conduct the workshop.
- Length: between an hour and an hour and a quarter for secondary schools
  More than two hours at a college, if possible.
- The workshop takes place within the context of a mandatory course.
  It may also be given in a class on religious instruction, morals or FPS [AC1]
- The students are aware that the animators are gay and are informed about the nature of the workshop.
- The teacher is present.
- The CLSC representative or resource person need not take part.

The Workshop Outline:

- The animators give out information about services for homosexuals available in Chaudière-Appalaches: for example, the phone number for a discussion group or the 1-888-275-2233
- They describe the major goals of the program.
- For workshops lasting more than 75 minutes, a questionnaire is given out at both the beginning and the end.
- The animators talk about their own experience, about what coming out was like for them, each talking for about 5 minutes.
- The remainder of the session is left to students’ questions. The animators answer the students referring to their own lives. There is no debate about theory and nor on religious teachings.

Themes Raised in Discussion:

- Coming Out:
  - The animators talk about themselves and their friends and the various sorts of problems they faced while remaining closeted, contemplating suicide, drinking too heavily, taking drugs, negativity at school, fear of being rejected, anxiety about telling their parents and the moment that led them to be open about their homosexuality.

- Love and Relationships
- Sex:
  - Learning and adopting safer sex practices
  - Issues around deciding to be open about homosexuality, what are the consequences, what impact does it have on self-esteem
  - Sex, sexually transmitted diseases, avoiding or preventing transmission of STDs.
  - Being faithful.

- Social Life:
  - Social activities and where to meet other people
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- Heterosexism and homophobia, attitudes which reinforce homosexual feelings of inferiority and contribute to self-destructive behaviour.

- Prejudices
  - A discussion about sodomy and about other stereotypes of homosexual behaviour

The Animators:

The animators are gay and lesbian members of the Social Action Research Group (Groupe de recherche et d'intervention sociale).

The Group offers several types of training activity to ensure that animators are prepared to represent all aspects of the community and ready to present a clear message to the students. The animators receive two and a half days of training and are given the manual on demystifying homosexuality before they meet a class.

The Primary Goals of the Group:

- Demystify homosexuality, which is to say work to reduce prejudice towards and misconceptions about homosexuality
- Promote acquiring and maintaining safer sex practices
- Encourage better self-esteem and greater acceptance of one’s sexuality.
- Provide support to youth who are having a hard time dealing with their sexuality and direct them to the resources available in the region.

Comments Gathered During a Demystification Session at a Quebec School

- Thank you, you’re showing the way for our sons and daughters.
- Very interesting. Since people are often shy about these topics, you can go further and talk about more than prejudice, STDs, etc.
- It’s very informative to have answers to questions that are often difficult to pose.
- It’s been an eye-opener and makes me less afraid.
- The structure of the meeting is really well thought out in that people ask their own questions. They can learn if their knowledge about sexuality, STDs, or homosexuality is grounded in truth or lies.
- The session was very interesting. You answer questions naturally and that puts us at ease. Homosexuality is much easier to accept when it’s explained properly.
- It was very interesting. You’ve taught me about STDs and there are lots of things I understand better now. You should continue doing this.
- It was pretty extraordinary. You were perfect and I admire both of you a lot for your candour and your willingness to share your lives with people to help them.
- You’re mature, you’re wise. You understand lots of things. You’ve come to a point that’s way beyond where most people are. I really have a lot of respect for you. I wish I could’ve signed this so you might see in my eyes what I have to say. You were very good speakers, your ease put others at ease.
- Even though I have a gay friend, I learned a lot. You were very relaxed, that put me at ease.
- I found the session a very good experience because you were very open and understanding. Keep on with these sessions, they are vital.
I liked the directness and spontaneity of the animators. Congratulations. Keep up the good work.
I realized as the session went on that my prejudices were falling away. Congratulations.
It takes a lot of courage to say what you did. I admire people like you.
The atmosphere was relaxed. It was not uncomfortable. All the topics were dealt with seriously but with humour too, and that’s good. Your openness is remarkable. I learned a lot and I think your objective of “demystifying” was reached.
I found the course very instructive and interesting and I think it’s really important to sensitize people to homosexuality and to STDs and you did that very well. I didn’t notice the time pass, I was absorbed all the way along and it was very pleasant.
I loved the session. It took apart some myths and offered information on community resources. It was the first time I’ve encountered homosexuals who stand up for themselves.
A pleasant and enriching experience to be able to ask real questions without feeling any embarrassment.
You answered questions frankly and succinctly with great openness. Congratulations, what you’re doing is great.
I can hardly believe that this is your first session. It was really good. Keep it up.
I found the session really interesting. You answered all the questions that had been troubling me. It was perfect.
I really used to be against homosexuals, but I think my point of view is changing.