Facilitator Training: Workshops for LGBTQ+ Youth & Allies











Objectives

- Learn specific ways to create and sustain affirming spaces for LGBTQ+ youth.
- Identify LGBTQ+ youth resources in San Diego.
- Review curriculum: "Love Your Body,"
 "Safer Sex," and "Healthy Relationships."

Housekeeping



- ▶ Bathrooms
- ► Cell phones/laptops
- ▶ Snacks
- Lunch
- Budget strings for subs at end of day

Group Agreements

- Respect
- Don't Yuck My Yum
- One Diva, One Mic
- Step Up, Step Back
- Confidentiality
- Use "I" Statements
- Oops and Ouch
- Don't call anyone out or put someone on the spot in front of the group



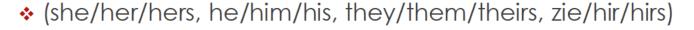
Introduction



Please share:



- Name
- ► Gender Pronouns





- School and Position
- ▶ Plan for Using Curriculum







LGBTQIA



Sexual Orientation v. Gender Identity

Sexual Orientation

- A person's romantic attraction to people of the other and/or same gender, other gender.
- Sexual orientation is about whom we're attracted to. Gender identity is about who we are. Trans people can have any sexual orientation.

Gender Identity

- A person's genuine, internal, deeply-rooted identification as male or female.
- All people have a gender identity, not just transgender people.

Sex and Gender

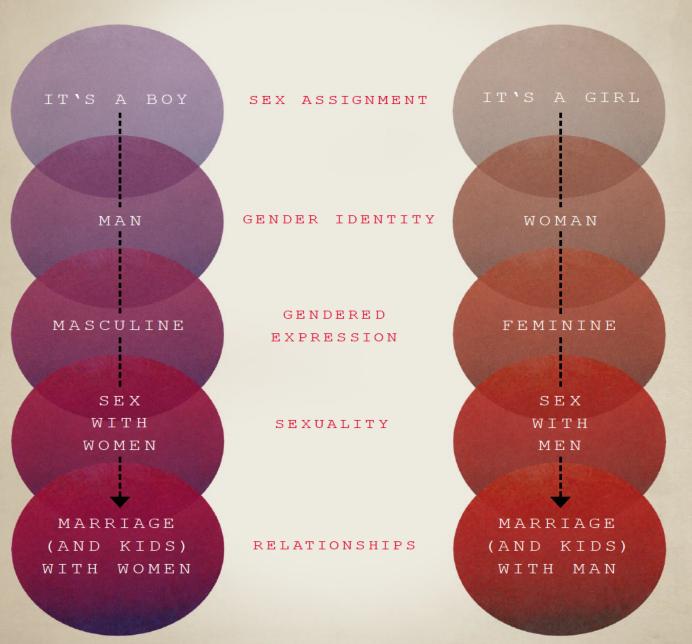
SEX

- Assigned at birth
- Printed on child's original birth certificate
- Based on physical characteristics such as hormones, chromosomes, genitals, etc.

GENDER

- Attitudes, feelings, characteristics, and behaviors that a given culture associates with being male or female and that are often labeled as "masculine" or "feminine."
- Gender characteristics can change over time and are different between cultures.

PILLARS OF HETERNORMATIVITY



Gender Binary

- ▶ The Gender Binary: is a social construct that situates "male" and "female" as synonymous with "man" and "woman" and dictates how people assigned to these categories should act. This limited system excludes and oppresses trans, nonbinary, intersex, and gender-nonconforming people.
- ▶ Cis-gender: Describes someone whose sex assigned at birth aligns with their gender identity.

Transgender

- ▶ Umbrella term for people whose gender identity differs from the sex or gender assigned at birth, and for those whose gender expression differs from what is culturally expected of them (Gender Non-Conforming).
- Transgender woman, transgender man, genderqueer, non-binary, twospirit

Diversity Within the Trans Community

- Sexual Orientation
- Bodies
- ▶ Transitions
- Ability to "pass" & desire to do so
- Plus every other kind of diversity (racial, cultural, ability, etc.)

How to be an Ally to Trans People

- Respect all gender identities
- Don't make assumptions about anyone's gender or sexuality
- Un-learn gender policing
- De-gender bathrooms
- Take the burden off of trans people
- ▶ PGP: Personal Gender Pronouns are what a person should be referred to as.
- Respect everyone's right to define themselves!
- Others??

Privilege

- Benefits members of dominant groups at the expense of members of target groups
- Typically invisible to people who have it.
- Results in Institutional Power.

Heterosexual and Cisgender Privilege:

Societal assumption that all people are heterosexual and/or cisgender.

Civil rights and social privileges that a heterosexual/cisgender person automatically receives.

Let's Break it Down

- 40% of all homeless youth identify as LGBT.
- ▶ LGB youth are 4 times more likely, and questioning youth are 3 times more likely, to attempt suicide as their straight peers.
- Nearly 1/5 of students are physically assaulted because of their sexual orientation.
- ▶ 40% of LGB youth attempt suicide.
- ▶ 1/3 Transgender youth attempt suicide.

Let's Break It Down

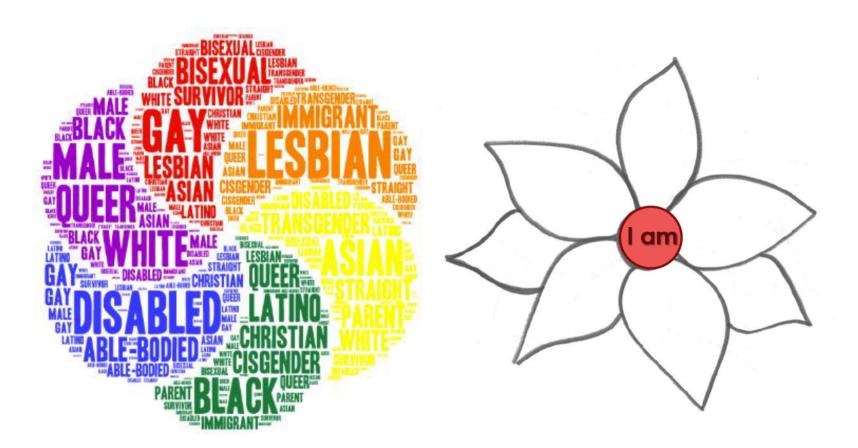
- Of those who expressed a transgender identity or gender non-conformity while in grades K-12:
 - ▶ 78% experienced harassment
 - ▶ 35% experienced physical assault
 - ▶ 12% experienced sexual violence
 - ▶ 15% said harassment so bad it led them to leave school.
- Respondents harassed/discriminated against by teachers in K-12 settings (33%) showed dramatically worse health outcomes than other respondents
- ▶ **High rates of family rejection**: 57% experienced significant family rejection and 51% of those people had attempted suicide.

Intersectionality

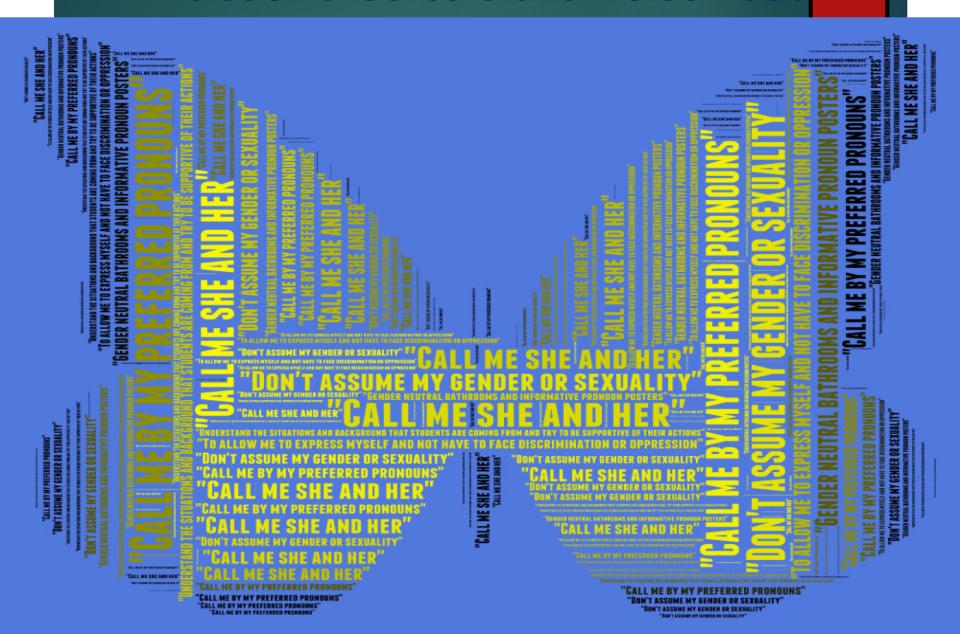
- Racism, classism, heterosexism, etc. do not exist independently.
- Multiple forms of discrimination interrelate creating a system of oppression.



Identity Petal Activity



What can we do to create spaces that make students feel safe and welcomed?



Foster Safe Environments

- Use inclusive language
- Respect preferences, ask when unsure
- Validate individuals' experiences
- Listen
- Be comfortable with the terms
- Recognize multiple ages, races, abilities, sexualities, genders, class backgrounds etc

"Think about one person that made you feel welcome and safe. How did they do that?"

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Where Are You On Your Ally Process?



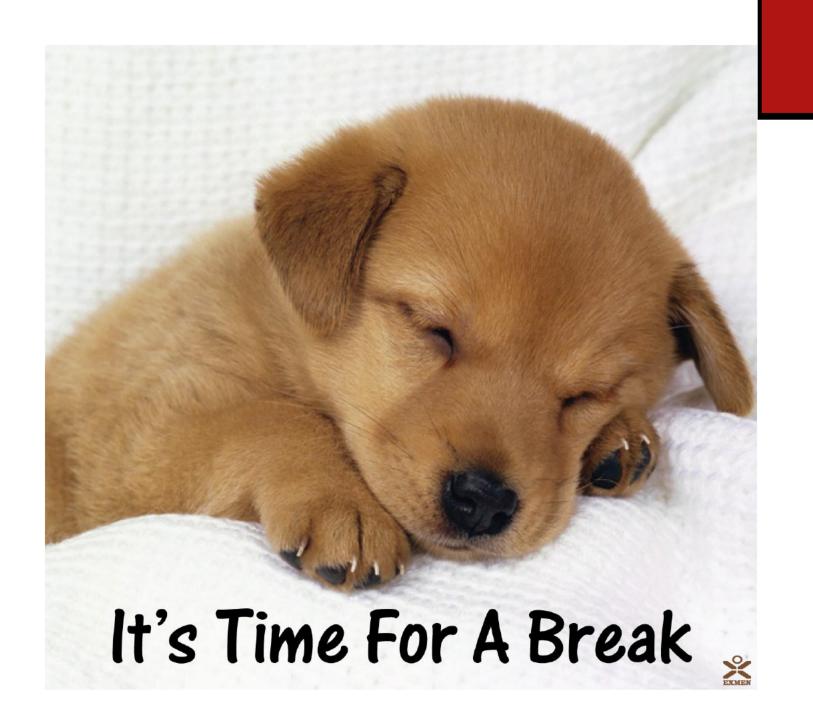
OUT for Safe Schools

- Visual display of support
- Lets students know where "safe spaces" exist
- District encourages staff to publicly identify as supportive LGBTQ+ allies
- Resources on back of badge

www.sandiegounified.org/safe

www.sandiegounified.org/LGBTQ+





Curriculum Implementation

Workshops for LGBTQ Youth & Allies

Love Your Body, Healthy Relationships,

&

Safer Sex

Parent Notification

- CA Ed Code requires parent notification for all comprehensive sexual health and HIV/AIDS prevention education.
- Parents have the right to review curriculum prior to the instruction.
- Parents have the right to opt their child out of the lesson.
- Parents must be notified at least 14 days prior to instruction.

USE PROVIDED TEMPLATE TO NOTIFY PARENTS!

Why LGBTQ+ Youth Curriculum?

- Unique pressures and stigma around body image, relationships, and sex.
- Absence of LGBTQ+-specific sex education.
- ▶ 169 San Diego LGBTQ+ youth identified preferred topics for workshops:
 - "Sex education" selected 85 times
 - "Communicating with your partner" selected 77 times



LGBTQ+ Supportive Curriculum

- ▶ Students in schools with a curriculum that **specifically addressed LGBTQ+ relationships and situations** were more likely to report that their classmates were somewhat or very accepting of LGBTQ+ people than other students (66.7% vs. 33.2%).
- Students with greater numbers of supportive staff had a greater sense of being a part of their school community than other students.
- Students with a GSA/LGBTQ+ Club in their school report hearing fewer homophobic remarks at school.
- Students with a GSA/LGBTQ+ Club were less likely to feel unsafe because of their sexual orientation than those without a GSA (54.9% vs. 70.6%).

Setting Up the Space

- Set up chairs/desks in a circle, if possible
- Keep it interesting and engaging
- Multi-directional learning
- We are all experts in our own experiences
- YOUTH CENTERED!



Group Agreements and Introductions

Why are these important?

- Culture of accountability and respect
- Expectations and tone
- Gives value to all voices
- Give students an opportunity to create common agreements

Facilitation Do's

- Use gender pronouns requested by students
- Give everyone the chance to speak
- Allow youth to pass on any activity, but ask that they be part of the circle
- Put student's thoughts and concerns at the center of the conversation
- Use eye contact to make sure everyone feels seen and part of the group

Facilitation: Don'ts

- Force anyone to speak
- Take it personally if people talk over each other
- Answer a question you don't know
- Allow a few students to dominate
- Out anyone in front of the group
- Expect to get through everything

Mental Health & Triggers

- Mandated reporters: child abuse, self-harm, or harm to others
- Potential trigger topics: body image, abusive relationships, consent/rape culture, STD's
- Check in with students afterwards
- Let students know if you can be a resource
- Refer to OUT badge and district webpages for resources
- Know about local mental health resources (see resources in manual pages 55-56)





Handling Difficult Situations

- With your table group, discuss how you might handle the following situations:
 - Shy students who do not want to participate
 - A few students dominating the space
 - Students get off topic
 - Student asks you a question you do not know
 - Students calling other students out
 - Student is triggered or becomes upset by a certain conversation

Lesson Contents

Each lesson contains:

- Goals
- Objectives
- Lesson Outline
- Materials/Prep
- Key Messages
- Guidance for Instructors
- Lesson broken down by activity and time for each
- Additional Activities
- Summary/Evaluations
- Handouts

Workshops vs. Lessons

- ► Each workshop has a specific focus and contains multiple activities that support the focus.
- Each workshop can be taught over numerous meetings.
- Workshops are intended to be taught:
 - Within a GSA/LGBTQ+ Club or,
 - As an addition to the district-required sexual health curriculum within a content-area classroom by a trained teacher.

Love Your Body

- Why is this significant to the LGBTQ+ community?
 - Unique pressures faced by the LGBTQ+ community and sub communities
 - Common body image challenges
 - Multiple identities impact body image: race, age, ability, sexuality, gender
 - Gay and bisexual men experience the highest rates of disordered eating, and LGBTQ+ adolescents experience higher levels of disordered eating and negative body image than their heterosexual peers.
 - LGB students were 3 times more likely than heterosexual students to report disordered eating behaviors, taking diet pills, and vomiting or taking laxatives to lose weight (SDUSD 2015 YRBS).

Manual Page 4

Love Your Body - Objectives

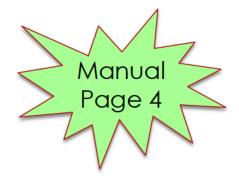
OBJECTIVES

After completing the lesson, participants will be able to:

- Identify and critically analyze factors that affect body image.
- Understand the importance of a validating community in changing negative body image.
- Identify ways to overcome stigma regarding LGBTQ bodies, gender and sexual variance in order to create a diverse, validating community.
- Describe the connections between body image, self-esteem and sexual health. (If Session 2 is completed.)

GOAL

To develop a liberating space for a diverse group of LGBTQ and allied participants to discuss body image, social pressure and other stresses that affect self-esteem.



Love Your Body – Lesson Outline

LESSON OUTLINE

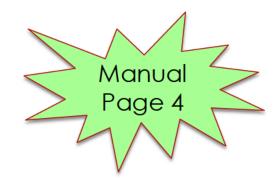
This lesson is designed to include all activities in the order listed below. However, based on the time limits and questions raised by participants, it may be necessary to alter the lesson. Please be sure to discuss the key messages outlined on the next page.

- 1. Lesson Introduction
- 2. Video Clip and Discussion
- Group Activity: Positive Body Image
- 4. Closing Group Discussion
- 5. Summary, Questions, Evaluation

Additional Lesson Materials: Body Image & Sexual Health Supplemental Activities

MATERIALS & PREPARATION

- Video Clips and AV Equipment
- Paper (for activity)
- Art Supplies (colored pencils, markers)
- Evaluation Sheets
- Lesson Handouts and cards/brochures about your organization's services.
- Flip charts (Optional)



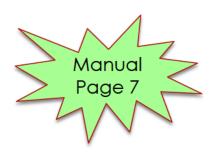
Love Your Body - Key Messages

KEY MESSAGES OF THE LESSON

- Everyone has insecurities. We are constantly bombarded with images of body and gender expectations
 that are Photoshopped and unrealistic, which puts unreasonable pressures on all of us. While no person
 is confident about their body at all times, these pressures can be especially difficult for LGBTQ
 individuals, people of color and differently abled people, who are exposed to limited positive images of
 themselves in popular media.
- It's important to be critical of the images we see in the media and the ways those images affect how we
 feel about ourselves and our bodies.
- It's okay to love your body, and this is a space where we can start imagining what it would be like to really love ourselves and our bodies. Body positivity is a process that we can each learn and practice.
- Creating body-positive spaces and challenging insensitive comments are ways to empower ourselves in the face of negative pressures from outside. They are great ways to build community and support a diverse and affirming LGBTQ community.
- Body image and self-esteem can impact our physical, sexual, and emotional health.

Opening Discussion

- What does body image mean to you?
- What factors influence body image?
- ► Talk to a partner: What does a person who is lesbian, gay, bisexual, transgender, or queer look like?
 - How does LGBTQ identity relate to body image?
 - Do stereotypes come to mind?
 - What are some issues with body image that might be unique to the LGBTQ community?



Video and Discussion

- Straightlaced: How Gender's Got Us All Tied Up
- What did you notice about the video?
- What did you like/dislike about the messages of the video?
- Could you relate to the people in the video?
- Use discussion questions from the Manual or come up with your own.



Group Activity: Positive Body Image

- Draw a self portrait and write up to 5 things that you like about your body (can be things your body has, does, is capable of, etc.).
- Share with your table mates:
 - What was this like?
 - Was it difficult or uncomfortable?
 - ♦ Why or why not?





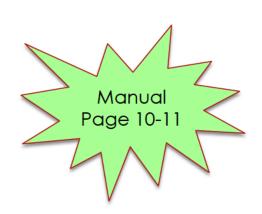
Closing Discussion

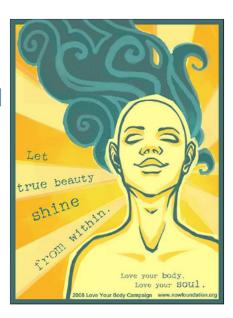
- Lead final discussion emphasizing individual and collective actions to overcome negative body image and self-esteem.
- Questions to guide discussion:
 - Why is it important to take a stand against degrading comments?
 - Why is it important to be aware of stereotypes that we make?
 - Why is it important to strives towards positive body image?



Supplemental Topic: Body Image and Sexual Health

- What are the relationships between body image, self-esteem, and sexual health?
- How might self-esteem play a role in sexual behaviors, communication, consent, etc.?
- How does the media influence the way we feel about our bodies and self-esteem?





NOWfoundation – Love Your Body Campaign

Lesson Reflection



What questions came up?

What was challenging?

How did you handle challenges?

What other challenges do you foresee coming up in a bigger group or with youth?

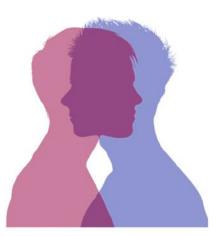
How would you address them?



Why Healthy Relationships Curriculum?

- ▶ 22% of LGB students report having ever experienced being physically forced to have sex against their will, compared to 6% of heterosexual students.
- ▶ 16% of LGB students report that "the person they were going out with had ever threatened them, limited their activities against their will, or made them feel unsafe in any other way", compared to 5% of heterosexual students.
- Avoid closeted and abusive relationships.
- Help to identify and report abuse.
- Provide guidance on seeking healthy relationships.

