

WHAT SCHOOLS CAN DO TO HELP GAY/LESBIAN/BISEXUAL YOUTH: A HARM REDUCTION APPROACH

Katherine van Wormer and Robin McKinney

ABSTRACT

In recognition of the fact that heterosexism is one of the most significant realities of adolescents' day-to-day experiences in school, this paper examines the school environment in terms of disempowering and empowering aspects. It is argued that failure to take a proactive stance to help youth with gender identity issues is a major cause of psychological problems, leading in some cases to suicide, alcohol and other drug abuse, and homelessness.

INTRODUCTION

The harm reduction model is gaining currency in the addictions field worldwide. The theme of this approach, from the treatment perspective, is to "meet clients where they are" and help them protect themselves from harm. According to Denning (2000), "The primary principle is to accept the fact that people do engage in high-risk behaviors and to commit to helping those people reduce the harm associated with their behavior" (p. 4). The harm reduction approach is relevant for gay and lesbian youth, who are the same as all young people when it comes to many of the risks related to early and secretive sexual activity, accompanied, as it so often is, by alcohol and other drug use. Here, however, problems are compounded by the absence of social support, adult role models, and relevant sex education within a heterosexist school environment.

We do not need extensive research to understand the situation: mistreatment of youth who seem different, mistreatment by other youth

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Robin McKinney, Department of Social Work, Western Michigan University, Kalamazoo.

Requests for reprints should be sent to Katherine van Wormer, Department of Social Work, University of Northern Iowa, 36 Sabin Hall, Cedar Falls, Iowa 50614. E-mail: vanwormer@uni.edu

who fear, deep down, that they may be different too. Further, those who are taunted the most generally lack the protection of family members, teachers, and religious leaders, the people to whom youth usually turn for support. This paper discusses the social dynamics of school harassment and then describes promising programs that are being developed for the benefit of all children. An argument is made for schools to hire, not fire, openly gay and lesbian teachers to serve as positive role models, and for every school to employ one or more social workers to help create a climate of support and acceptance.

BACKGROUND

Data, limited though they may be, from various international sources on suicide rates, substance-abuse involvement, and other self-destructive behaviors indicate that the school system in the U.S., Europe, and to a lesser extent Canada is largely a toxic environment for gender-nonconforming girls and boys. The fact that these data are relatively limited reflects the lack of research that has been conducted on the intense discrimination that some children experience. Research on strategies for reducing homophobia (fear of homosexuality) and heterosexism (neglect of, and prejudice against, nonheterosexuals) is also sadly lacking.

When formal instruction about sexuality occurs in school classrooms, homosexuality often is omitted or mentioned in a negative context. By addressing only intercourse prevention, abstinence-only programs present a very heterosexist view of sexuality. The assumption is that there are no gay, lesbian, and bisexual students in the class or that they do not count. Schools, which could do so much, are doing little.

Statistics on verbal, physical, and sexual harassment at school tell the same story worldwide. A survey by the Gay, Lesbian and Straight Education Network (GLSEN, 1999) showed that 90% of students from across the U.S. had heard anti-gay epithets at school, many from teachers. Sixty-nine percent of the gay and lesbian teens reported verbal or physical harassment at school.

In the United Kingdom, attention is being devoted to the fate of schoolchildren who face intimidation (Charles, 2000). In an interview of 190 lesbian and gay young adults who were bullied at school, researchers found that four out of ten bullied about their sexuality attempted suicide or harmed themselves by cutting or burning their skin. Many dropped out of school. More than one in six suffered post-traumatic stress disorder in later life. It was found that the bullying started

at age ten, before they had even begun to think of their sexual orientation. It was concluded that the schools were doing little about the problem; some counselors were even making things worse.

In parts of the Middle East, all forms of out-of-wedlock sexuality are suppressed with a vengeance: adulterers and gays are beaten or worse. In a climate of severe oppression of women, lesbians rarely reveal their sexual orientation.

In the U.S., it took the tragedy at Columbine High School, where unpopular students who did not fit in with the masculinized culture of their school went on a murder/suicide rampage, to finally spark a national debate on the culture of harassment and hatred that can lead to violence. Columbine, in fact, marked the fourth time during the prior two years that a student-on-student attack in U.S. public schools involved anti-gay taunting (Chibbaro, 1999). This tragedy has provided the impetus to hire more school counselors, psychologists, and social workers (Johnston, 1999).