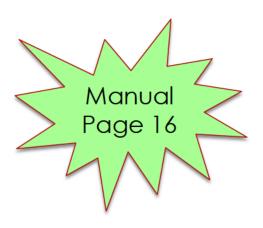




Healthy Relationships

GOAL

Participants will develop skills and enhance their ability to communicate regarding relationships, sex and protective behaviors.



OBJECTIVES

After completing the lesson, participants will be able to:

- Identify factors that contribute to a healthy relationship.
- Demonstrate assertive communication with a partner about personal boundaries, condom or contraceptive use, and STI testing.
- Identify ways to reduce sexual risk through partner communication and boundary setting.
- Define sexual consent and understand their right to say no to sex.

Healthy Relationships – Lesson Prep

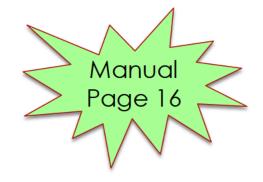
LESSON OUTLINE

This lesson is designed to include all activities in the order listed below. However, based on the time limits and questions raised by participants, it may be necessary to alter the lesson. Please be sure to discuss the key messages outlined on the next page.

- 1. Lesson Introduction
- Group Discussion: Healthy Relationships & Communication
- Group Activity: Role Plays
- Group Activity: Understanding Consent
- 5. Summary, Questions, Evaluation

MATERIALS & PREPARATION

- Lesson Handouts and cards/brochures about your organization's services
- Printed scenarios for activity
- Evaluation Sheets
- Flip chart paper (or classroom chalk/white board)
- Markers or chalk



Healthy Relationships – Key Messages

KEY MESSAGES OF THE LESSON

- Healthy relationships are characterized by trust, respect, and honest communication. Jealousy, manipulation and abuse are warning signs of an unhealthy relationship.
- An important part of any healthy relationship is open, honest communication. In romantic and sexual relationships, open communication is important for both our emotional and physical health.
- It's your partner's responsibility to respect your boundaries, and your responsibility to respect theirs.
- Communicating about preventing STIs and pregnancy <u>before</u> having sex is important for protecting
 yourself and your partner. It is important to use clear, direct messages when discussing your relationship
 status, STI testing, and what contraceptives you plan to use.
- Use an assertive communication style. This includes making "I statements," asking for what you want, saying no to what you don't want, and expressing yourself honestly.
- You have the right to consent, or not consent, to any sexual behavior with a partner, regardless of the type of relationship you have and whether you have had sex together in the past.
- Open communication is the way to ensure that both partners actively consent to any sexual behavior.

GUIDANCE FOR INSTRUCTORS

Never assume the gender identity, sexual orientation, sexual experience level or practices of participants. Do not "call out"/direct questions at individual participants based on stated or assumed practices or identities.

Be respectful of participants' preferred language regarding personal gender pronouns and identity terminology.

Use gender neutral terms throughout the lesson (unless otherwise indicated, as in the scenarios). For example, when discussing relationships refer to partners rather than boyfriends/girlfriends.

Don't push individual participants to share information about their identit(ies) or experiences, but if they choose to, validate and support them. Facilitators should acknowledge the realities of stigma and discrimination and how this may affect individuals differently.

Avoid ever giving misinformation. If you are unsure of the answer to a question, look it up and report back to participants during your next session together.

If you are uncomfortable with the content of a participant's question, validate the importance of the question and your limitations in answering it. Refer them to one of the local clinics or youth programs listed on the resource handout.

Use your discretion in terms of how long to spend on each section. If you are presenting at a GSA, be aware that different GSAs have meetings of different lengths; if you are dividing the lesson into two sessions, try to find a natural stopping point in the discussion to end on.



Group Discussion

Healthy
Relationships &
Communications

What does the term "Healthy Relationship" mean to you?



FLASH

Family Life and Sexual Health, High School

FLASH

Assertiveness Handout

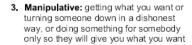
Four Types of Communication Styles

 Aggressive: taking what you want, threatening or forcing a person to give you something, or saying "no" in a way that puts the other person down or violates his or her rights





 Passive: not speaking up when you'd like something or giving in and saying "yes" when you don't really want to, in order to be liked or not hurt the other person's feelings





Public Health - Seattle & King County ■ @1988, Rev. 2011 ■ www.kingcounty.gov/health/flash

Lesson 9 - Page 19



 Assertive: asking for what you want or giving people an honest "no" to things you don't want; not using people and not letting yourself be used by others

Important assertive skills include

- Making "I" statements ("I think ...", "I want ...")
- Expressing opinions ("I believe ...")
- Saying "No" firmly but respectfully
- · Asking for what you want
- Initiating conversations
- Expressing positive feelings
- Expressing appreciation
- Stating your strengths and abilities ("I can ...")
- Making statements that express one's identity, culture, sexual orientation, etc. when one chooses to do so
- · Pay attention to word choice, tone of voice, and body language

Examples of some "I" statements

- . I don't like the way you are talking to me.
- I really appreciate that you care enough to stay with me even though I am not ready to have sex yet.









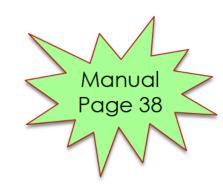
I Am LGBTQ. Is My Relationship Healthy?

You know your relationship is probably healthy if your partner:

- Respects your chosen gender pronouns or name.
- · Respects your boundaries.
- Gives you space to hang out with friends and family without thinking you're cheating.
- · Doesn't take your money or tell you what to buy.
- · Never threatens to out you to people.
- Never tells you you're not a real lesbian, gay man, trans person or whatever you identify as because you don't have sex
 the way they want you to.

My Relationship is Unhealthy or Abusive

If you're LGBTQ, you can face unique obstacles to seeking help. Know that you are not alone and there are places that can help. Chat with a peer advocate or check out our referrals at loveisrespect.org. If you're in an unhealthy or abusive relationship, you have many options -- including obtaining a domestic violence restraining order. Laws vary from state to state so chat with a peer advocate to learn more. Whether or not you're ready to end the relationship, consider creating a safety plan.



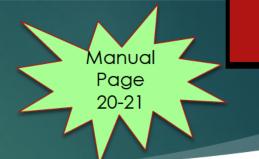
Group Activity

Partner Communication Role Plays

Review **Scenario** and be ready to act it out in a **Role Play**.



Role Play



- Get into pairs or groups and role play one of the scenarios.
 - Use the communication styles discussed in previous lesson.
 - Be ready to act out scenario.
- ▶ **As a large group**: Questions for Discussion
- What issues do you foresee when facilitating with students?





Group Activity

Understanding Consent

- Introduce the concept of consent.
- ► Show <u>video</u>.
- Distribute handout Consent Guidelines.
- Distribute to pairs:
 Consent Scenarios.
- Closing discussion.



Why an LGBTQ+-focused Safer Sex Lesson?

SDUSD Youth Risk Behavior Survey, 2015:

- 40% of surveyed LGB students report having ever had sex, compared with 32% of heterosexual peers.
- More than 6% report having had sex before the age of 13, compared with 3% of heterosexual peers.

Perceptions of risk for STIs:

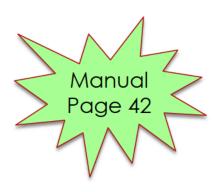
- Only 1/3 of young adults (18-26) who tested positive for an STI considered themselves to be at any risk.
- Perceived risk for STIs is low among LGBTQ+ youth, particularly among WSW.
- 60% of HIV-positive YMSM considered themselves to be at "low risk" for HIV contraction prior to learning their status.

Services youth can receive without permission from their parent/guardian		Can provider tell youth's parent/guardian?	
Birth Control Except Sterilization	Minors of any age	No Parental notification allowed only with consent of minor	
Pregnancy (Prev, Dx, Tx) Including inpatient care	Minors of any age		
Abortion	Minors of any age		
STIs, Contagious and Reportable Diseases (Dx & Tx)	Minors 12 yrs or older		
HIV Testing	Minors 12 yrs or older and assessed as competent to give informed consent		
Sexual Assault Care	Minors of any age	Yes In most cases, an attempt to notify parent/guardian must be made. 1.2	
Alcohol/Drug Counseling by Federally Assisted Treatment Program Including Impatient care	Minors 12 yrs or older 1,4	No Parental notification allowed only with consent of minor	
Alcohol/Drug Counseling by Non-Federally Assisted Treatment Program	Minors 12 yrs or older ^{3, 4}	Yes An attempt to notify parent/guardian must be made, except when provider believes it is inappropriate 6	
Outpatient Mental Health Treatment	Minors 12 yrs or older ⁵		

Safer Sex

GOAL

Participants will increase their knowledge of and perception of risk for STIs/HIV and learn how to protect themselves through safer sex methods.



OBJECTIVES

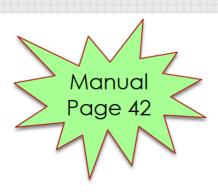
After completing the lesson, participants will be able to:

- Describe the transmission and symptoms of STIs/HIV.
- Accurately assess the risks associated with unprotected sex.
- Identify other aspects of safer sex, including regular testing and partner communication.

Safer Sex – Lesson Prep

MATERIALS & PREPARATION

- Index Cards: STI Risks Activity
- Evaluation Sheets
- Lesson Handouts and cards/brochures about your organization's services.
- Flip charts (optional)
- Markers (optional)



LESSON OUTLINE

This lesson is designed to include all activities in the order listed below. However, based on the time limits and questions raised by participants, it may be necessary to alter the lesson. Please be sure to discuss the key messages outlined on the next page.

- 1. Lesson Introduction
- Group Discussion: What is LGBTQinclusive Sex Ed?
- Presentation: STI 101
- 4. Group Activity: STI Risks
- Presentation: Safer Sex
- 6. Summary, Questions, Evaluation

Safer Sex – Key Messages

KEY MESSAGES OF THE LESSON

- While the prevalence of STIs varies across communities, every sexually active person is at risk for STIs
 regardless of race, class, gender, sexual orientation, or that of their partners.
- STIs spread through unprotected sex (oral, anal, vaginal, skin-to-skin contact) with an infected person.
- Some STIs can be cured with antibiotics; viral STIs, including HIV, can be treated but not cured.
- Having any STI puts a person at higher risk for contracting HIV.
- STIs are very common: 1 in 4 young people in California will contract an STI this year.
- The most common symptom of an STI is no symptom(s) at all.
- The only way to be 100% safe from STIs and HIV is to not have sex (abstinence).
- If a person decides to have sex, condoms and other barriers methods (such as dental dams) are highly
 effective for preventing many serious STIs including HIV.
- Regular STI/HIV testing and partner communication, along with the correct and consistent use of a condom
 or other barrier method, are important for safer sex.

Manual Page 43

Safer Sex – Lesson Framework

- Listen to what students hope to learn and discuss.
- Ensure that participants are receiving accurate information.
- Empower participants to have healthy sexual relationships.
- Language is important:
 - Sex is not the same as gender.
 - The only way to know someone's gender is by asking.
 - When talking about sex and anatomy, word choice is very important.

Group Discussion

What does "LGBTQ+-inclusive sex ed" mean to you?



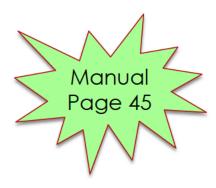
Sexually Transmitted Infections 101

Key Messages for Discussion:

- Sex can be fun and meaningful in a healthy relationship
- Not practicing safer sex can impact one's health
- One consequence of unprotected sex is contracting an STI/STD.

Presentation:

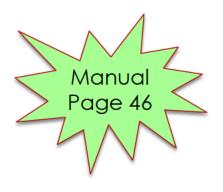
- Transmission
- Symptoms
- Prevention



Group Activity: STI Risks

To determine the spectrum of behavioral risks:

- ▶ 13 Volunteers
- Receive a card with a sexual act listed on it.
- Order yourself in a line from least risky to highly risky.
- Discussion is encouraged, help each other out!



Discussion

- ▶ What worked?
- What was challenging?
- ▶ Do you foresee other challenges when you facilitate this in your club/classroom?

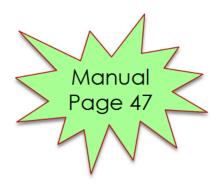
Presentation: Safer Sex

Key Messages for Discussion:

- Regardless of gender of partner, every sexually active person needs to protect themselves from STIs, including HIV.
- All sexually active people are at risk.

Presentation:

- Safer Oral Sex
- Safer Vaginal Sex
- Safer Anal Sex



Safer Sex – Additional Resources



2. Once the penis is erect, open condom package with your fingers. Don't use your teeth, or any sharp object, because you might accidentally tear the condom!



5. Hold the tip of condom and unroll until the penis is completely covered.

penis is still erect, hold the condorn at base of penis and carefully remove the condom without spilling any semen.

Wrap the condom in tissue, tie it in a knot and throw it away, (Don't ish the condom down the toilet)



8. Use a NEW condom for

9. If using lubricant, use a water-based one like KY Jelly



Teens' Rights to Reproductive and Sexual Health Services

What are my rights to birth control, HIV and STD testing, and privacy? Young people's access to birth control, confidential visits with

a healthcare provider, and HIV and STD testing vary from state to state. Visit www.plannedparenthood.org to find your nearest Planned Parenthood clinic. Or Google your state, county, and/ or community name and "Health Department" to find a local.

parents of the services they have provided you. Find the law in your state by visiting www.sexetc.org/state.

Clinics that receive a certain type of government funding are required by law to offer confidential services, including HIV and STD testing and prescriptions for birth control, to all young people. Over 4,600 clinics nationwide receive this type of funding. Planned Perenthood clinics, and many state and local health departments, hospitals, community health centers, and independent clinics offer confidential services. Some services offered by these clinics include:

- · Pelvic exams and pap tests
- . Safer sex counseling
- · Prescriptions for birth control Administering Deop-Provers (the shot) or inserting an IUD
- Counseling about abortion and abortion services.

Many clinics offer free or reduced services, and you can pay in cash. If you pay for your bill by using your family's health insurance, the bill may be sent to your parents. Some steps to make sure your visit is private are:

- · Call the clinic or healthcare provider before you go to ask about its policies.
- Tell the clinic staff how to contact you personally. · Ask about reduced pricing, and pay in cash.

Where Can I Get Help?

- screening. Or get info online: Use the testing site locator at www.hivtest.org (locates sites)
- which test for HIV, STDs, or both)
- · Search for your city or county health department
- · Find your local Planned Parenthood (www.plannedparenthood.org)

Visit www.amplifyyourvoice.org for more information about STDs and to get involved in youth activism around sexual and reproductive health and rights.

Where can I get condoms

You can get condoms for free at most clinics but you can also purchase them at any drug store regardless of how old you are. Condoms cost between \$5-\$20 per box. Make sure you check the expiration date on the box! The most common kind is allergic to latex, you can also get condoms made out of polyurethene. Lambskin condoms do not protect against STDs.

How can I talk about condoms with my partner? It can be hard to talk to a partner about condoms. But

unprotected sex puts you both at risk. Here are a few tips to make the conversation a success:

Know what you want and don't want. Don't engage in any sexual behavior that makes you uncomfortable, but always protect yourself. Remember, consistent and correct condom use reduces your risk of STDs and pregnancy.

Discuss abstinence, sex, and safer sex. Be honest about your sexual history and your sexual health. Discuss and make mutual decisions on your safer sex options. Go together to get tested for STDs. Educate yourself about safer sex options and make sure you are prepared to discuss them

State what you want, and don't want, clearly. Don't be afraid! You have the right to protect yourself and to state your needs. If your partner doesn't respond in a supportive way, then think about the relationship as a whole and if your partner respects and cares about you. No one should ever ask you to compromise your health and well-being!

There is a vaccine for HPV which can protect from genital warts and from the types of HPV that cause cancer. It is approved for both males and females ages 9-26 and must be given by a

Advocates for Youth

Advocates for Youth champions efforts to help young people make informed and responsible decisions about their reproductive and sexual health. Advocates believes it can best serve the field by boldly advocating for a more positive and realistic approach to adolescent sexual health.

Check out Advocates for Youth's websites

Advocates for Youth

www.advocatesforyouth.org

An online youth activism hub with information, resources, and advocacy opportunities www.amplifyyourvoice.org

Information and support by and for young women of color www.mysistahs.org

Youth Resource

Information by and for gay, lesbian, bisexual, transgender, and questioning youth www.youthresource.org

Advocates for Youth shall not be liable for any direct, indirect, incidental, consequential, or any other damages resulting from the use of the information contained herein.

2000 M STREET NW, SUITE 750 WASHINGTON DC 20036 USA T:202.419.3420 F:202.419.1448



STDs&HIV

get the facts protect yourself





Love your Body Evaluations

Table 1. Percentage of Respondents Who Reported "High" Content Knowledge Before and After the Lesson by Content Areas and Lesson				
	Before Lesson	After Lesson		
Love Your Body Lesson (N=80)				
I can identify and analyze factors in society that affect body image and self-esteem.	59%	95%		
I know at least one technique that I can use to improve my body image and self-esteem.	29%	83%		
I can explain the connections between body image, self-esteem, and sexual health.	43%	83%		

Healthy Relationships Evaluations

Healthy Relationships Lesson (N=8)				
I can explain what a healthy relationship is.	29%	100%		
I can describe why communication is an important part of an emotionally and physically healthy relationship.	57%	100%		
I can use assertive communication with a partner (now or in the future) to discuss our relationship and safer sex.	29%	100%		
I know what sexual consent means and why it's important.	86%	100%		

Safer Sex Evaluations

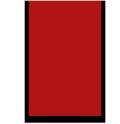
Safer Sex Lesson (n=12)		
I can describe how STDs and HIV are spread between partners.	58%	92%
I can identify the most common symptoms of a sexually transmitted infection.	42%	75%
I know the risks of STDs of different sexual acts (like protected vs. unprotected oral, vaginal and anal sex).	58%	100%
I can describe what "safer sex" means.	83%	100%

Moving Forward

- In your table group, discuss how you might implement this curriculum at your organization
- What lessons would be most relevant?
- Questions/Concerns?



Thank You!!



We would like to thank the following individuals, whose contributions were vital to creating a meaningful and inclusive educational tool:

- AT Furuya, Hillcrest Youth Center
- ► Christopher White, Gay-Straight Alliance Network
- ▶ Giovan Hernandez, UCSD Mother-Child-Adolescent HIV Program
- ▶ Indie Landrum, Critical Voice: A Queer Youth Coalition
- ▶ Jennifer Lewis, UCSD Mother-Child-Adolescent HIV Program
- ▶ **Kelly Jean Gainor**, Planned Parenthood Keystone
- ▶ Kelly Hutton, South Bay San Diego LGBTQ+IPA Youth Program
- ▶ **Kenyatta Parker**, CSU San Marcos Gender Equity Center
- ▶ Lauren Tullis, Vista Community Clinic
- Melissa Kelley, Social Work Intern
- Nicole Kent, MFT
- Pamela Wilson, MSW, Program Consultant and Trainer
- ▶ Rachel Miller, San Diego Unified School District
- ▶ Sophia Arredondo, Hillcrest Youth Center
- ► Tara Beeston, MPH, County of San Diego



Closing

- Evaluation
- Budget String for Site Timekeeper

Thank you for your time and support!

Welcome to the Sexual Health Education Professional Development!

If you have not done so already, please complete the <u>brief online survey</u> that was emailed to you prior to attending this Professional Development.



Media Policy

Training participants are not allowed to film, record, or photograph training presentations, other participants,
PowerPoint slides, and training materials without prior written permission from Resource Teacher Rachel Miller.

Introduction Activity

Please share with us:

- Name
- School Site

1 = Terrified!

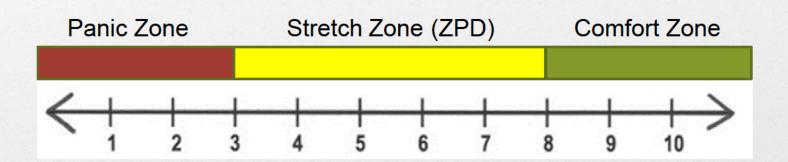
10 = Confident!

Comfort Level



Share a fear or concern (optional)

Zones of Comfort



Sexual Health Education Overview



www.planned.org



Objectives



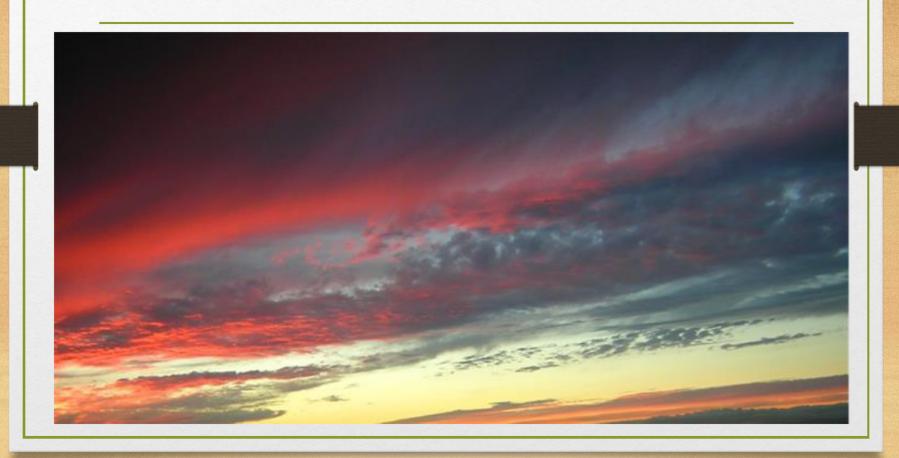
- Become aware of Personal Beliefs.
- Focus on Functional Knowledge.
- Explain Gender, Sex, and Sexual Orientation.
- Create an **Inclusive Classroom**.
- Increase Comfort, Competence, and Confidence.

Group Agreements



- Respect
- Take risks
- Knowledge does not equal experience
- Experience does not equal knowledge
- Respect confidentiality
- You have the right to pass
- ELMO enough, let's move on ©
- Have fun!!

It Was Dusk ...



Setting the Stage...

What Is Your Role As a Sexuality Educator?

What the Heck Are They Doing?



What Do YOU Believe?

What do you believe to be true about the **health behaviors of students** in our district?

- This is an anonymous survey.
- Read each statement carefully.
- Select **Myth** or **Fact** based on what **you believe** to be FACT of our students.

Youth Risk Behavior Survey (YRBS)

The YRBS is an anonymous survey, managed by the Centers for Disease Control and Prevention (CDC), and administered every other year in SDUSD high schools.

- Focuses on priority health risk behaviors among youth.
- Trend data can be used to assess the effectiveness of programs.
- Survey administration procedures are designed to protect students' and schools' anonymity and privacy.
- Internal reliability checks are performed by the CDC to identify the small percentage of students who falsify answers.

SDUSD 9th-12th graders in 2019:

- 1. MYTH 29.6% have had sex (ranging from 15% in 9th grade to 48% in 12th grade).
- 2. MYTH Of these students, 19.8% had sex during the last 3 months.
- 3. MYTH 32.7% had oral sex (ranging from 19.5% in 9th grade to 45.3% in 12th grade)
- 4. MYTH 20.2% are under the influence of alcohol or drugs during sex.
- 5. MYTH 54.3% used a condom during last intercourse.
- 6. MYTH 12% reported having had sex between 11-14 years old.
- 7. FACT Only 9.1% have been tested for HIV (7.2% tested for other STIs).
- 8. MYTH 10.9% describe themselves as Lesbian, Gay, or Bisexual. (4.5% identify as Not Sure, and 1.1% identify as Transgender.)
- 9. FACT 13.3% have been harassed due to being *perceived* as being lesbian, gay, or bisexual.



Key Messages



If you believe some of these MYTHs to be FACT, how could that impact what and how you're teaching in your classroom?



What Works

- Family
 communication about
 sexual health
- Confidential, free, or low cost access to birth control and sexual protection
- Comprehensive sexual health education
- Public health policies based on research

Rights, Respect, Responsibility



Inclusive Sexual Health Education

inclusive [in-kloo-siv] - including a great deal, or encompassing everything concerned; comprehensive

Personal Comfort Assessment Tool

Sex vs. Gender

What Is Sex?

Biological sex includes hormonal, chromosomal and anatomical factors that make one male, female or intersex.

What Is Gender?

Gender is a broad category that includes characteristics, identity, expression and roles.

Gender Terminology

- **Gender Identity** Innate sense of being male, female or neither, and may not correspond to biological sex
- Gender Role Characteristics attached to culturally defined notions of masculinity or femininity
- Gender Expression Outward expression of gender, such as clothing, grooming, or behavior
- Gender Norms Socially constructed standards for specific genders, can often result in unrealistic expectations

Transgender Youth

Transgender is an umbrella term:

- Youth whose gender identity is different from their biological sex
- Youth who transition from one gender to the other (may or may not use medical assistance)
- Does not indicate sexual orientation
- SDUSD policy protects transgender students, their right to express their gender, and to choose school facilities and activities according to their expressed gender (AP 0114).

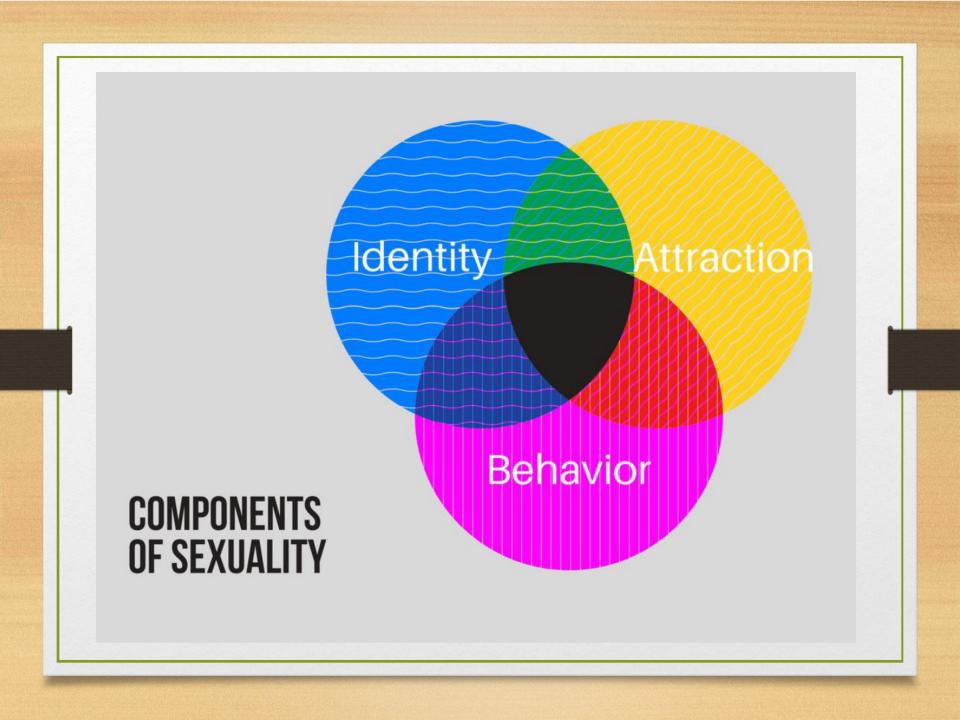
(NOTE – Cisgender refers to individuals whose gender identity matches the biological sex they were assigned at birth.)

Sexual Orientation

- An individual's physical and/or emotional attraction to gender(s)
- A person's sexual orientation is different from a person's gender identity.

LGBTQIA+ Definitions

- L = Lesbian Preferred term for women romantically and sexually attracted to women.
- G = Gay Preferred term for men romantically and sexually attracted to men.
- B = Bisexual Someone who is romantically and sexually attracted to people of both genders.
- **T** = **Transgender or "Trans"** When a person's gender identity or gender expression does not match the person's biological sex assigned at birth. Independent of sexual orientation.
- **NB=Non-Binary** Refers to a range of gender identities that are not strictly male or strictly female. Similar terms are "genderqueer," "gender fluid" or "gender non-conforming".
- Q = Queer or Questioning
 - Queer is historically a derogatory term, and is now being reclaimed by LGBT and gender non-conforming people as a self-affirming term.
 - Questioning refers to someone who is questioning or exploring their sexual orientation, gender, or gender expression.
- **I** = **Intersex** General term used to describe individuals who have a different composition of female and male hormones, chromosomes, and/or internal/external reproductive organs.
- **P** = **Pansexual** Preferred term for people who are attracted romantically and sexually to people of all genders, gender identities, and sexual orientations.
- A = Asexual or Ally
 - An asexual person is someone who does not experience sexual attraction.
 - An ally is someone supportive of LGBTQIAP individuals and their equal rights and treatment.



Safe Campuses?

Of those students who identified at lesbian, gay, or bisexual:

- > 10.0% did not attend school because they felt unsafe (7.0%*)
- > 24.3% have been bullied at school (12.3%*)
- > 62.8% felt sad/hopeless and stopped doing regular activities (31.0%*)
- > 38.9% considered attempting suicide (14.1%*)
- > 17.2% attempted suicide (6.5%*)
- Higher rates of eating disorders, alcohol, nicotine, and other drug use, and sexual activity and intimate partner violence

* Rate of heterosexual-identified students

Being LGBTQ Is *Not* an Inherent Risk Factor

Social Stigma
Discrimination
Unsafe Schools
Ineffective Providers
Non-Accepting/Rejecting Family



Behavior Risks

Protective Laws and Policies for LGBTQ Youth

All students have the right to feel safe on our campuses.

- Federal Title IX law prohibits discrimination on basis of gender, gender expression, and sexual orientation.
- Sexual orientation, gender identity, and gender expression included in antibullying and non-discrimination laws and policies (<u>AB 537</u> and <u>AP 6381</u>).
- Pupils are allowed to participate at school according to their expressed gender identity (<u>AB 1266</u> and <u>AP 0114</u>).
- Schools are required to allow GSA Clubs on campus if they allow clubs.
- A student's gender identity, gender expression and/or sexual orientation must remain confidential unless the student explicitly states otherwise (AP 0114).

Protective Laws and Policies for Gender Nonbinary Youth

All gender identities are legally recognized in California.

- California will legally recognizes "nonbinary" as a third gender option (<u>SB 179</u>, effective January 1, 2019).
- Law makes it easier for people to change gender on state identification and birth certificates, and establishes a "nonbinary" designation on legal documents such as birth certificates, driver's licenses, and state identification.
- Gender markers on state-issued documents are M, F, or X.
- SDUSD is working on changing student information systems and forms to accommodate a gender nonbinary option.

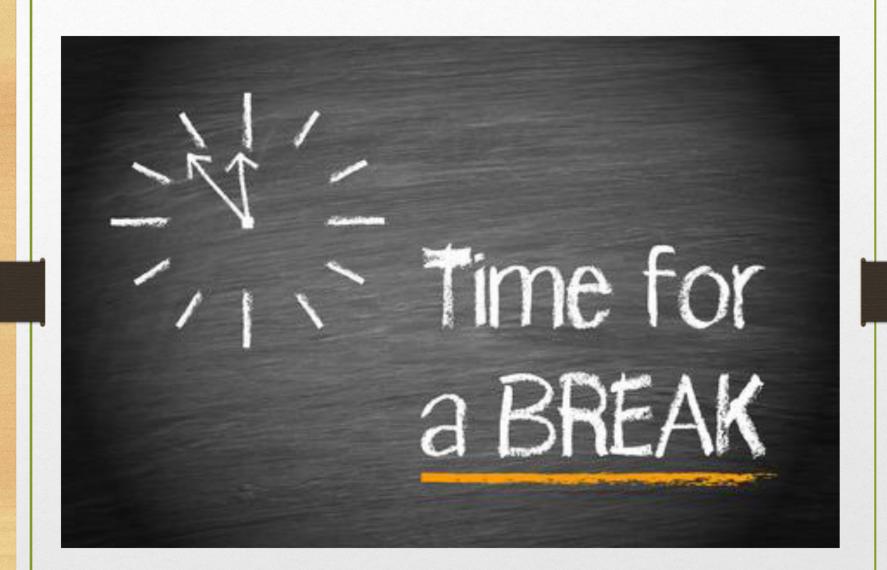
Online Bullying Reporting Form

www.sandiegounified.org/ReportBullying

- School personnel are required to intervene when they witness acts of bullying (AB 9 "Seth's Law").
- For students, parents, community members to easily report student bullying.
- Email sent to school Principal, Office of Youth Advocacy, and Quality Assurance.
- Link is on every school's <u>website</u> on the bottom of the left navigation.

How can you be inclusive in your classrooms?

Brainstorm 3 things that you can do to make your classroom more inclusive!



PROTECTIVE LAWS AND POLICIES FOR SEXUAL HEALTH EDUCATION

Sexual Health Education Program

ASB, Athletics, Physical Education, and Sexual Health



SAN DIEGO UNIFIED SCHOOL DISTRICT'S SEXUAL HEALTH EDUCATION PROGRAM

- Implements Sexual Health Education in all schools grades 6, 8, and 10/Biology.
- Facilitates students seeking Sexual Health Services in the community.
- Supports Safe and Supportive Environments for all students.

SEXUAL HEALTH EDUCATION REQUIREMENTS

CA State Requirements

- Required once in middle school and once in high school
- Promote sexuality as normal part of human development
- Age appropriate and medically accurate
- •Inclusive and free of bias
- Communication with parents
- Instructors trained

SDUSD Requirements

Grade 6 - 10 lessons

Grade 8 – 10 lessons

Grade 10/Biology – 10 lessons

Grades 9, 11, 12 – 1 lesson

- Gender and Sexual Orientation
- STI and HIV Prevention
- Consent and Relationship Rights

(AB 329, CA Ed Code 51930)

KEY MESSAGES

- Emphasis on abstinence and delayed onset
- Healthy, committed, monogamous relationships
- If/when sexually active:
 - Condom use
 - Contraception
 - Regular STI/HIV testing



PARENTAL NOTIFICATION AND REVIEW

Parents must be notified of instruction and chance to preview materials:

- Letter included in enrollment packet and communication blast
- Notify again at least 14 days prior to instruction
- Suggest holding the Parent Preview at Open House
- Hosted by staff who will be implementing the curriculum
- Preview materials on website

PASSIVE CONSENT ("OPT OUT")

- Parent/guardian has right to excuse child from the comprehensive sexual health instruction.
- Parent/guardian provides written note to teacher.
- Consent is assumed if parent was properly notified and does not request exemption in writing to school.
- Instructions for parents and staff on website.

CONFIDENTIAL HEALTH SERVICES FOR MINORS IN CALIFORNIA

- Minors of any age may consent to:
 - Reproductive care: pregnancy testing, birth control, condoms, and abortion
 - Medical care related to pregnancy
- Minors 12 years or older may consent to:
 - Testing and treatment for STIs and HIV, including PrEP and HPV vaccine
 - Outpatient mental health or ATOD services
- Students may be released from school to seek confidential care without parent notification or consent.
 - Ed Code <u>46010.1</u>, <u>48205.a.3</u>
 - SDUSD Administrative Procedure 6156
 - Guidelines for Releasing Students for Confidential Medical Care

AVAILABILITY OF CONDOMS POLICY

Condoms distributed:

- By trained School Nurses only
- To secondary students only (grades 6-12)

Parents:

- Will be notified of the policy via Facts for Parents
- Can opt their student out of the program by writing a letter to their School Health Office
- CA law allows people of any age to obtain condoms confidentially.
- Information included in all sexual health units.

CONFIDENTIALITY IN SCHOOLS

- Adults not normally in classroom are not allowed to observe during sexual health instruction (i.e., parents, administrators).
- HIV status is confidential for staff and students.
- Pregnancy reported directly to nurse or counselor is confidential.
- Other staff may only report pregnancy to nurse or counselor unless there is a medical emergency (AP 4255).
- A student's gender identity, gender expression and/or sexual orientation should remain confidential unless the student explicitly states otherwise (AP 0114).

SEXUAL ACTIVITY BETWEEN MINORS

- Sexual activity alone, including pregnancy, does not necessarily imply sexual or child abuse.
- "Unlawful Sexual Intercourse" (a person under 18 years having consensual sex) will typically not be prosecuted.
- Child abuse must be reported:
 - Any sexual intercourse involving a minor (under the age of 18 years) that was coerced or involuntary.
 - Follow district's Mandated Reporter protocol.
 - When in doubt, report the incident.

SEXUALLY TRANSMITTED DISEASES



TIMEFOR JCH

SUPPORTING HEALTHY RELATIONSHIPS



Our Student's Experiences ...

- 20% said that their partner had purposely tried to control them or emotionally hurt them within the year. (*38.7%)
- 10.4% were forced by their partner to do sexual things that they did not want to do within the year. (*22.6%)
- 6.1% were physically hurt on purpose by their partner within the year.
- LGB identified students are experiencing more sexual and emotional dating violence than their heterosexual peers.

*Rate of Gay, Lesbian, or Bisexual identified students

Trauma Informed Instruction

- Be aware of the impact of trauma and a person's individualized response.
- Recognize that all responses to trauma are normal.
- Work to create a sense of safety by being mindful of the environment, language, policies, and approaches to working with people in trauma.

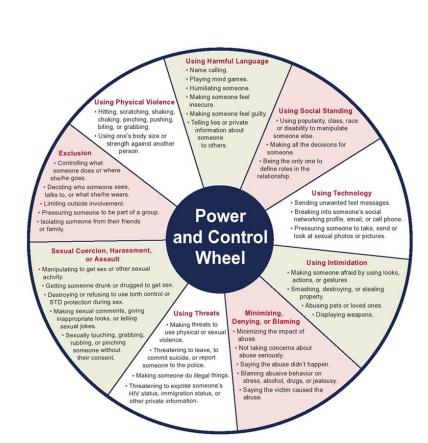
Trauma explains behavior.

Trauma does not excuse behavior.

Relationship Violence

Types

- Emotional, verbal
- Physical violence
- Sexual assault, rape
- Human trafficking



Relationship Violence

Risk Factors

- Culture of acceptance
- Age
- Family life
- Wants and needs

Warning Signs

- School performance
- Change in behavior
- Change in appearance
- Substance abuse

Sexual Harassment

Unwanted:

- Sexual comments or innuendos
- Sexual gestures
- Discussions of sexual activity
- Pornography in texts/notes/emails/posts
- Repeated requests for dates or sexual activity

The recipient determines if the behavior is unwanted!

Consent

Affirmative Consent - "Yes means Yes"

- Voluntarily Agrees
- Given Every Time
- Continuous
- Can Be Withdrawn
- Consent Cannot Be Given.....
 - -Under the influence
 - -Passed Out/Unconscious/Sleeping
 - -Under Direct or Implied Threat
 - -Disability May Impact Understanding

What Is a Healthy Relationship?

A healthy relationship is based on:

- Communication Talking to partners without fear.
- Respect Partners' values, wishes and feelings are important.
- **Compromise** Disagreements happen even in healthy relationships, and it is important to communicate and come to a mutual agreement.
- **Support** Relationships are about building each other up, not putting each other down.

BRAINSTORM:

What Can You Do To Promote Healthy Relationships in Your Classroom?

What Can You Do?

Immediately

- Stop behavior every time
- Private conversation with student(s)
- Group discussion
- Contact administration
- Contact parent/guardian (if appropriate and safe)

Referrals

- Refer to School Nurse, Counselor, Psychologist, Administrator
- Student Support website
- Guest speakers and videos (pre-approved by our program)

Report student-generated sexual harassment and relationship violence suspicions to School Principal immediately!

Community Resources

· CSEC

- Community Awareness Events (district) Childcare and translation provided
 - Marshall Middle Jan 22, 2020 4-6pm
 - Mann Middle Jan 22, 2020 4-6pm
- Educator training Nov 19, 2019 or March 24, 2020
- Watch newsletter for other training opportunities!

Trauma-Informed Instruction

Teacher/School toolkits (link posted on Google Classroom)

REPRODUCTIVE ANATOMY REVIEW

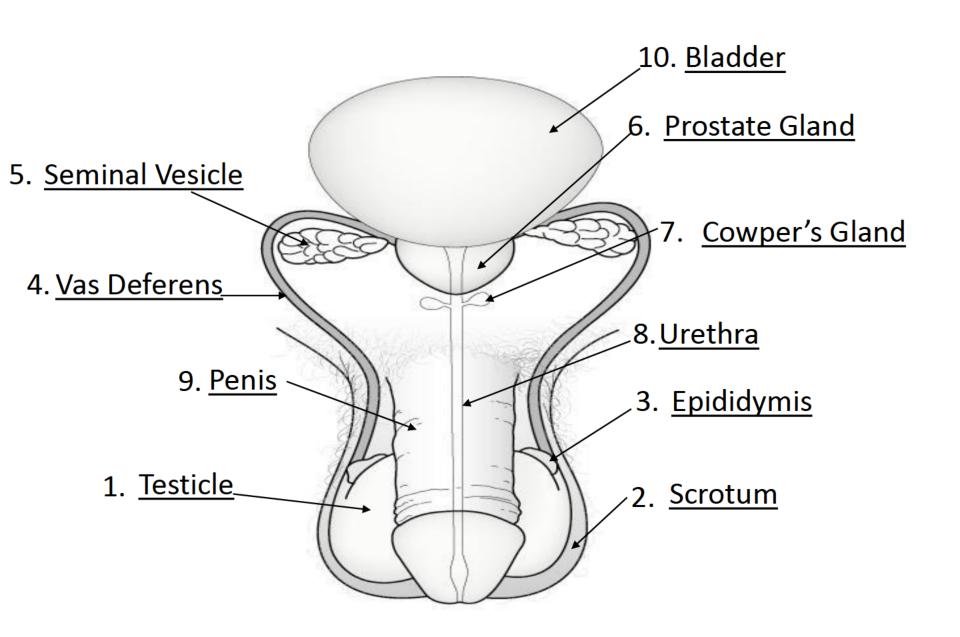
RATIONALE

- Medically accurate knowledge of reproductive anatomy and physiology is important for the discussion of:
 - Sexuality as a normal part of human development
 - STI/HIV and pregnancy prevention
- Use inclusive language as much as possible when referring to body parts.
- Anatomy refers to body parts.
- Physiology refers to how the parts function.