REVIEW OF THE LITERATURE

Many researchers agree that the prevalence of homophobia is by far the most damaging influence on lesbian, gay, and bisexual youth (Gibson, 1989; Hunter & Schaecher, 1987; Lock, 1999; Remafedi, Farrow, & Deisher, 1991; Slavin, 2000; Tully, 2000). Young people who identify as gay or lesbian, and even those who do not but are perceived as such, are potential victims of verbal and physical assaults. Dennis and Harlow (1986) note that lesbian and gay adolescents quickly learn that public high school often means "ridicule from teachers, violent harassment from fellow students, and refusals from administrators to punish verbal and physical attacks upon these youth" (p. 447). Hetrick and Martin (1987) indicate that "violence against the homosexually oriented is endemic, particularly for the homosexual adolescent. These acts of violence range from the slap in the school hallway to rape" (p. 29). The reluctance of school officials to protect gay students and to punish perpetrators of harassment shows, at the very least, their tacit acceptance of homophobia. High levels of personal prejudice, ignorance, and fear results in negligible intervention by teachers, counselors, administrators, and school board members when homophobic attacks occur (Uribe & Harbeck, 1991).

Additionally, the continued perception that homosexuality is abnormal contributes to a sanctioned culture of intolerance and hatred toward people who are lesbian and gay, and one of the manifestations

of this intolerance and hatred is violence (e.g., the torture and killing of Matthew Shepard). Nowhere are these manifestations of intolerance and hatred more apparent than within the primary contexts of adolescent development—schools, families, and peers. Teachers often remain silent when students taunt other students with anti-gay remarks or express anti-gay sentiments; parents may respond to their gay and lesbian children with verbal harassment and physical violence (Comstock, 1991; GLSEN, 1999). A frightening documentation of the extent to which children who are gender nonconforming are taunted on the school playground is provided in the Human Rights Watch (2001) report “Hatred in the Hallways.”

SUICIDE RISK

According to a report by the U.S. Department of Health and Human Services (1989), gay and lesbian youth are two to three times more likely to commit suicide than other youth; 30% of all completed youth suicides are related to issues of sexual identity. Whereas only one in ten heterosexual teens attempts suicide, two out of three gay or lesbian teens attempt suicide (Whitlock, 1989). In a survey of 221 self-identified gay, lesbian, and bisexual youth across the United States and Canada, Proctor and Groze (1994) found that 40.3% had attempted suicide. Those who had attempted suicide reported difficulties in the areas of family relations, school performance, peer relations, and self-perception.

Risk factors for suicide, such as gender nonconformity, appear to be particularly salient with regard to boys and men (Bower, 1999). Surveys large enough to examine sex differences, such as those done in Massachusetts and Minnesota, have reported an association between homosexuality and suicide for males only (Remafedi, 1999). This finding seems consistent with our knowledge of sex role socialization. Remafedi notes that “tomboys” are more accepted by their peers and parents than are “sissy” boys.

In a Canadian study (King, 1996), young adult males from a cross-section of the population answered questions on portable computers. (This new technique of having respondents answer questions via computer for more privacy lends special credence to the findings.) Results were startling in that gays and bisexuals were found to have nearly fourteen times the suicide ideation of heterosexual males. Interestingly, celibate males were found to have the highest rate of attempted suicide. The sample size for celibate males, however, was extremely small.

Remafedi, Farrow, and Deisher (1991) found that severe family problems, along with feminine gender role characteristics, were significantly related to suicide attempts among young males. Family rejection and substance abuse problems among gay youth are known to be interrelated as well (Uribe & Harbeck, 1991).

Girls are also somewhat protected by the fact that they recognize their lesbianism at a later age, on average, than do boys. This fact, that many are mature women when they resolve their sexual identity crisis—being lesbian in a straight society—gives them time to develop greater coping skills (van Wormer, Wells, & Boes, 2000). Teenage lesbians are not immune to problems, however.

A retro-analysis of the previously noted suicide study sponsored by the U.S. government clarified some points concerning gender differences (“Youth at Risk,” 1997). Of the 36,000 respondents, only 131 teenage boys and 144 girls identified themselves as gay, lesbian, or bisexual. Twenty-eight percent of the gay boys compared to 4.2% of the heterosexual boys reported that they had attempted suicide; the figures were 20% and 14%, respectively, for girls. Gender nonconformity is a much more important issue for males than for females, as Remafedi has pointed out.

Bullying by peers, a history of family violence, substance abuse, and sexual identity conflicts are among the conditions predisposing young people to attempt or commit suicide (van Wormer et al., 2000). Gay and lesbian youth may be highly vulnerable on every count. As suggested in the literature, conflict surrounding the disclosure of sexual orientation may influence young people to attempt suicide if they are otherwise predisposed (Friedman & Downey, 1994).