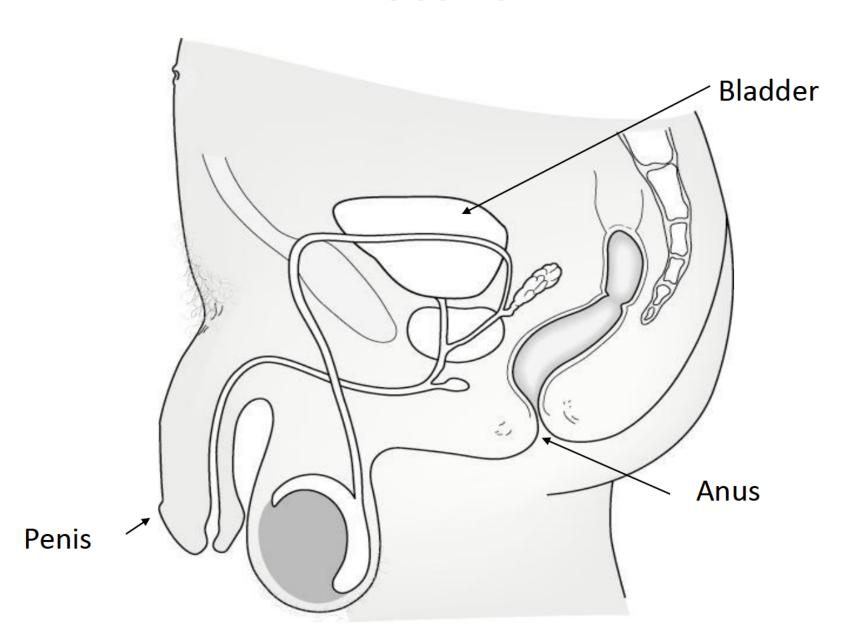
REPRODUCTIVE ANATOMY OF PEOPLE WITH A PENIS

"Male Reproductive Anatomy"

Front View



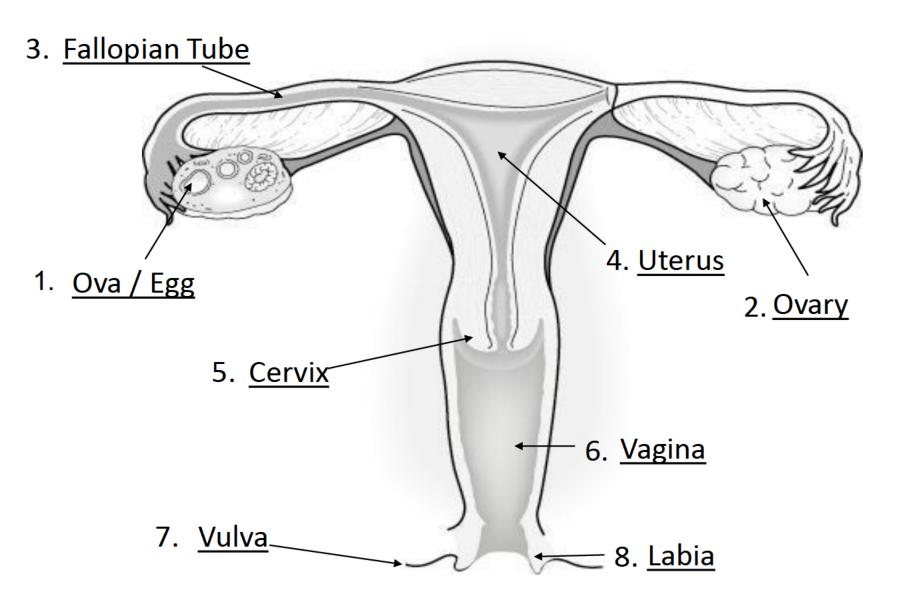
Side View



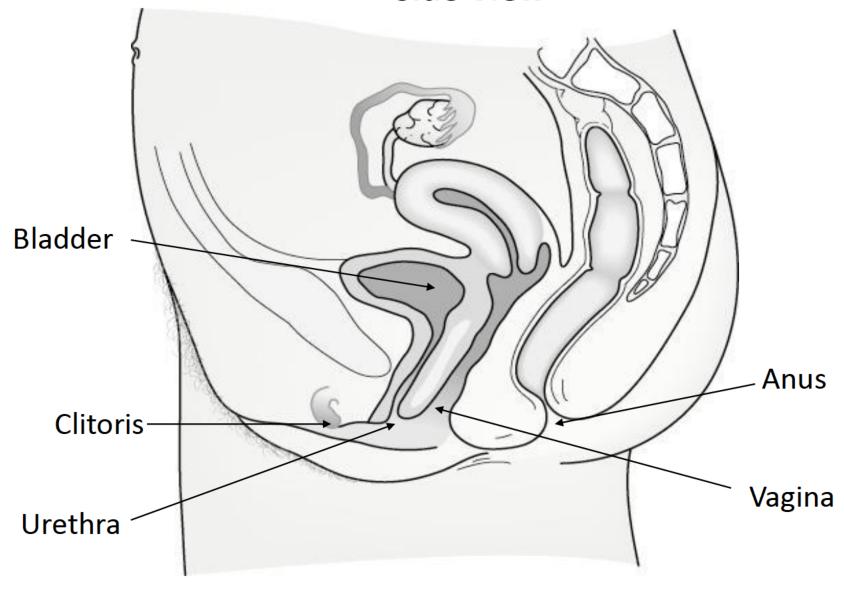
REPRODUCTIVE ANATOMY OF PEOPLE WITH A VULVA

"Female Reproductive Anatomy"

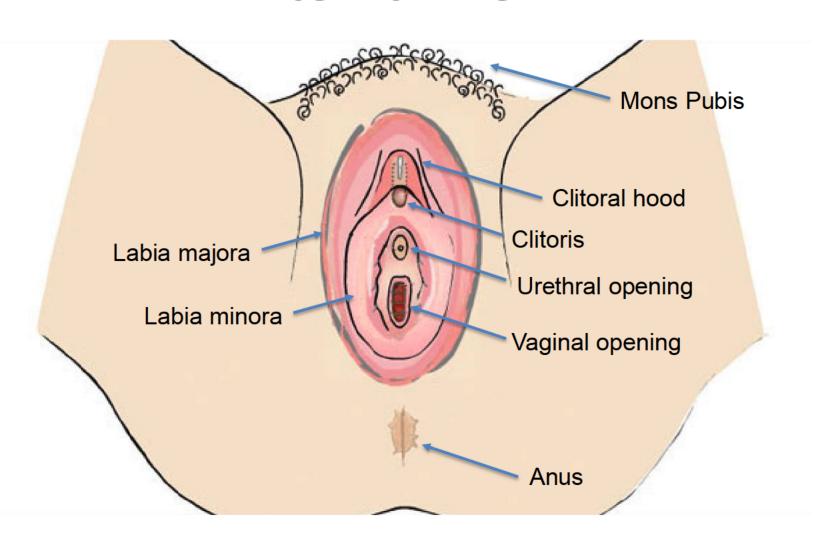
Front View



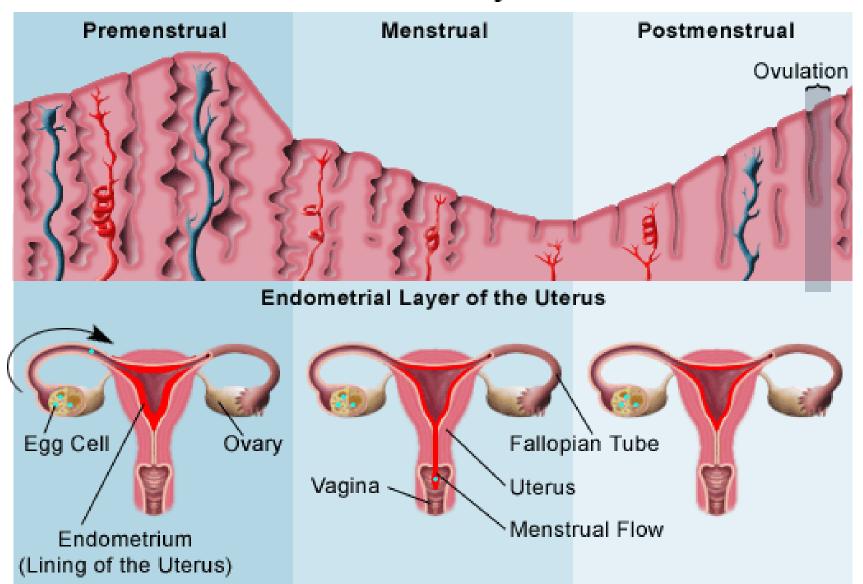
Side View



External View

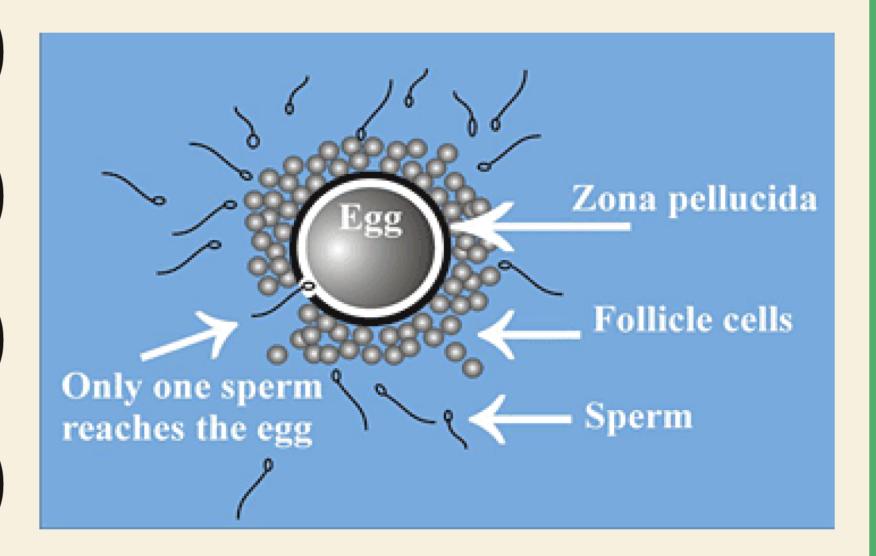


Menstrual Cycle



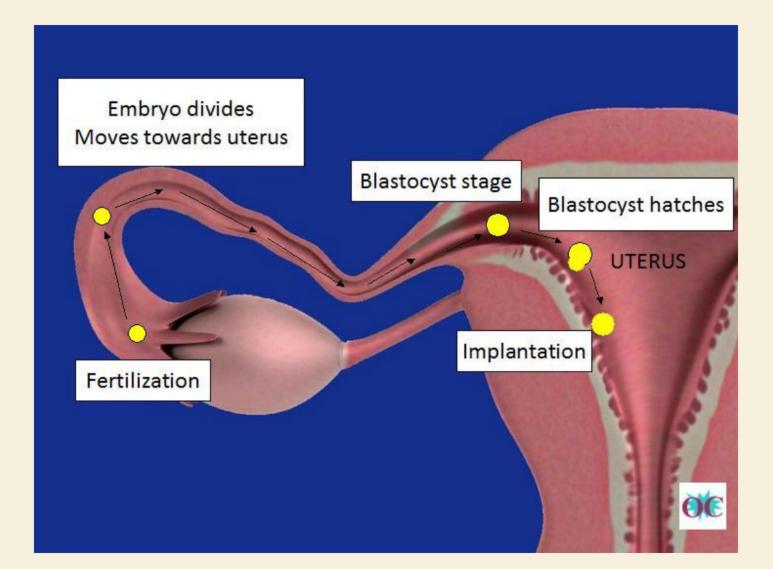


FERTILIZATION





IMPLANTATION



Keeping It Real



Realities of the classroom

How can
you keep it
real?

- Never enough time to teach everything
- Focus on what students really need to know
- Want to guide students to making independent decisions

Answering Student Questions

Types of Questions:

- 1) Requests for Information
- 2) Am I Normal/Permission
- 3) Shock



Be aware of red flags!

Guidelines for Answering Questions

- Provide opportunity for anonymous questions.
 - > Use anonymous question box or envelope.
- Read questions prior to answering.
- Answer all questions, if possible.
- Use simple, accurate, inclusive language.
- Values questions should be referred to parents/trusted adults.
- Decline to answer personal questions.

Focus on Functional Knowledge

- 1. Use **simple language**.
- 2. Provide **only what they need** to make healthy choices.
- 3. Keep information **relevant** to them.
- 4. Understand the youth's language and intent.
- 5. Know when to make **referrals to others** (i.e., counselors, nurses, community agencies).



Is it okay to masturbate?

- What might be the **intent** of the question?
- What **knowledge** do they need to make healthy choices?
- How could you make your response inclusive of all students?



What does semen taste like?

- What might be the intent of the question?
- What **knowledge** do they need to make healthy choices?
- How could you make your response inclusive of all students?



- What might be the intent of the question?
- What **knowledge** do they need to make healthy choices?
- How could you make your response inclusive of all students?



What is porn?

- What might be the **intent** of the question?
- What **knowledge** do they need to make healthy choices?
- How could you make your response inclusive of all students?

Let's Practice!

- Work within your table group.
- Read and practice answering questions out loud in their small group.
- As a group, select one challenging question to share with the larger group.



Your Sample Question?

- What might be the intent of the question?
- What knowledge do they need to make healthy choices?
- How could you make your response inclusive of all students?

Sexual Health Education Summary

- Functional Knowledge
- Focus on what's probable and not possible
- Be inclusive
- Be aware of your "stuff"
- Look out for red flags:
 - Warning signs
 - Mandated reporting
 - Confidentiality
 - Referring

Contact Information

Resource Teacher

- Summer Hellewell
- Sexual Health Curriculum and Training
- Teacher Supports
- (619) 725-5583
- <u>shellewell@sandi.net</u>

Resource Teacher

- Rachel Miller
- Program Coordinator
- Sexual Health Services
- LGBTQ Supports
- (619) 725-7121
- <u>rmiller@sandi.net</u>







SAN DIEGO UNIFIED SCHOOL DISTRICT'S

STUDENT INFORMATION CHANGE REQUEST

CONFIDENTIAL

All students have a right to privacy. This includes the right to keep private their transgender status or gender nonconforming presentation at school. Students have the right to openly discuss and express their gender-related identity and expression at school and school activities, and to decide when, with whom, and how to share private information.

School staff shall not disclose information that may reveal a student's transgender status or gender nonconforming presentation to others. Therefore, given the sensitive nature of the information, when speaking with parents, guardians, other staff members, or third parties, school staff should not disclose a student's preferred name, pronoun(s), or other confidential information pertaining to the student's transgender or gender nonconforming status without the student's permission, unless authorized to do so by law.

School	Today's date
Student's LEGAL name LEGAL FIRST NAME LEGAL MIDDLE NA Student's SDUSD ID#: Date of birth:	ME LEGAL LAST NAME SUFFIX Student's LEGAL sex: FEMALE MALE NON BINAR
OPTION	OPTION 2
repor	e/gender change will be reflected on teacher/substitute rosters, t cards, school mailings, diplomas, etc. Student Information
FIRST NAME PRONOUNS Would you like this information shared with your reachers or other staff?	FIRST NAME MIDDLE NAME Der: MALE FEMALE NON BINARY
Would you like this information shared with your teachers or other staff?	
Are parents/guardians supportive? NO YES Conference with student held on: Date	t conference held on:
Conference Attendees: Addit	PARENT SIGNATURE ional Conference Attendees:
asserting my gender identity. -I know I can request a Gender Support Plan to help ensure I am -I know	re been informed of my rights and options as it relates to rting my gender identity. The second of the second options as it relates to relates

DATE

DATE

STUDENT INFORMATION CHANGE REQUEST



When a request is made to implement measures that accommodate the student's asserted gender identity via the Student Information Change Request Form, it is required that principal or designee (i.e. school teacher or counselor) work collaboratively with the student to address the name/gender change

A conference with the student is required in order to both discuss and document how staff will support the requested changes.



Meet with student (and parent/guardian if seeking an "Option 2") to complete the Student Information Change Request Form



Meet with student to complete the Gender Support Plan and use it as a guide for the student support conference.

Access additional resources at youthadvocacy.us or email youthadvocacy@sandi.net.

Below, the 2 options for student information changes are detailed. Work with the student to determine the best option using the outlines below. Fill out the form with the student-If the student is seeking an "Option 2" information change, arrange for a parent meeting as well.

NOTE THAT NEITHER OPTION 1. NOR OPTION 2 ARE LEGAL NAME/GENDER CHANGES. LEGAL NAME WILL STILL BE REFLECTED ON LEGAL DOCUMENTS SUCH AS OFFICIAL TRANSCRIPTS, STATE TESTING/DATABASE, ETC. FOR MORE INFORMATION ABOUT LEGAL CHANGES, CONTACT YOUTHADVOCACY@SANDI.NET

CHOOSE ONE OPTION

OPTION





OPTION



Recommended for students who do not have parent/guardian support, but want preferred name used in class*

Option 1 changes will change NAME in PowerSchool and will be reflected on:



teacher/substitute rosters

information sent home. Arrange for parents to be part of the name change/gender support meeting

Recommended for students who have parental support as preferred name/gender will appear on documents and

Option 2 changes will change NAME & GENDER in PowerSchool and be reflected on (but not limited to):

- report cards
- school mailings
- diplomas
- teacher/substitute rosters
- most other system that may pull information from PowerSchool.

Principal or designee who has met with student to complete the Student Information Change Request Form AND Gender Support Plan will:

STEP



send a copy of completed Gender Support Plan via email to the Youth Advocacy Department at youthadvocacy@sandi.net & retain a copy on site in a confidential administrative file.



inform the Power User**, so they can make the changes in PowerSchool.

**Power Users (typically registrar, site tech, enrollment clerk) enters the changes in PowerSchool as indicated per student in the "First Name on Teacher Roster" field ONLY. See the Job Aid for additional support in this step.

*NOTE: Parental notification is NOT needed for this process to occur, however, when there is parental/guardian support, the parent/guardian should be involved in discussions.

Principal or designee who has met with student to complete the Student Information Change Request Form AND Gender Support Plan will:

STEP



send a copy of completed Student Information Change Request Form via email to the Youth Advocacy Department at youthadvocacy@sandi.net & retain a copy on site in a confidential administrative file.



send a copy of completed Gender Support Plan via email to the Youth Advocacy Department at youthadvocacy@sandi.net & retain a copy on site in a confidential administrative file.

No changes in PowerSchool are made at the site





Using Research to Support Gender Expansive Students

Alison Gill, Esq., Consultant Rebecca Mui, M. Ed., GLSEN Education Manager



Agenda

- Introductions
- Gender Expansive Youth and YRBSS Data
- GLSEN National Research
- Student Video Vignettes
- Data Collection and Advocacy
- Q&A



"The first order of business is to set a timetable to plan an outline for the agenda."

Introductions

We invite you to share your pronouns in this space.

The pronoun or set of pronouns that a person would like others to call them by, when their proper name is not being used.

Some examples include "<a href="she/her/hers" or "he/him/his" or gender-neutral pronouns, such as "ze/hir/hirs," or "they/them/theirs".
Some people prefer no pronouns at all.

Organizations

GLSEN

GLSEN is the leading national education organization focused on ensuring safe schools for all students, regardless of sexual orientation or gender identity/expression.

GLSEN envisions a world in which every child learns to respect and accept all people.

Advocates for Youth

Advocates for Youth champions efforts that help young people make informed and responsible decisions about their reproductive and sexual health. Advocates believes it can best serve the field by boldly advocating for a more positive and realistic approach to adolescent sexual health.

Advocates for Youth envisions a society that views sexuality as normal and healthy and treats young people as a valuable resource.

All Students Count Coalition

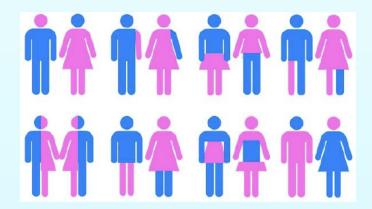
Membership

- Advocates for Youth
- GLSEN
- Center for American Progress
- Human Rights Campaign
- The Trevor Project
- PFLAG
- Other advocacy organizations

Vision

We believe by collecting data of young people's sexuality and gender, states and municipalities along with their community partners will be better able to meet the needs of LGBTQ youth in promoting health and academic success.

Gender Expression Data



Who Are Gender Expansive Youth?

- Youth whose gender expression does not fit traditional roles based on their assigned sex at birth.
 - Other terms include "gender diverse," "gender nonconforming," "nonbinary," or "genderqueer."

- Gender expansive young people experience disparate health risk behaviors compared to other young people.
 - Very limited population-based data for research.

What We Know

Gender nonconformity is associated with:

- Bullying and harassment
- Rejection by peers
- Poor relationships with parents
- Sexual harassment
- Abuse

This victimization has negative health consequences, including:

- Higher rates of drug and alcohol use
- Decreased educational outcomes
- Increased depression and suicidality
- Increased post-traumatic stress

YRBSS Background



- Youth Risk Behavior Surveillance System (YRBSS) or Youth Risk Behavior Survey (YRBS).
- National survey, administered by the CDC which takes place in 47 states, about 20 large school districts, and also territories.
- Looks at "risk behaviors" including drug and alcohol use, smoking, violence, bullying, suicidality, weight, inactivity, and nutrition.
- Consists of a "core" survey and optional question list.
- Each site determines what questions will be used.
- Two sexual orientation questions are part of the core survey.
- There is no approved question regarding trans youth.

YRBSS Gender Expression Question

Optional questions pertaining to sexual orientation for years, but there is a gap regarding gender minority youth.

All Students Count Coalition worked with CDC and researchers to identify appropriate questions for transgender and gender nonconforming youth.

GLSEN performed cognitive and pilot testing on relevant questions.

Based on testing and existing research, CDC approved the gender expression question in 2013.

YRBSS Gender Expression Question

A person's appearance, style, dress, or the way they walk or talk may affect how people describe them. How do you think other people at school would describe you?

- Very feminine
- Mostly feminine
- Somewhat feminine
- Equally feminine and masculine
- Somewhat masculine
- Mostly masculine
- Very masculine

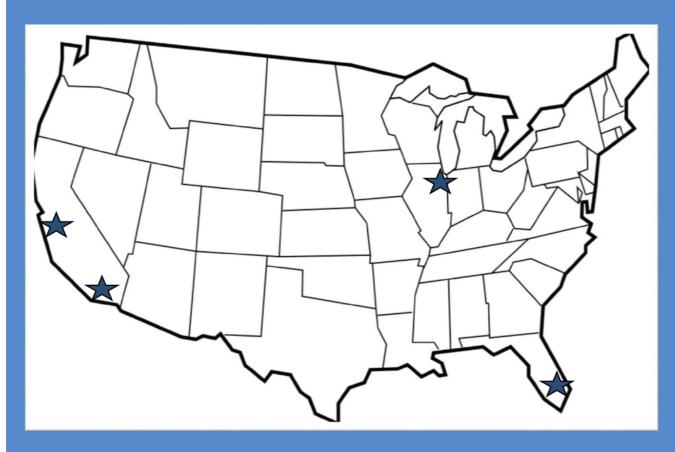


Socially Assigned Gender Expression Construct

The gender expression item looks at socially assigned gender expression, not internal self-perceptions.

- Victimization due to gender expression is due to how others perceive a person's gender.
- Good results based on cognitive and pilot testing.
- Analogous to similar questions about race sometimes used on population surveys.

YRBSS Gender Expression Question



- Available for use as an optional question in 2013 and 2015.
- Sites used:
 - Broward County, Florida
 - Chicago, Illinois
 - Los Angeles, California
 - San Diego, California
- Data has not been thoroughly analyzed until this new report.

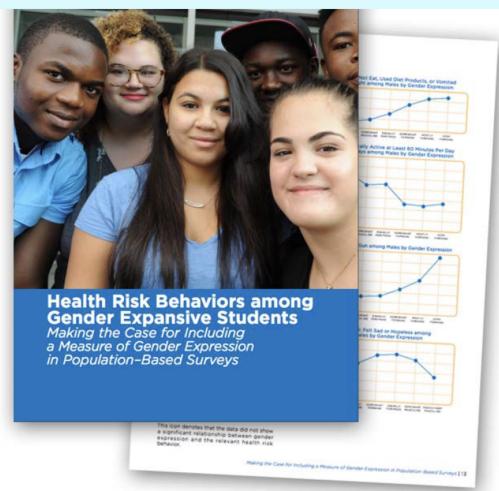
YRBSS & Transgender Youth

Why has a transgender inclusive question not been adopted?

- Very low prevalence, just 0.6% among adults. Not enough to produce report data for most YRBSS sites.
- Several questions have been used by various sites which have not performed well.
- Existing sex question on YRBSS limits options.

CDC has provided a *non-approved, untested* question to sites who desire to use a trans question.

New Report Released September 2016!



Available on Advocates for Youth's site:

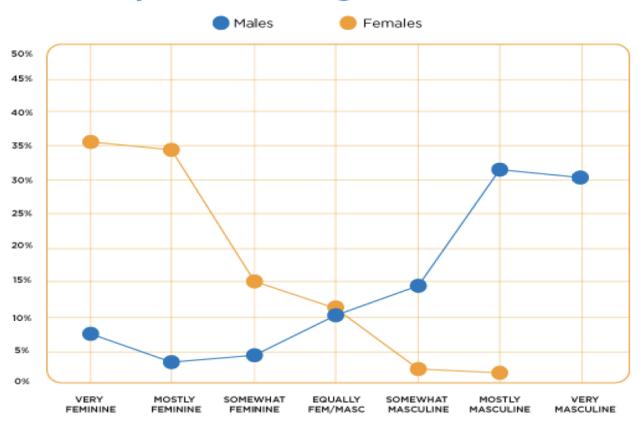
http://www.advocatesforyouth.org/publications/publications-a-z/2686-genderexpressionyrbss

Demographics of Combined Data Set

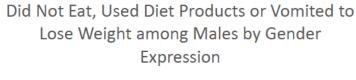
- Used available data from 2013 and 2015. Report combined six data sets with responses from over 9,000 students.
- Higher percentage of gender nonconforming males (14.3%) than females (3.7%). About 10% of males and females are in the middle of the range ("androgynous").
- Racial Breakdown: Hispanic/Latino (24.6%), White (24.5%), Black (23.7%), or Asian/Pacific Islander (19.1%).
- Sexual minority students comprise 12.4% of the combined sample.

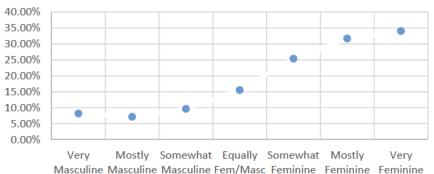
Gender Expression Among All Males and Females

Gender Expression Among All Males and Females

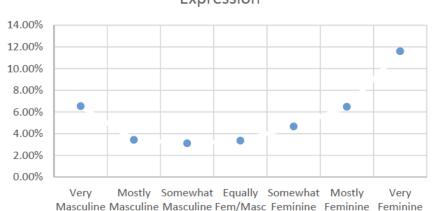


Example Associations by Gender Expression

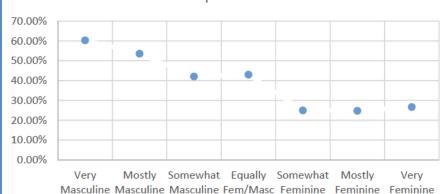




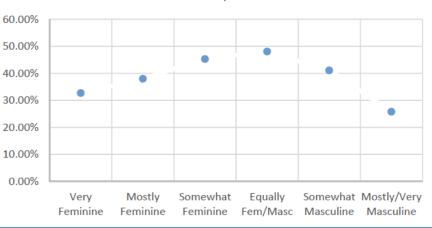
Carried a Gun among Males by Gender Expression



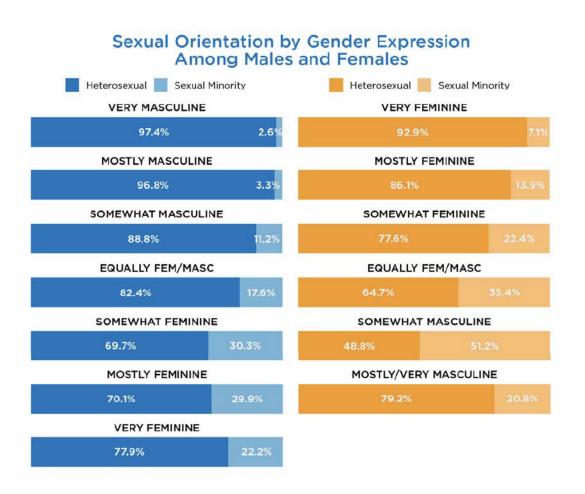
Physically Active at Least 60 Minutes Per Day on 5 or More Days among Males by Gender Expression



Felt Sad or Hopeless among Females by Gender Expression



Sexual Orientation and Gender Expression



- Majority of gender expansive youth are heterosexual.
- Gender expression is a predictor of health risks independent of sex and sexual orientation.

Selected Stats for Feminine Males

Feminine Males are:

- 3X more likely to miss school because they feel unsafe
- 3X more likely to have been electronically bullied
- 3X more likely to attempt suicide
- 2X more likely to have had sexual intercourse before age
 13
- 4X more likely to have used amphetamines
- 4X more likely to have been physically forced to have sexual intercourse

Compared to Masculine Males

Selected Stats for Masculine Females

Masculine Females are:

- 7X more likely to have carried a weapon on school property
- 4X more likely to have used heroin
- 4X more likely to have had sexual intercourse before age
 13
- 2X more likely to have had sexual intercourse with four or more persons
- 4X more likely to have smoked at school
- 5X more likely to currently use smokeless tobacco

Compared to Feminine Females

Selected Stats for Androgynous Females

Androgynous Females are:

- 1.5X more likely to be physically forced to have sexual intercourse
- 1.5X more likely to seriously consider attempting suicide
- 1.5X more likely to conduct nonsuicide self-injury
- 2X more likely to have been electronically bullied
- 2X more likely to have had sexual intercourse before age
 13

Compared to Feminine Females

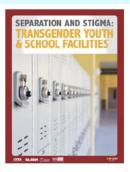
Key Takeaways



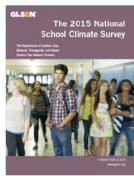
- We found no relationship between gender expression and age or race.
- While gender nonconformity is associated with sexual orientation, the majority of gender expansive students are heterosexual. Gender expression is predictor independent of sexual orientation.
- Gender expansive students are at higher risk for the majority of health risk behaviors analyzed, including bullying, drug use, and suicidality. Because of this, they are less likely than their peers to succeed academically.
- For some risk behaviors, androgynous students are at greater risk.

GLSEN National Research

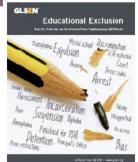
Research on LGBTQ Students Comes From . . .



Separation and Stigma: Transgender Youth and School Facilities

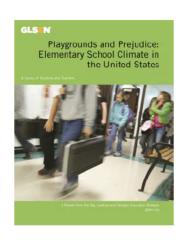


 2015 National School Climate Survey: The Experiences of Lesbian, Gay, Bisexual, and Transgender Youth in Our Nation's Schools

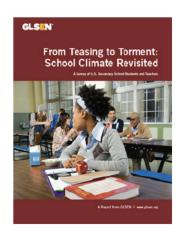


 Educational Exclusion: The Experiences of Transgender Youth in Our Nation's Schools

Research on General Population of Students and Teachers Comes From . . .

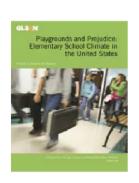


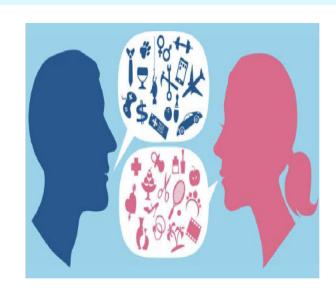
 Playgrounds and Prejudice: Elementary School Climate in the United States



 From Teasing to Torment Revisited: A Survey of U.S. Secondary School Students and Teachers

Remarks about Gender Stereotypes Are Frequently Heard





Students

Hear others make remarks about how boys should act or look (38%) Hear others make remarks about how girls should act or look (33%)

Teachers

Hear comments about a male acting or looking "too feminine" (25%) Hear comments about a female acting or looking "too masculine" (15%)

Compared to Other Students, Gender Nonconforming Students:

Called names, made fun of or bullied

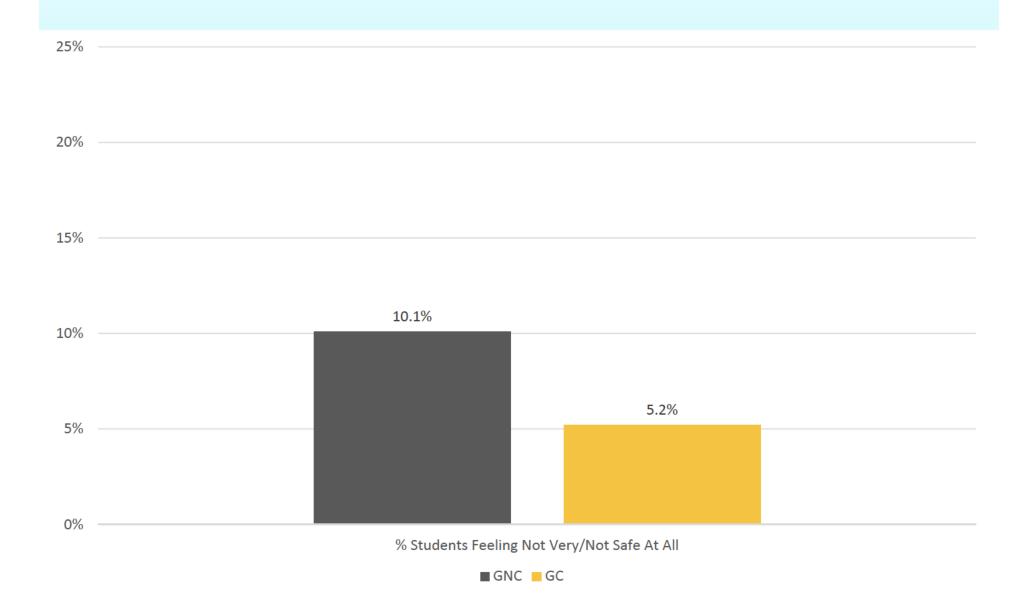
Have mean rumors or lies spread about them

Feel very safe at school

♠ Miss school for safety reasons



Student Safety

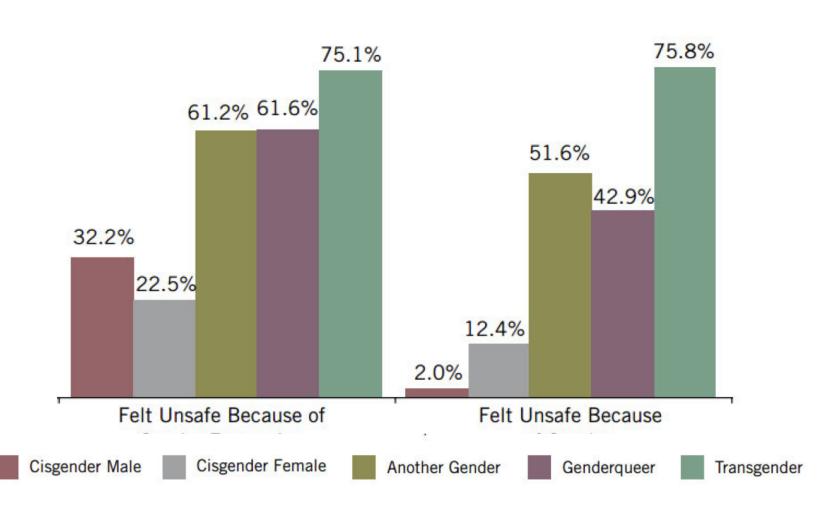


Educational Outcomes

	GNC	GC
% Students Missed At Least One Day of School	34.3%	15.9%
% Students Who Do Not Plan to Finish H.S.	3.1%	0.5%
% Students w/o Postsecondary Education Plans	12.6%	4.2%
% Students Who Experienced School Discipline	55.2%	45.9%

Gender and Student Safety

Feeling Unsafe at School by Gender Identity



School-based supports improve school climates for LGBTQ students.

Supportive Student Clubs

Supportive Educators

Comprehensive Anti-bullying Policies LGBT-inclusive Curriculum

LEARN MORE: glsen.org/nscs GLSEN's 2015 National School Climate Survey



Student Video Vignettes

What LGBTQ Students Want You to Know



"I'm a 17-year-old Chicana lesbian and intersectional feminist living in Houston, Texas."



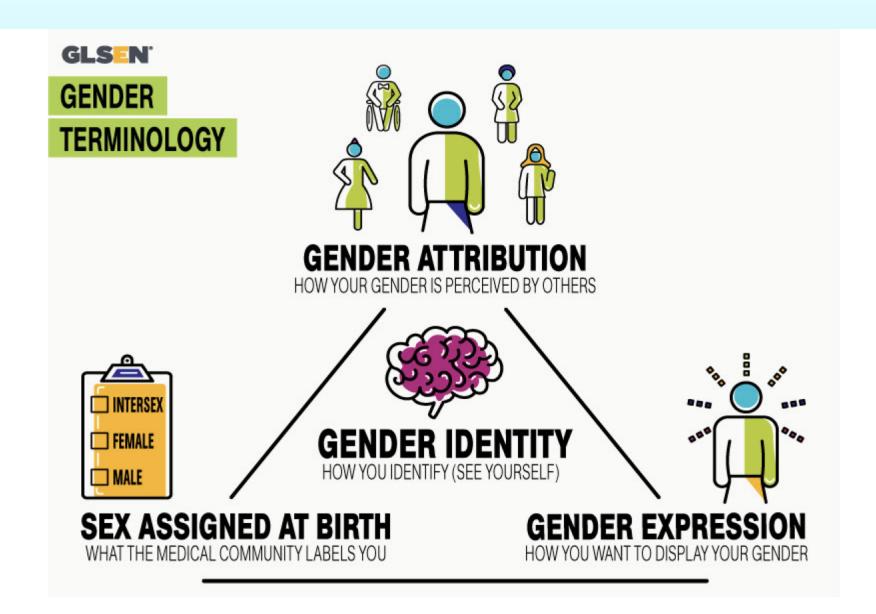
I use they/them pronouns and identify as genderfluid. I'm passionate about gender eradication and POC movements.



"I'm a 15-year-old transgender guy. I am asexual and panromantic, which means that I take the phrase 'hearts not parts' very literally."

https://www.facebook.com/GLSEN/videos/10154604851656016/

Gender Terminology

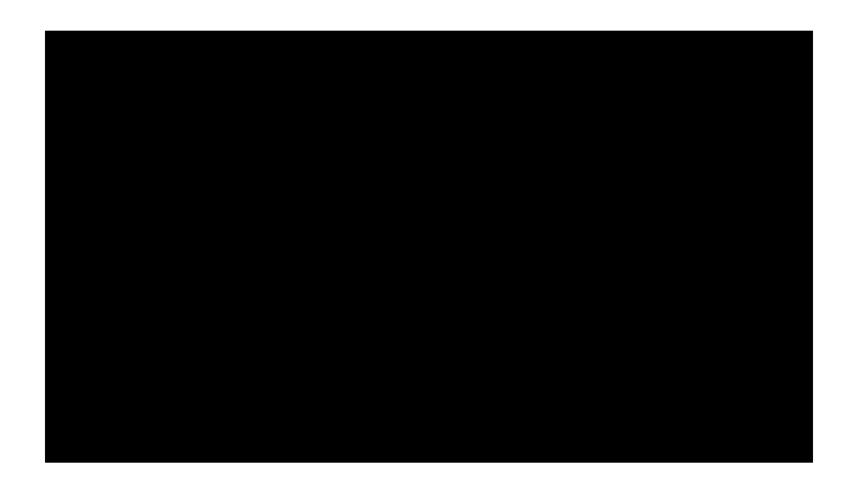


GLSEN Resources for Trans Students

glsen.org/students/tsr

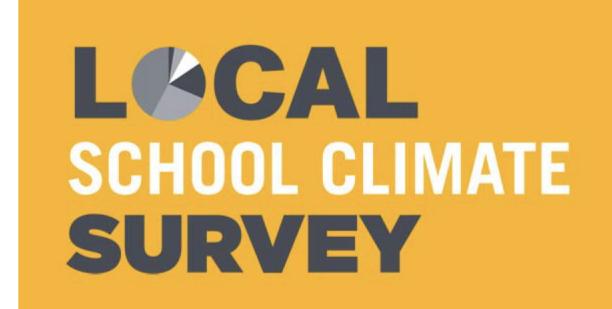
- Pronouns: A Resource on Gender Neutral Language
- Be a Better Ally to Trans and GNC Youth
- Know Your Rights: A Guide for Transgender and GNC Students
- Video on <u>genderfluidity</u> by one of GLSEN's National Student Council members
- <u>Blogs</u> on nonbinary identity and transgender binary-privilege, and by trans educators
- Make your GSA more Trans and GNC Inclusive
- Gender Visual and <u>Discussion Guide</u>: Gender Studies are for Everyone!

What Does it Mean to be Genderfluid?



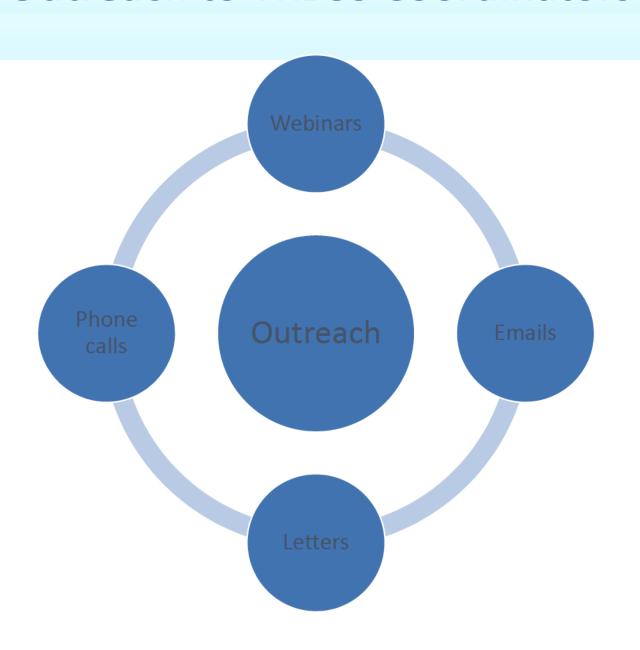
Data Collection & Advocacy

Local School Climate Survey



The Local School Climate Survey (LSCS) is a tool developed by GLSEN's Research Department for students, educators and advocates to assess the safety and overall environment of their local schools or communities using surveys of students.

Outreach to YRBSS Coordinators



Understanding Obstacles

- Survey decisions finalized by Fall 2016
- Process varies widely by site
- Political/process limitations
- Lack of understanding why this is helpful
- Limited # of questions on survey
- May not understand why they need both a gender expression question and sexual orientation questions
- Gender expression question may be competing with unapproved gender identity question
- Lack of ability to analyze question

Moving Forward with Advocacy

- Tell YRBSS coordinator this is important to you and address their concerns
- Look for opportunities for public comment
- Reach out to relevant contacts at Health/Education Departments
- Ask Health, Education, and Youth partners to reach out as well – put together sign-on letter if helpful
- Speak to lawmaker contacts to see if they can move process forward

Preliminary Outcomes

In 2013 and 2015, only 4 municipal sites used the optional GE question.

 In 2017, we believe at least 16 sites will be using the question, include 8 states.

Moreover, 15 sites will used the trans question provided by the CDC:

Some people describe themselves as transgender when their sex at birth does not match the way they think or feel about their gender. Are you transgender?

- A. No, I am not transgender
- B. Yes, I am transgender
- C. I am not sure if I am transgender
- D. I do not know what this question is asking

Resources

Stay connected! Sign up for GLSEN's Educator Network at www.glsen.org/educators.

Trans Student Rights – www.glsen.org/students/tsr

Advocates for Youth – YRBSS Resources:

http://www.advocatesforyouth.org/topicsissues/youth-risk-behavior-surveys

Questions?

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Consultant

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A Lesson Plan from Rights, Respect, Responsibility: A K-12 Curriculum Fostering responsibility by respecting young people's rights to honest sexuality education.

NSES ALIGNMENT:

Students will be able to:

ID.12.CC.1 – Differentiate between biological sex, sexual orientation, and gender identity and expression.

TARGET GRADE:

High School - Lesson 1

TIME: 50 Minutes

MATERIALS NEEDED:

- · Lesson PowerPoint
- 3Rs Teacher's Guide (pages 14-15 and 23-24)
- · Projector and screen
- · Computer with PowerPoint
- · Whiteboard and markers
- "Gender Scripts" worksheet (one copy per each group of three students)
- "Gender Identity Photos," four unique photos in envelopes (one set per each group of two students)
- Homework: "I Am Jazz" (one per student)
- Homework Option 2: "Jazz Jennings: The Three Biggest Misconceptions About Being a Transgender Teen" (for students without Internet access)

ADVANCE PREPARATION FOR LESSON:

- Review "Using Ground Rules with this Curriculum" in the 3Rs Teacher's Guide (pages 14-15). Establish ground rules, group agreements, or classroom norms with your students prior to instruction and refer to them as often as needed.
- Read in the 3Rs Teacher's Guide about teaching gender, gender identity, and sexual orientation (pages 23-24).
- Print and cut out the "Gender Identity Photos" included in this lesson plan. There should be enough photos for each pair of students to receive 4 different pictures in an envelope.

Note to the Teacher: If there are not enough photos provided here for all of your students to have unique sets of 4 photos, you may duplicate some of the photos so that some groups of students have some of the same photos, or you may add some additional photos that you find on your own. If you add photos, please be sure they represent a range of ages, races, ethnicities, cultures, physical abilities, and body types, and include some that visually fulfill gender stereotypes, some that do not, and some whose gender is not easly recognizeable.

LEARNING OBJECTIVES:

By the end of this lesson, students will be able to:

- Explain what gender and gender identity are, and how they are different from biological sex. [Knowledge]
- 2. Define sexual orientation and how it is different from gender and gender identity. [Knowledge]
- Define "gender script" while providing several examples of these scripts. [Knowledge]
- 4. Identify at least three sources of gender scripts and messages they have received growing up. [Knowledge]
- 5. Understand the concept of body image and how body image is shaped by external messages. [Knowledge]



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A NOTE ABOUT LANGUAGE:

Language is really important and we've intentionally been very careful about our language throughout this curriculum. You may notice language throughout the curriculum that seems less familiar—using the pronoun "they" instead of "her" or "him," using gender neutral names in scenarios and role-plays and referring to "someone with a vulva" vs. a girl or woman. This is intended to make the curriculum inclusive of all genders and gender identities. You will need to determine for yourself how much and how often you can do this in your own school and classroom and should make adjustments accordingly.

PROCEDURE:

STEP 1: Say, "Today we are going to be talking about gender, gender identity, and sexual orientation. Let's take a look at what these terms means before we do some activities."

Write the word "gender" on the white board. Ask, "What does gender mean?" In most cases, people will say, "it's whether you're a boy or a girl." After a few responses, ask, "How does someone determine whether you're a boy or girl?" There will likely be a range of responses, but most commonly they will get at "it's how you're born." Ask, "When you're born, how do they know what your gender is?" Probe for "by looking at the baby's genitals."

Explain that there's a slight difference here—that when you look at the baby's genitals and see either a penis or a vulva, all you're seeing is their body parts. Based on what we see, we assign a name to describe that baby—we say, "it's a boy" or "it's a girl." This is called a person's biological sex. Write the phrase "biological sex" on the board to the left of the word gender.

Say, "Some people are born with external genitals that don't match their internal organs. For example, somone who has a vulva but no uterus. All of this has to do with biology: our body parts, our chromosomes, and our hormones, which all make up our biological sex. If our external body parts are different from our internal organs then we are called 'intersex.' That's a way of referring to someone whose sexual body parts developed differently from most people."

Say, "Gender, however, is different and far more complex. Let's break it down a bit. If you were to look in the mirror and see your body, what you see in the mirror is part of your biological sex. If you were to close your eyes, how you see yourself is your gender identity. In most cases, how people feel when they close their eyes matches what they see in the mirror. This is called being 'cisgender.' For some people, what they see in the mirror and how they feel on the inside are different. This is called being 'transgender.' And some people don't identity with any gender at all, which is called 'agender' or 'non-gendered,' or they identity somewhere in between male and female, which can be referred to as non-binary, 'gender fluid' or 'gender queer.'

And gender identity, how you feel about yourself, might not match the gender that you express on the outside, or might be different than some people might expect. Gender expression is how we present ourself to the world. Gender identity is *not* a choice, whereas gender expression is—or at least should be—an individual's choice.

These terms are different from sexual orientation." Write "sexual orientation" on the board. Say, "**Sexual orientation has to do with the gender or genders of the people we**



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are romantically and physically attracted to. This is different from our sense of what our gender is. A person who is attracted to their same gender are typically referred to as gay or lesbian, and a person who is attracted to both genders are typically referred to as bisexual or possibly pansexual. A person attracted to only the other gender are typically referred to as heterosexual. People who do not have sexual feelings at all towards other people, but can share emotional intimacy, are typically referred to as asexual. We all have both a gender identity and a sexual orientation.

For example, a person whose biology at birth was characterized as 'female' and who also feels female on the inside, who is attracted only to people whose biology at birth was characterized as 'male' and who also feel male on the inside, will likely identify as heterosexual. The fact that she identifies as female and he identifies as male are their gender identities. The fact that they're attracted to each other is their sexual orientation.

Similarly, a person whose biology at birth was characterized as 'female' and who also feels female on the inside, who is attracted only to people whose biology at birth was characterized as 'female' and who also feel female on the inside, will likely identify as a lesbian. The fact that they identify as female are their gender identities. The fact that they're attracted to each other is their sexual orientation.

Give students some facts about San Diego Unified School District high school students from the 2019 Youth Risk Behavior Survey:

- 14.4% describe their appearance as equally feminine and masculine
- 1.1% identify as transgender
- 10.9% identify as lesbian, gay, or bisexual
- 4.5% are unsure of their sexual orientation

Say, "Regardless of our gender identity or sexual orientation, we are getting lots of messages about what is or isn't okay to say, do, or wear based on which gender we are." Write the word "gender script" on the board. Ask, "Has anyone here been in a play at school? What does a script tell us in a play or movie or TV show?" Probe for it tells us what we should say, how we should move, and how we should react to others. Say, "So our gender scripts are how we're told to be based on the answer to the question when we're born: 'Is it a boy or a girl?'" Probe the class for examples or provide one of your own.

Note to the Teacher: Here are the terms that should be listed on the board: gender, biological sex, sexual orientation, and gender script.

Divide the class into groups of three. Say, "I am going to give you all a sheet of paper and would like to ask you to think about the gender scripts you have received or have heard about people of a different gender from yours. For right now, we're just going to talk about boys and girls."

Distribute the "Gender Scripts" worksheet to each group and tell students they will have about 10 minutes in which to complete it. (11 minutes)

STEP 2: After about 10 minutes, ask students to stop their work. Create two lists on the board corresponding to the worksheet and ask students to share an example from their lists. Write their responses on the board.



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Once all the responses are on the board, ask the following questions:

- What do you notice about the two lists?
- How did you know that these were the gender scripts as you were growing up?
- · From where/whom have you been receiving these scripts?

Say, "So far, we've been talking about people who are assigned 'male' and 'female' at birth. In most cases, people who are assigned 'male' at birth have a penis and testicles, and how they feel on the inside matches those body parts. It makes sense to them. It's typically the same thing for people who are assigned 'female' at birth—they have a vulva, ovaries, and a uterus, and how they feel on the inside matches those parts.

Sometimes, however, the body parts are different from how a person feels on the inside. That person may call themselves 'transgender' or simply 'trans.' For example, a trans woman is a person whose biology at birth was characterized as 'male' and who feels female on the inside. This person's *gender identity* is female. Being transgender is not a sexual orientation. A transgender person's *sexual orientation* would depend on the gender(s) that this person is romantically and physically attracted to.

How might someone who identifies as transgender react to these gender scripts?" (11 minutes)

STEP 3: Say, "To what extent do you think our culture as a whole has been scripted around gender? Let's take a look at that now. To do so, we need to get into pairs."

After students get into their pairs, say, "Each pair is going to get an envelope. Inside are four pictures. You are going to face each other. One person will start by taking out one of the pictures from the envelope without showing it to the other person. They will then describe the person in the picture and the other person needs to guess the gender of that person. Seems easy, right? But wait—there are a few rules!"

Write key words on the board as you go through these rules:

- The guesser may not ask questions; they can only go by what's shared by their partner.
- No gender pronouns may be used by the person describing the pictures. Only "they" or "them" can be used—no "he" or "his" or "she" or "hers."
- No gender words like "masculine" or "feminine" can be used, such as "man" or
 "woman" and so on. For example, you cannot say, "This person looks like a man
 but isn't" or "This person looks really girly." Just describe what's in the picture.
 For example, "This person has long hair." "This person is a child. They are playing
 football."
- You may not refer to whatever's in the picture as a "girl" or "boy" thing. For example, you cannot say "This person is playing with a girl's doll."
- If you recognize the person in the picture, please do not say, "Oh, it's so-and-so" or describe what TV show or movie they're in. Just describe what they look like physically.



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Show the PowerPoint Slide 17 with the sample photo. Say, "For example, if you had this person, you might say, 'this person is smiling, has dark hair that is styled up over their head, and is wearing lipstick and other makeup.' Then allow the other person to guess."

Advance to Slide 18 and describe this person while showing the hints, but before the photo is revealed. Say, "Let's try another one—only this time you won't see the picture yet, which is what it will be like in the activity. This person has dark hair that's sort of spiked up. They're wearing eye makeup and a necklace and a leather jacket." Once students have guessed about the gender of the person in the picture, click again to reveal the photo.

Answer any questions and then distribute the envelopes, reminding students to take turns describing the photos/guessing the genders and to not show their photos to their partners. As they work, walk around the room to see how they are doing. (10 minutes)

STEP 4: After about five minutes, ask students to stop their work. Process by asking the following questions:

- What was it like to do that? What was [insert participant responses] about it?
- Did you find it easy to guess a person's gender? What was the language that tipped you off?
- · What made it difficult to guess the person's gender?
- What was it like to be the person giving clues? What was easy or challenging about doing that?

Say, "In the photos, there were certain features that could apply to someone who is or who we perceive to be female, to someone who is or we perceive to be male, or to someone whose gender identity we do not know or who does not identify as male or female. If these terms can apply to someone of any gender, why do you think we gender them in the first place? For instance, why would we say, 'she's dressed like a guy' vs. 'she's wearing pants?"

Say, "What we call ourselves is called our 'gender identity.' And while you may assume that someone who looks a particular way on the outside identifies the same way on the inside, that may not necessarily be the case." Ask, "How many people feel they guessed the genders of the people in both of their photos correctly?" Explain that, unless the photo you had was of a famous person who's made their gender known, you actually wouldn't know for sure what that person's gender is unless you asked them.

STEP 5: Next, lead the discussion to questions about body image. Write the term "Body Image" on the white board with markers. As you ask students questions, write key words or ideas that they contribute on the white board for reference during the discussion. Explain to students that body image is how we feel about and perceive our own bodies. Say, "Body image can be positive, such as I feel strong or I like my hair, or negative, such as feeling too tall or too skinny. Our perceptions of ourselves and what society expects of us also influence the way we see other people. We might compare ourselves look to other people we see in media or meet in real life. Sometimes that comparison also leads to judging others about their own bodies and their own physical appearance.

Now we're going to talk about the photo activity that we just did, thinking about what our own perceptions and judgements were about the person's body or gender expression. When you looked at these photos, did you think about any of the following:



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- Did you think about how attractive or unattractive these people were?
- · Did you think about their body size or shape?
- Were your first impressions of people that presented as female different from your feelings about people that presented as male?
- What about people that presented clearly female or male compared with people who didn't?
- How did you think about the white people as compared to the people of color?
- Do you think that bias against people because of their body size, shape, or appearance is acceptable?

Ask if there is anyone who did not think about the size of these people in the photos as they examined them. Point out that although each person looks happy, healthy, or active, the first impression that many people will have is about their body size.

Ask students to consider where they get their ideas about what body shape and size is attractive and healthy. Draw a circle on the board and write "BODY IMAGE SHAPED BY..." in the center. Create a web of the students' ideas (e.g., family, friends, culture, advertisements, toys, video games, TV, movies, music, magazines, etc.). Guide a discussion about the ways in which each category on the board has shaped their ideas about body image and their perceptions about people who fall outside what is considered "normal" or attractive.

Tell students that societal ideas about body image are so ingrained that most of us take them for granted and accept them as natural and normal. This might lead us to internalize negative concepts about ourselves and others, such as feeling like a bad person for being overweight or thinking that thin people are the most worthy friends. Ideas about body image, however, are not fixed or universal, and vary depending upon time and place. Ask students to silently reflect on how many times a day they judge (or hear others judge) their own or someone else's size or appearance, and what effect these judgments have on us cumulatively and over time.

Say to students, "No one has the right to tell someone else how they are supposed to express their gender or how they should look. Society will continue to give messages about gender and body image, whether from the media, family, culture, or religious groups. But in the end, every person has the right to discover who they are and to let others know in ways that feel right to them." (15 minutes)

STEP 6: Answer any questions students may have, then explain that for their homework they will be watching a few minutes of the TV show "I Am Jazz" and will respond to some questions about it. Distribute the homework sheets and close class. (3 minutes)

RECOMMENDED ASSESSMENT OF LEARNING OBJECTIVES AT CONCLUSION OF LESSON:

The initial presentation by the teacher will achieve Learning Objective 1. The gender script brainstorm small group activity and large group discussion will achieve Learning Objectives 2 and 3. The homework will also achieve Learning Objective 2.

HOMEWORK:

Students will watch a brief excerpt from the TV show I Am Jazz and respond to the questions on the homework sheet. An alternate homework (Option 2) is available for people who do not have Internet access.

(Body Image lesson excerpted from Reshaping Body Image by Teaching Tolerance https://www.tolerance.org/classroom-resources/tolerance-lessons/reshaping-body-image)



GENDER SCRIPTS

Names:					

Instructions:

- From the time we are born, we are told how we are supposed to act, dress and speak based on the sex we are assigned at birth—just as if we had been given a script and asked to follow it throughout our lives.
- In the space below, please provide examples of some of the messages you or people close to you have received about how we are supposed to behave based on whether someone is assigned "male" or "female" at birth.

ASSIGNED FEMALE	ASSIGNED MAL



*I Am Jazz*Homework (Lesson HS-1)

	Name: I	Date:
IN	NSTRUCTIONS:	
•	Please go to https://tinyurl.com/iamjazzhon "I Am Jazz" until 10:11.	nework and watch Season 1 Episode 1 of
•	Once you are done, please answer the questi	ons below.
wl	. When Mom and Dad talked about knowing the was looking forward to. What things we sex he assumed Jazz was?	ey were having a boy, Dad talked about as he excited to do with his child based on
dr	Jazz's dad talked about not wanting to go out ress. Why do you think he felt that way? Do yo aughter wanted to leave wearing pants? Why o	u think he would have felt that way had his
wi	. Why do you think Jazz was not allowed to go rith them for doing that or do you think she sho ot?	to school "dressed as a girl"? Do you agree ould have been allowed to? Why or why
a١	. When talking to more than one person, you'll lot in real life, too. Why do you think when we lentify as boys or male, we say "you guys?" Wo	're talking to a group, even if they don't



Jazz Jennings: The Three Biggest Misconceptions About Being a Transgender Teen

Homework Option 2 (Lesson HS-1)

Name:	Date:	
INSTRUCTIONS:		
 Please read the ar Being Transgende 	ticle "Jazz Jennings: The 3 Biggest Misconceptions About r"	
 Once you are done 	, please answer the questions below.	
feminine" such as do the likes and dislikes	t she knew she is a girl in part because she liked "everything lls and dresses. How do you think these stereotypes about of children affect kids? How would it feel to have those into them, either because a kid is transgender or maybe just otypes?	
2. Jazz says the secor "It's not about what' you think she means	nd misconception people have about her is surgery. She says, s between your legs, but what's between your ears." What d by that?	ļo
	ption Jazz mentions is about being too young. When did she When did you first know your gender? Do agree or disagree ? Why?	!
"about embracing w find happiness and le	the universal message she's trying to express is that it's no you are, living your life authentically and being able to ove throughout your life." Do you think that message is ny not? In what ways does it apply or not apply to you?	





NEWS & CULTURE THE CONVERSATION

Jazz Jennings: The 3 Biggest Misconceptions About Being a Transgender Teen

BY JESSICA RADLOFF JULY 15, 2015 5:17 AM

About halfway through our 45-minute conversation, 14-year-old Jazz Jennings confides that she's worried about how her new docureality series, I Am Jazz (premiering tonight on TLC), will be received. She's hoping for a positive response from viewers, but she also knows that the subject of her series—her journey as a transgender teen—is still new territory. Will audiences understand that being transgender wasn't a choice? Or that gender dysphoria is a real thing?

But spend just a few minutes with Jazz and her mom, Jeanette, 49, and the answer is unequivocally yes. Warm-hearted, authentic, and deeply understanding, Jazz and her family may not generate the amount of publicity that Caitlyn Jenner and the Kardashians do, but their story is just as powerful—maybe even more so. The Jennings family is more like yours and mine than the Jenners/Kardashians will ever be, and with that comes a greater understanding of what it means to be transgender in today's world, and especially for today's kids. How do people know they were born into the wrong body? When should parents take their kids' wishes seriously? And how should family handle such a sensitive topic? Nothing was off-limits as we sat down with this motherdaughter duo to talk about the most pressing questions, life in a new spotlight, and the Barbara Walters interview that started it all. Prepared to be amazed.

Glamour: What made you decide to sign on to your own reality series?

Jeanette Jennings: We've been thinking about it for a while, but Jazz was too young. It's hard enough to wrap your mind around the idea of a transgender child, so it's easier when they're a teenager. People think it's a choice [to be transgender and it's not], so TLC gave us this platform, and we couldn't pass up such an opportunity to share our story in such a real way. Like Jazz says, we wanted to normalize transgender kids. So we hope that comes across to people and that they are less judgmental.

Glamour: Jazz, I remember when Barbara Walters interviewed you on 20/20 in 2007. You were six years old. Did you remember having the queen of journalism come into your house and talk to you?

Jazz Jennings: Yeah, I definitely remember parts of it. I remember her asking me certain questions about whether I'm a boy or a girl, and me definitely being sure I'm a girl. At the time, I didn't even know who was Barbara Walters was, so I would...

Jeanette: She called Barbara her friend.

Jazz: I did. My friend Barbara is coming!

Glamour: And, Jeanette, what was that like for you having Barbara Walters come in to your home?

Jeanette: It was surreal. My husband is really conservative and so we worked with [ABC] for months and he said, We want the most credible journalist ABC has, and we want Barbara Walters to do this.' So it was him. It worked out great. I mean, it was like, If Barbara says you can have a transgender kid, then you can have a transgender kid!'



Glamour: Jazz, at a very young age you said, 'I have a boy body, but I think like a girl.' What did that mean?

Jazz: Right from the start I knew I was a girl, and I really just expressed that and conveyed that message by gravitating toward Barbie dolls, dresses, everything feminine. But I also knew I was different as well. I knew I was a girl, but I knew I was different. The way I knew that was because I knew I didn't have a girl body. As I got older, I started learning more about different private parts, and I would take baths with my brothers and my sister and wonder why I didn't have my sister's body. I have a boy body but a girl brain, and once I learned the differences between the bodies, I knew I wanted a girl body.

Jeanette: People would say, Oh, how would a two-year-old know?' but you know, one of the first things you teach your kids are, Where are you eyes? Your nose? Where's your mouth?' And you teach them all their body parts. She wondered why she didn't look like her sister. People don't give enough credit to two-year-olds. They know what they want.

Jazz: But it also wasn't just about the body parts for me. It was a transition where I just wanted to live my life authentically, and be the girl I always knew I was. So that's how it was for me at first. When I was young, I asked my mom when the good fairy was going to come and change my body parts.

Glamour: What's the biggest misconception people have about you?

Jazz: There are three big ones! First one is people think that this is a choice to be transgender and it's not. It's not a choice at all. They think one day I woke up and said, Mommy, I don't feel like being a boy anymore; I want to be a girl,' and that my parents made me do this. I knew who I was and that was a girl, right from the start. Another huge is misconception is surgery. Oh my gosh it's so annoying! People are always so concerned what's in between my legs. They're like, So, is it this part or that part? Has she had the surgery?' But this isn't just a medical journey. Sure, there are medical aspects that people should understand and be educated about, but it's also much more than that. And being transgender, it's about really finding yourself along the process and finding the courage to live your life authentically. I think people have to understand that. It's not about what's between your legs, but what's between your ears

Jeanette: And what's in your heart.

Jazz: And the last misconception is the one about being too young, which we clearly expressed. People don't know what's going through my head. People don't define me. I define myself. I knew I was a girl.

Glamour: Where does your confidence come from?

Jazz: Because my family always embraced me right from the start and showered me with unconditional love and support and acceptance, that's why that confidence was able to blossom and I was able to be who I am proudly. So it's thanks to them. If I was shut down at that time and didn't have such a supportive family, I couldn't be who I am, and therefore I probably wouldn't be as confident.

Jeanette: If she was forced to live her life as a boy, I don't think she'd be as confident. She'd be a completely different person, and hopefully alive, because so many of these kids...

Glamour: How did you prepare the rest of the family for this transition?

Jeanette: If you think about it, the boys are a couple years older than Jazz, so when they were four-years-old, Jazz was two, and acting like a girl. So they never had a little brother. In their minds they never had a little brother. But for Ari (Jazz's older sister), Jazz was her little baby, her little brother, and she loved it like a doll. In Ari's mind, this was her brother, but a girly brother. When it was time for Jazz to transition, it was hard for Ari because she was like, I'm the girl, I'm the princess, I'm the only girl.' It was her and three boys, and



she wasn't ready to share that spotlight. We explained to Ari that this was the situation, these were the statistics, and it was like tough love. We explained that it was going to be a tough road [for Jazz] and she would need her big sister. And she said she loved Jazz and was going to be the best big sister to protect her. She completely turned around. She was eight years old, and Jazz was almost five

Glamour: You explain in the show how you decided on the name Jazz, but tell our readers.

Jazz: My sister was Princess Jasmine in the play, *Aladdin*, so since she was my role model, I chose Jazz. We didn't want to use my birth name when we did the 20/20 special with Barbara Walters, so we chose that name.

Glamour: Is Jazz the name you go by privately, or just publicly?

Jazz: Yes, both.

Jeanette: I just recently started calling her Jazz.

Glamour: Really?

Jeanette: Yeah, once we started filming the show because I didn't want to [split the two]. She has always been Jaren to me, which is her birth name.

Glamour: How has it been with the cameras following you around for the series?

Jazz: It's definitely overwhelming at first. You don't have these people living in your house, but they're there almost five days a week! I guess they are kind of living there, using your toilet paper and everything. [Laughs] I remember at the end of the season, they bought us tons of paper towels and toilet paper! It was a lifestyle change [at first], but they really do capture our normal lifestyle, so it's great.

I Am Jazz: Jazz and Jeanette Jennings Tak Reality TV, Misconceptions About Being a Transgender Teen | Glamour

High School - Lesson 1

Glamour: Jazz, we see your friends appear on the show. Was that hard for them to get used to the cameras?

Jazz: Sometimes my friends don't love it and sometimes they do, but they do it because they want to help me share my story. That's very sweet.

Glamour: When you get older, what would you like to do for a living?

Jazz: When I was younger, I would say, everything,' because I love doing so many things, and am so passionate. I love to explore and travel, I love movies, I love writing, I love math and science, so maybe I'll be...

Jeanette: A nuclear physicist?

Jazz: No! Not a nuclear...

Jazz: But I love to write, I love poetry, I love so many things. But I'll just see what happens. I definitely want to continue sharing my story and hopefully helping people to the best of my abilities. I always say I want to leave this world in a better state than the one I arrived in, and I want to live by those terms.

Glamour: The transgender community has unofficially appointed you as a spokesperson of sorts, which is wonderful because it is a gift to help others, but I would imagine it's difficult too.

Jazz: You know, sometimes I do feel like there are expectations set for myself in my community, and I have to do the best I can. But then I come to this realization that I'm human and I'm not perfect, and I'm going to make mistakes, and people will have to realize that. And then I come to another realization which is that this isn't just about me anyway. This is about the whole community, united together to achieve equality for all and make a difference. Even though I might be [publicly] out there more or well known, it doesn't make me more important than someone who is doing something in their local community. It's just that we're all trying our hardest to create change to the best of our ability, therefore, we are all equal, and all working our hardest to create a more loving and accepting society.

Glamour: Before we leave, what message would you like to leave our readers with?

Jazz: I just hope the universal message is really expressed, which is about embracing who you are, respecting yourself, living your life authentically and being able to find happiness and love throughout your life. This isn't just about transgender people. Maybe for now it is, but in the future, I want to make sure that all people can live by those terms and express their natural rights and live their lives as they are. So hopefully the show can start that off.

Jeanette: I can't top that. I don't want to let other moms down, so I feel a lot of pressure.

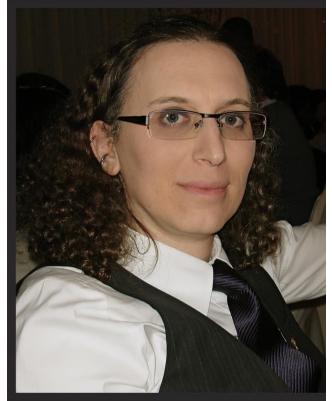
Jazz: But even if people have expectations set for you, or you feel that way, just push them all aside, because you have to be who you are and accept the fact that not everyone will agree with you, but it's just the way you are, and you can't change that.

Jeanette: Yes, ma'am!

Jazz: She's the best mom in the whole wide world.

Jazz has her own mermaid tail company, Purple Rainbow Tails, which raises money for transgender children. TransKids Purple Rainbow Foundation is devoted to raising awareness about gender dysphoria, offering support to families of transgender children, as well as trans kids directly. The foundation works to education and enlighten the educational and legal systems, and society to make it more inclusive and supportive of all transgender individuals.

GENDER IDENTITY PHOTOS



http://www.lauraajacobs.com/transgender-gender-nonconforming-issues



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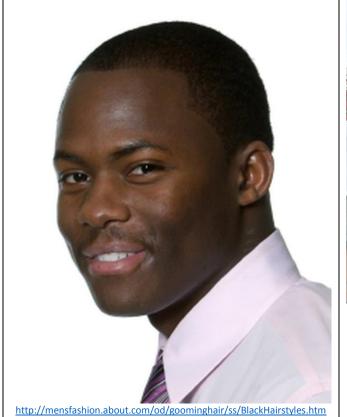
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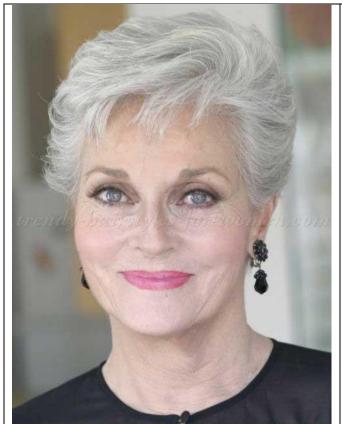


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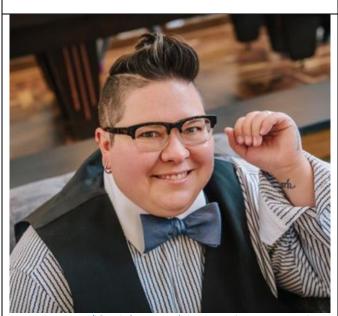




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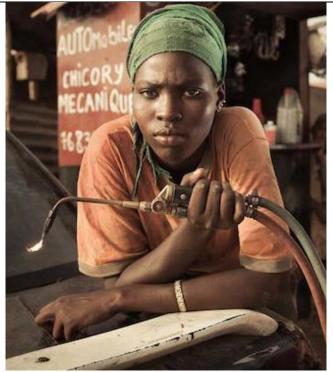
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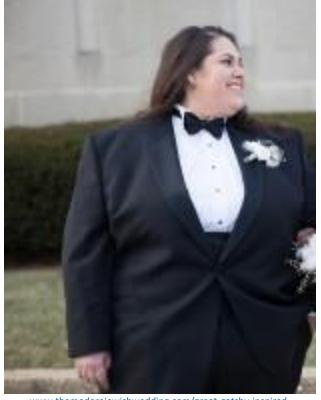
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GENDER SCRIPTS

Names:								
								_

Instructions:

- From the time we are born, we are told how we are supposed to act, dress and speak based on the sex we are assigned at birth—just as if we had been given a script and asked to follow it throughout our lives.
- In the space below, please provide examples of some of the messages you or people close to you have received about how we are supposed to behave based on whether someone is assigned "male" or "female" at birth.

someone is assigned "male" or "female" a	t birth.
ASSIGNED FEMALE	ASSIGNED MALE



Sexual Orientation, Behavior and Identity: How I Feel, What I Do, and Who I Am

A Lesson Plan from Rights, Respect, Responsibility: A K-12 Curriculum Fostering responsibility by respecting young people's rights to honest sexuality education.

NSES ALIGNMENT:

Students will be able to:

ID.12.CC.2 - Distinguish between sexual orientation, sexual behavior and sexual identity.

TARGET GRADE:

Grade 8 - Lesson 2

TIME: 50 Minutes

MATERIALS NEEDED:

- · Lesson PowerPoint
- Teacher's Resource: Yellow Flag Language
- · Projector and screen
- Computer with PowerPoint
- "Yellow Flag Language" chart on butcher paper, prepared as described
- · Masking tape
- · White board and marker
- "Sexual Orientation: Myth or Fact?" worksheet (one per student)
- "Sexual Orientation: Myth or Fact?" Answer Key
- Homework: "Who Do I Know?" (one per student)

ADVANCE PREPARATION FOR LESSON:

 Prepare and post a sheet of butcher paper with "Yellow Flag Language" on it and a drawing of a yellow flag next to the word "language" on the front board, over to the right side of the board so it isn't the main focus of the lesson. Fold the bottom up and tape it to the top so that students cannot see what is written on it when they come in.

LEARNING OBJECTIVES:

By the end of this lesson, students will be able to:

- 1. Name at least three different sexual orientations. [Knowledge]
- Describe the three components of sexual orientation (orientation, behavior and identity) and how they are unique from and connected to each other. [Knowledge]

A NOTE ABOUT LANGUAGE:

Language is really important and we've intentionally been very careful about our language throughout this curriculum. You may notice language throughout the curriculum that seems less familiar - using the pronoun "they" instead of "her" or "him," using gender neutral names in scenarios and role-plays and referring to "someone with a vulva" vs. a girl or woman. This is intended to make the curriculum inclusive of all genders and gender identities. You will need to determine for yourself how much and how often you can do this in your own school and classroom and should make adjustments accordingly.

PROCEDURE:

STEP 1: Tell students that today's lesson is going to be about sexual orientation. Say, "There's a lot of discussion in the media right now about sexual orientation – some of which is true, some of which isn't. Today's class is going to look at some of the language around sexual orientation and correct a lot of the misinformation that's out there."

Go to your "Yellow Flag Language" chart and take down the bottom half of the paper to reveal what is written there. Ask the class, "When you see a yellow flag out in the world – like by a construction site – what does that tend to mean?" Probe for the term or concept of "caution." Say, "A lot of times people are taught certain language around sexual orientation that is outright offensive or wrong – and other times, there are words that are sometimes okay and sometimes not. So depending on who or where we are, we may need to exercise caution before using them.



Sexual Orientation, Behavior and Identity: How I Feel, What I Do and Who I Am

A Lesson Plan from Rights, Respect, Responsibility: A K-12 Curriculum

As we go along, it's very possible that some of these words or phrases will come up. If I hear one – and if I use one, which I may do as I go through today's lesson – I'm going to walk over here and put that word or phrase up on the list. If you've used a word or phrase and you see me put it up, please know you've done nothing wrong – you've actually helped me teach!" (3 minutes)

STEP 2: "Let's start with that term itself - what comes to mind when you hear 'sexual orientation'?" Possible answers you might hear include:

- · Who you like
- · Who you're attracted to
- Who you have sex with
- The first time you have sex
- · Your sexual preference*

Write responses on the board. If any yellow flag language words (marked with an asterisk*) are shared, walk over to the "Yellow Flag Language" chart and record them there. Tell the class you'll come back to these terms later.

Go to Slide 6 and read the definition there. Say, "Two things should stand out to you about this definition – what do you think they are?" After eliciting a few responses, go to Slide 7 and point out the two key points about the definition: that people can be attracted to more than one sex or gender, and that it's about who you love – so you can know what your sexual orientation is even if you've never had sex or been in a relationship before. Explain that if you're in between relationships you don't stop being the orientation you are.

Ask, "What names do we have for various categories of sexual orientation? For example, if someone is attracted only to people of a different sex, what might that person call themselves?" (Probe for "heterosexual." Chances are, you will hear "straight." Be sure to say, "Straight – or heterosexual" as you put "straight" up on the yellow flag language list). Ask for other ideas, which may include:

- Straight*
- Gay
- Lesbian
- Homosexual*
- Bi or Bisexual
- Oueer*
- Pansexual
- Asexual

Note to the Teacher: The last three may not come up at all, and it's up to you as to whether you wish to explain them to your students. Some classes will need very basic information, while others may know a bit more or be a bit more knowledgeable and/or mature and thus be able to discuss the last two or three terms.

Once the list is up, go to Slide 8 and ask students what they think each term means. Probe for:

- Heterosexual Someone who is only attracted to people of a different gender
- Lesbian or gay Someone who is only attracted to someone of their same gender



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• **Bisexual** – Someone who may be attracted to people of their own gender AND to people of a different gender.

Note to the Teacher: If you choose to describe "pansexual" or if a student has used that term, this would be the time to explain what it means - that bisexual technically means "two" and pansexual means "all." So people who are attracted to more than two genders - including transgender individuals - may use the term "pansexual" rather than "bisexual." However, some bisexual people are also attracted to more than two genders. The term that a person uses to describe themself is personal and can be unique to each person.

- Queer* This term can be used in a number of positive ways: Someone may feel
 like the other categories are too restrictive and don't describe them accurately, or
 someone may wish to take back the negative meaning of the word and use it as a
 positive way of describing who they are. (Students often struggle with this term due
 its prior negative use.)
- Asexual If this term comes up, you would define it as someone who does not have feelings of sexual attraction. An asexual person can still fall in love with and be in romantic relationships with other people, but these relationships might not include a sexual relationship.

Note to the Teacher: Some students will add in "transgender," mostly because they have seen the acronym "LGBT." Be sure to tell them that being transgender is not about sexual orientation or who we are attracted to, but it is about how we understand our gender. For instance, a transgender male also has a sexual orientation; he can identity as straight, gay, bisexual, queer, etc.

(12 minutes)

STEP 3: Go through Slides 9-11 to explain the concepts of Orientation, Behavior, and Identity. Then continue through Slides 12 20 to discuss the examples.

Note to the Teacher: In the examples provided on the PowerPoint, students will be asked to describe how they think a student identifies based on the examples given. If you ask, "How does this person identify?" and a student says, "Confused!" it will be important to stop and talk about that so that all students feel safe and accepted. A helpful response might be, "Actually, that person isn't confused – someone who doesn't feel the same way might be because it's not them. But people feel the way they feel – it's not anyone else's right to label or judge others."

Ask for reactions and questions from the students (there may be a lot!). Students may also be very quiet—this is a lot of information—and it may confuse or overwhelm others. (10 minutes)

STEP 4: Say, "There's a lot of talk in the media about people of all different sexual orientations. Some of it is true, and a lot of it is incorrect. Let's do an activity now to take a look at some accurate information about sexual orientation and identity."

Distribute the "Sexual Orientation: Myth or Fact?" worksheet to each person. Tell them they have about 5 minutes in which to complete it individually.



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After about 5 minutes, call time and ask them to pair up with someone sitting nearby to compare their answers. If there are questions where their answers don't match, ask them to circle them to discuss in the larger group. (7 minutes)

STEP 5: Using the "Sexual Orientation: Myth or Fact" Answer Key, go through each question, asking different students to volunteer their answers. Have the class follow along and correct any they may have gotten incorrect. (13 minutes)

STEP 6: Say, "Before we finish up, I want to come back to this Yellow Flag Language list here on the board." Go through each of the terms that are up there, supplementing as necessary from the Teacher's Resource: Yellow Flag Language. Once you have gone through them all, ask if there are any other terms students have heard and if so, add them to the list and talk about why they should be used with caution.

Note to the Teacher: Students might use derogatory terms here, such as "faggot" or "dyke" or "homo." If any of these terms are used, be sure to explain that they are red flag words, not yellow flag words, and should never be used because they are offensive. However, some red flag words have been reclaimed—such as "queer"—and may be used by an individual to describe themselves, which does not mean that someone should use these terms casually to talk about others.

Distribute and explain the "Who Do I Know?" homework assignment. You may want to explain to students that they should only use the name of someone they know if it's okay with that person, and that it's okay to not use their names. Also, remind them that "transgender" and "trans" refer to gender identity but not sexual orientation. Ask students to hand the homework in during the next class session. (5 minutes)

RECOMMENDED ASSESSMENT OF LEARNING OBJECTIVES AT CONCLUSION OF LESSON:

The content provision of the lesson is designed to be an interactive lecture. As such, the contributions of the class and responses to probing questions will be used by the teacher to ensure they have achieved Learning Objectives 1 and 2.

HOMEWORK:

"Who Do I Know?" homework sheet.

Note: The Orientation, Behavior, and Identity concept has been used by many sexuality educators over the years and is not an original concept to this curriculum. Original author of framing orientation in this way is unknown.



Teacher's Guide: Yellow Flag Language

The following is a guide to some of the terms relating to sexual orientation that belong on the yellow flag list and therefore should be used with caution. If some or none of these are used by the students in class, be sure to add them to the list yourself and explain them to the class.

"Homosexual" was used as a mental health diagnosis until the early 1980s when it was no longer seen as a mental disorder by the American Psychological Association.
Today, "homosexual" is often shortened to "homo," which is used as an insult to people who are or are perceived to be gay (or to heterosexual people to mean they are stupid, like "that's so gay").
Yet, it is also an accurate category of sexual orientation that some people still use. If someone identifies as "homosexual," someone else can't say "you can't use that term." It's their right to use whatever term feels right to them.
The opposite of "straight" is "bent" or al "crooked." This can imply that there is something wrong with someone who is not heterosexual.
"Preference" is a term that's used only about non-heterosexual orientations. It is intended to minimize those who are anything other than heterosexual by implying that their orientation is simply something they prefer rather than who they are. This is a "yellow flag" term because bisexual and pansexual people may say, "I am attracted to people of all genders, but I tend to prefer being in relationships with" In this case, the use of the word "preference" is correct.



Teacher's Guide: Yellow Flag Language

YELLOW FLAG TERM	RECOMMENDED TERM	REASON(S)					
Choice	It depends on: Orientation Behavior Identity	Implying that a person's orientation is a choice is offensive. Heterosexual people do not choose to be heterosexual, it's who they are. Similarly, lesbian, gay, bisexual and other people do not choose to be their orientation, they are who they are. People do not choose their orientation (their feelings of attraction). They DO, however, choose how, whether, and with whom they act on their feelings (behavior). They also choose what to call themselves (identity). This is why "choice" is a cautionary word and depends on how it is used.					
Sexual Lifestyle or Gay Lifestyle	Sexual Orientation	"Lifestyle" refers to the manner in which a person lives their life. There is no such thing as one heterosexual lifestyle. Heterosexual people live very diverse lives. They have all different kinds of jobs. They are in short- and long-term relationships, they marry, they divorce, they have children, they travel, etc. Lesbian, gay, bisexual and other people also lead very diverse lives. They have all different kinds of jobs. They are in short- and long-term relationships, they marry, they divorce, they have children, they travel, etc. "Lifestyle" or "gay lifestyle" is a term used to make heterosexual people feel afraid of and disgusted by non-heterosexual people by creating stereotypes about how they live. When someone is depicted as different and less than human, it is easier to discriminate against them. Therefore, sexual orientation is always preferred over these terms.					
Queer	Queer, if	Many people who belong to social or power minority groups will sometimes use offensive terms among themselves in order to defuse the negative power of these words. Many lesbian, gay, bisexual and other people identify as "queer" and many do not. Some will call each other "fags" and "dykes," which we consider to be red flag words. This will be confusing to heterosexual people who don't understand why it is offensive when they do the same. As a general rule, it is best to use lesbian, gay, bisexual, and heterosexual. Do not use "queer" or any other term unless a person tells you that that is how they prefer to be identified.					

SEXUAL ORIENTATION: MYTH OR FACT? Answer Key

 You can tell whether someone is heterosexual, lesbian or gay, or bisexual by the way they look or act.

MYTH

The answer here is actually "not necessarily." Sometimes a person will act in a way that fulfills stereotypes about a heterosexual, lesbian or gay, or bisexual person. But people act, speak, and dress in all different ways, regardless of their sexual orientation. They have many different kinds of families, jobs, and interests. So while someone may guess correctly that a person is a particular sexual orientation, they could guess the same about someone with similar characteristics and be completely wrong. When in doubt, ask—or better yet, wait for them to share with you who they are. We all have a right to decide when we want to share personal information about ourselves with others.

2. Most people know what their sexual orientation is by the time they are 13 years old.

MYTH

It's different for everyone. Some people know their sexual orientation from a very young age. Many children who do not end up identifying as heterosexual say they had a sense of being "different" growing up, but they didn't necessarily have the language to articulate it. Others are sure they are one orientation, and then they come to discover later that they are something different. Still others know very well what orientation they are but act in ways that will enable them to conceal it. This is particularly risky when it comes to safer sexual behaviors; for example, if someone were to get pregnant or get someone pregnant in order to hide that they are not heterosexual.

3. The way parents raise their children determines whether a child is heterosexual, lesbian or gay, or bisexual.

MYTH

The vast majority of lesbian, gay, bisexual, heterosexual, and other people were raised by heterosexual parents or caregivers. Similarly, there are lesbian, gay, bisexual, and other parents and caregivers who raise heterosexual children. A parent or caregiver does not determine a child's orientation by how they behave with their child, by their own orientation, or by the activities their children do at home or out in the world. (For example, playing with dolls does not "make" a boy gay—he may be and he may not be, but his orientation was already determined before he started playing with dolls.)

4. If you try really hard, you can change your sexual orientation—regardless of whether you are heterosexual, lesbian or gay, or bisexual.

MYTH

Nope. You can change your BEHAVIORS, you can change your IDENTITY—but you can't

change your ORIENTATION or how you feel. Feelings of attraction are discovered, not chosen. Sexual or attraction orientation isn't something a person can turn on and off like a light switch. We don't choose who we are attracted to. Sometimes we can discover new feelings of attraction—for example, always being attracted to one gender and then finding someone or others of a different gender attractive later in life. That is different from sitting down and trying to change the way you feel—or from going to therapy or to church to try to influence your feelings. That does not work and can end up doing real psychological or emotional harm.

5. In a same-sex relationship, one person always plays a "male" or "butch" role, and the other always plays a "female" or "femme" role.

MYTH

Like in question number one, this is also a "not necessarily" answer. Most societies are stuck in a binary gender perspective—meaning that there needs to be a man figure and a woman figure in a relationship for it to work. As a result, people will look to a stereotypically "masculine" person to fulfill the "male" role in a same-gender relationship and a "feminine" person to fulfill the "female" role. In some relationships people do express characteristics that may be judged by some to be either "masculine" or "feminine", but gender doesn't necessarily determine this. For example, in a different-gender relationship, a female partner may support the family financially while her male partner is a stay-at-home dad and raises the children. In a lesbian or gay relationship, one partner may make more money and the other may stay home and raise children. It is circumstance that causes these decisions to be made, not the desire to "be like a man" or "be like a woman."

6. The majority of people in the world with HIV or AIDS are gay men.

MYTH

Approximately 37 million people around the world are living with HIV or AIDS. Women make up about half of those cases, and children and men make up the rest. The vast majority of people living with HIV around the world are women who contracted HIV from a male partner. Also, keep in mind that many people have same-sex behaviors but do not identify as gay or lesbian.

7. With the 2015 U.S. Supreme Court Decision on marriage equality, lesbian, gay, and bisexual people now have all the same legal rights as heterosexual people.

MYTH

The U.S. Supreme Court decision granting the right for same-sex couples to marry throughout the United States only applies to the right to legally marry. In many states, lesbian, gay, and bisexual people can still be discriminated against in the workplace, in housing situations, and in medical settings. The right to marry was huge decision relating to equal rights, but there is much work left to do to eliminate prejudice and stigma for lesbian, gay, and bisexual people.

SEXUAL ORIENTATION: MYTH OR FACT?

Name	Date				
Instructions : Decide whether each corresponding response.	h of the statements is a myth or a fact and circle the				
1. You can tell whether someone they look or act.	is heterosexual, lesbian or gay, or bisexual by the way				
МҮТН	FACT				
2. Most people know what their s	sexual orientation is by the time they are 13 years old.				
MYTH	FACT				
3. The way parents raise their chi lesbian or gay, or bisexual.	ldren determines whether a child is heterosexual,				
MYTH	FACT				
4. If you try really hard, you can o you are heterosexual, lesbian or §	hange your sexual orientation—regardless of whether gay, or bisexual.				
МҮТН	FACT				
5. In a same-sex relationship, one other always plays a "female" or	e person always plays a "male" or "butch" role, and the "femme" role.				
МҮТН	FACT				
6. The majority of people in the w	orld with HIV or AIDS are gay men.				
MYTH	FACT				
	urt Decision on marriage equality, lesbian, gay, and same legal rights as heterosexual people.				
MYTH	FACT				

Who Do I Know? Homework (Lesson 8-2)

Name	:			Date:			
people you each entry And remer include the information	ns: Please comp I have seen in the Prepresent a <i>diffe</i> Inber, a transgence In name of anyone In instead, refer In thes	e media, who erent orient ler (or trans) e you know t to them as a	ose sext cation th dentit) who mig u"friend	ual orientati nat we discu y is not a se ght not be co l," "family m	ions you k Issed in cla Xual orien Omfortabl ember," or	now. Please h. ass (also listed tation. Please e with you sha "team mate."	ave below). do not uring this What
1). Name:							
How You K	now Them:						
Are they:	Heterosexual	Lesbian	Gay	Bisexual	Queer	Other:	
What is on	e thing you learr	ned about b	eing tha	at orientatio	on from th	is person?	
	now Them:					Other	
-	Heterosexual		-		-		
What is on	e thing you learr	ned about be	eing tha	nt orientatio	on from th	is person?	
3). Name:					_		
How You K	now Them:						
Are they:	Heterosexual	Lesbian	Gay	Bisexual	Queer	Other:	
What is on	e thing you learr	ned about bo	eing tha	it orientatio	n from th	is person?	



MYTH VS. FACT: GENDER IDENTITY AND SEXUAL ORIENTATION

Name:		Date:
Instructions: Please myth or a fact by circ	read the following statements ar ling the appropriate answer.	nd indicate whether you think each is a
1. People can choose	their sexual orientation.	
	MYTH	FACT
2. People can choose	their gender identity.	
	MYTH	FACT
3. People can choose	their gender expression.	
	MYTH	FACT
4. You can usually te	ll a person's sexual orientation j	ust by looking at them.
	MYTH	FACT
5. A girl who is really	athletic is either a lesbian or tra	insgender.
	MYTH	FACT
6. A person can look	like a boy or a man and feel on th	ne inside like they are a girl or a woman.
	MYTH	FACT



We live in a society which deems **transgender people** (those who identify as a gender other than that which they were assigned at birth) as being a type of "other," which results in incredibly unjust obstacles. But because **cisgender people** (those who identify with the gender they were assigned at birth) do not encounter these obstacles, or do so at a much lower frequency, they may not realize that they have some advantages as they move through the world. The subtle (and sometimes, very explicit) advantages that cisgender people may experience in a society that does not "favor" transgender people is what we call "cis privilege." http://everydayfeminism.com/2016/02/130-examples-cis-privilege/

Cis Privilege in Education

- 1. You are less likely to face harassment or violence for using the bathroom or locker room that aligns with your gender.
- 2. You are less likely to be asked to wear a school uniform that does not align with your gender.
- 3. You are less likely to be bullied by students and faculty alike on the basis of your gender identity or expression.
- 4. You are less likely to face resistance when asking to be recognized by your chosen name.
- 5. You are less likely to face opposition when asking that your chosen name be listed in programs, certificates, class rosters, and other places where your name might appear.
- 6. You are less likely to be barred from attending gender-specific events, clubs, or schools, even when those spaces are intended for people of your gender.
- 7. You don't have to worry that a health center on your campus will not be able to provide you with competent care on the basis of your gender identity or expression.
- 8. The curriculum at your school is more likely to center the experiences and perspectives of people who share your experience of gender.
- 9. You will not have a teacher, classmate, counselor, or administrator question the authenticity of your gender.
- 10. You are less likely to drop out of school due to the harassment you face on the basis of gender identity or expression.
- 11. You won't be questioned or interrogated about your genitals by others while at school.
- 12. You will not have your academic performance impacted due to the anguish of gender dysphoria, bullying, and inadequate social support.
- 13. You are less likely to be misgendered by others while at school.

- 14. You are less likely to hide your gender identity or expression due to a fear of bullying, suspension, or even expulsion.
- 15. You are less likely to face pressures to alter your gender expression for the comfort of those around you.



nonbinary IDENTITIES

Many people-including transgender people (those who do not identify with the sex they were assigned at birth)-identify as either male or female, but some people do not fit neatly or identify within the categories "male" or "female."

For example, some people have a gender that blends elements of being a man or a woman or a gender that is different than either male or female. Some people don't identify with gender at all and some people's gender is fluid and changes over time.

Some societies-like ours-tend to recognize just two genders-male and female. The idea that there are only two genders is called a "gender binary." Therefore, "nonbinary" is one term people use to describe genders that don't fall into one of these two categories of male or female.

Facts about nonbinary people

Nonbinary people are nothing new.

Nonbinary people are not confused about their gender identity or following a new fadnonbinary identities have been recognized for millenia by cultrues and societies around the world.

Most transgender people are not nonbinary. While some transgender people are nonbinary, most transgender people have an identity that is either male or female.

Respecting nonbinary people

TERMINOLOGY

Transgender: a word that describes people whose gender identity that does NOT match the sex they were assigned at birth.

Cisgender: a word that describes people whose gender identity DOES match the sex they were assigned at birth

Gender Binary: a system that categorizes gender as falling into one of two categories-male/female.

Nonbinary people may use different pronouns. Since some nonbinary people do not identify as "male" or "female," they may have pronouns other than "he" or "she." Although some nonbinary people use "he/she" pronouns, many use the pronouns "they/them" (ex: "I am meeting Cris tomorrow. They are really excited!") or other pronouns. If you are unsure, just ask!

For more information, questions, or LGBTQIA+ support, contact the Youth Advocacy Department





(pronounced "La-teen-ex")

WHAT DOES "LATINX" MEAN???

Latinx is the gender-neutral alternative to Latino and/or Latina. Used by scholars, activists and journalists, Latinx is quickly gaining popularity among the general public. It's part of a "linguistic revolution" that aims to move beyond gender binaries and is inclusive of the intersecting identities of Latin American descendants. In addition to men and women from all racial backgrounds, Latinx also makes room for people who are trans, queer, agender, nonbinary, gender non-conforming or gender fluid.



Health and Safety of LGBT Youth

IN SAN DIEGO COUNTY

The California Healthy Kids Survey (CHKS) has collected health information from middle and high school students for over 20 years. The survey questions cover a wide range of health-related topics, including physical activity, nutrition, drug use, bullying, mental health, and protective factors at school. Beginning with the 2013-15 administration of the survey, students were asked to self-identify as heterosexual, gay, lesbian, or bisexual. Students were also asked to self-identify as male, female, or transgender. These two questions allow for the comparison of health-related behaviors and experiences of lesbian, gay, bisexual, and transgender youth (LGBT) with those students who do not identify as LGBT (non-LGBT).

Chapman University in conjunction with the ACLU of Southern California has analyzed the data from the 2015 administration of the CHKS to better understand the health-related status of LGBT youth in San Diego County.

How Many LGBT Youth?

In 2013, 5.0% of California middle and high school students identified as lesbian, gay, or bisexual, with 95% of students identifying as non-LGB and 0.8% of students identifying as transgender. In San Diego County, the number of students identifying as LGB was 5.4% and the number identifying as transgender was 1.0% in 2015. Based on enrollment for schools in San Diego County for the 2014/2015 school year this percentage translates to approximately 12,587 students identifying as LGB in this age group and 2,331 identifying as transgender. The following are some of the highlights from the San Diego County CHKS 2015 administration.

Attendance

LGB Youth were more likely (3.7%) than their non-LGB peers (1.2%) to miss school in the previous 30 days because they did not feel safe at school. Transgender youth were also more likely (5.8%) to miss school than non-transgender students for the same reason (1.4%).

Safety

Transgender youth were 3 times more likely than their non-transgender peers to report not feeling safe at school (15.8% versus 5.2%). For LGB youth, 9.8% admitted to not feeling safe at school compared with 5.0% for their non-LGB peers. Transgender youth (23.7%) were twice

as likely to report being afraid of being beaten up than their non-transgender peers (11.6%). The same is true for LGB youth (22.6% versus 10.9%).

San Diego County Middle School and High School Youth 12,587 LGB 2,331 Transgender

Bullying

Transgender youth were more likely (31.1%) to report having been pushed, shoved, slapped, hit, kicked by someone 1 or more times on a school campus than their non-transgender peers (19.5%). LGB youth were also more likely to report the same (29.2% versus 18.9%).

LGB youth were more likely to report having sexual jokes, comments, or gestures directed at them at school (55.5% versus 29.0%). Transgender youth reported similar experiences with 50.7% reporting being the target of sexual jokes, comments, or gestures at school versus 30.6% for non-transgender students.

Almost half (43.0%) of self-identified LGB youth report being bullied because they were lesbian, gay, bisexual or someone thought they were. Fewer non-LGB youth (5.0%) report being bullied because someone thought they were lesbian, gay or bisexual. Among transgender youth, 38.8% were bullied for the same reason versus 7.2% among non-transgender youth.

Alcohol and Drug Use

Looking at lifetime use of alcohol and other drugs across grades 7 through 12, there were noticeable differences. Lifetime use measures the number of youth who have ever used a particular drug. Lifetime use of alcohol was higher for LGB youth (40.9%) than for their non-LGB peers (23.1%). Transgender youth also showed a higher rate (34.1%) than non-transgender youth (24.2%).

Lifetime use of marijuana was 28.4% for LGB youth and 14.9% for youth identifying as non-LGB. A similar disparity was evident for transgender youth (27.1% versus 15.7%).

LGB youth reported a higher use of methamphetamine and cocaine during their lifetime than their non-LGB peers (4.1% versus 1.6%) with transgender youth reporting a similar disparity (6.3% versus 1.8%).

In an average class of 30 students in San Diego County, two of those students will identify as LGBT

Mental Health

The 2015 data revealed indicators of mental health challenges for LGBT youth. When asked *Did you miss school because you felt very sad, hopeless, anxious, stressed, or angry during the past thirty days?* 28.9% of LGB responded in the affirmative, compared with 8.2% of their non-LGB peers. Transgender youth reported similar experiences with 26.5% having missed school because they felt very sad, hopeless, anxious, stressed, or angry versus 9.4% of non-transgender youth.

When asked *Did you seriously consider attempting suicide during the past 12 months?* 46.2% of LGB youth reported that they had seriously considered attempting suicide versus 11.9% of their non-LGB peers. Similar results were found for transgender youth, with 44.8% admitting to having seriously considered suicide versus 14.1% of non-transgender youth. When translated into real numbers, this indicates that in one year in San Diego County approximately 6,859 middle school and high school LGBT youth seriously considered attempting suicide.

Protective Factors

Protective factors are the conditions and structures at a school that help to shield students from potential harmful outcomes. These are the human relationships and programs at a school site that "protect" against the risk factors already mentioned here.

Youth Engagement and Connection to School

LGB youth were more likely to say that they did not feel close to people at this school than did their non-LGB peers (19.2% versus 11.5%). Transgender-identified students were even less likely to report feeling close to people at school (22.7%) in comparison to non-transgender students (11.9%).

When presented with the statement *I feel like I am a part of this school*, LGB youth were less likely to agree with the statement (22.9%) when compared with non-LGB peers (13.6%). Transgender youth were more than twice as likely to say that they did not feel like they were a part of their school (32.6%) as compared to non-transgender students (14.1%).

Responding to the statement *Teachers at my school treat students fairly*, 17.7% of LGB identified students were more likely to disagree with the statement compared to 14.3% of their non-LGB peers. Transgender students were even more likely to disagree with the statement than non-transgender students (29.7% versus 14.4%).

Moving Forward

The results of the CHKS survey responses highlight the importance of increasing positive connections and protective factors as a way to create safe and inclusive environments for our lesbian, gay, bisexual and transgender youth. These protective factors should:

- Guarantee that all youth—and especially LGBT identified youth—have caring and supportive adults to speak with and to mentor them.
- Create school environments that are safe, supportive, and inclusive of all.
- Implement policies, programs, and resources that promote health equity among LGBT youth.
- Create opportunities for LGBT youth to engage in meaningful participation in schools and communities.





The California Health Kids Survey was developed by WestEd under contract to the California Department of Education. The data analysis was prepared by Kris DePedro, PhD, and John Elfers, PhD, in conjunction with the ACLU of California and Chapman University. CONTACT: Kris DePedro, PhD depedro@chapman.edu