Rejection by peers, teachers, and parents (or even the fear of rejection) is often internalized as self-hatred and externalized as self-destructive behavior. Jennings (1994) provides the following case study of a gay male: “I attacked anyone who suggested that gay people might be entitled to some rights, too, and I was the biggest teller of fag jokes at Radford High. But what I really hated was myself, and this I couldn’t escape from, no matter how drunk or stoned I got, which I was doing on an almost daily basis by senior year”(p. 5). He went on to swallow a bottle of aspirin after his first homosexual experience. Discovered in time, his story had a happy ending. He came out of the closet and, as an openly gay person, he thrived.

Much of the suicidal behavior by young people is not recognized as such. For example, gay youth pushed out of their homes because of an “unacceptable lifestyle” may act in dangerous ways and court death. They may live on the streets (with its inherent risks) and gravitate

toward illegal drug use (with the possibility of overdosing), as well as engage in promiscuous sexual activity (with the threat of AIDS), as a means of killing themselves.

HOMELESSNESS

Homelessness is a significant problem for gay and lesbian youth who come out to their parents. In the U.S., an estimated 125,000 homeless teenagers identify themselves as gay or lesbian, and half of them say they were thrown out of their homes (Chung, 1999). Some of the parents tried to force them to be “reprogrammed” as heterosexual first.

There are very few homeless shelters or refuges specifically for gay and lesbian youth in the U.S. There are more in Britain, where a creative solution to the twin issues of homelessness and the desire of gay and lesbian couples to have children has been implemented. Youth who have been expelled from their homes because of their sexual orientation are being placed in the care of gay and lesbian couples (“Handled with Care,” 1996).

FAMILY ISSUES AND RELIGION

Gay and lesbian children growing up in strict religious families are apt to experience dissonance between their spirituality and sexuality. Sometimes the guilt feelings are overwhelming.

In the U.S., the religious right has prevented school systems from addressing the very issue that is killing kids (van Wormer et al., 2000). Accordingly, homophobia in schools is rampant: gay and lesbian teachers who could help are instead silent for fear of losing their jobs. As long as gay and lesbian teachers remain closeted to avoid the wrath of the homophobic community, there will be a lack of positive role models for gay and lesbian children (Dempsey, 1994).

A significant portion of the boys in the Uribe and Harbeck (1991) study reported early same-sex experiences that parallel the “date rape” experiences of many young women. Yet, because of the stigma of homosexual involvement, these youth felt they could tell no one—not relatives, not teachers, not religious leaders.

Religious oppression notwithstanding, some Christian churches and other religious organizations have embraced lesbians and gays. Even in the Bible Belt, the Metropolitan Community Church boasts a predominantly gay and lesbian congregation. Others have found a spiritual home in Buddhist groups and among Unitarians and Quakers (van Wormer et al., 2000).

SELF-HATRED

Kasl (1989) sums up the reality for the young lesbian: "Keeping secrets, feeling defective, not fitting in, knowing that your parents are uneasy about you at best and threatened and afraid of you at worst create a fertile breeding ground for despair, loneliness and self-hatred" (p. 212). Women whose developmental years are marked by this kind of pain, Kasl further states, are highly vulnerable to addiction. The link between early childhood distress and later substance abuse and other self-destructive behavior is well documented (van Wormer & Davis, 2003).

Califia (1994) attributes the refusal of many young people to practice safe sex as a sign of self-hatred. "We're guilty about being queer," Califia writes, "We can't get rid of all that programming that says we are inferior, filthy, disgusting, godless, and pathological" (p. 22).

HARM REDUCTION

The high rates of suicide, post-traumatic stress disorder, and substance abuse among gay and lesbian youth are indications of internalized homophobia that results from growing up as a sexual minority in a heterosexist society. When people internalize the rejection that has been directed their way, they are less protective of themselves and more likely to engage in high-risk behaviors such as heavy drinking and drug use. Young gay males thus are more apt to fail to practice safe-sex, exposing themselves to HIV infection; bisexual females are at some risk of doing the same.

The jock culture of many high schools creates a climate in which males, insecure in their own masculinity, attack other males whom they perceive as feminine. Similarly, girls whose sex role behavior is nonnormative may be taunted relentlessly. A harm reduction or public health approach is therefore vital. Preventive measures need to be aimed at all school-age youth to help them with sexual identity issues. Individual counseling is needed for victims to help them cope and adjust to their sexual orientation, but it is also needed for bullies to help them get at the source of their displaced hostility.

In the wake of the 1998 murder of Matthew Shepard in Wyoming, the Parents, Families and Friends of Lesbians and Gays (PFLAG) Safe Schools Program has been implemented by 150 chapters in the U.S. to work with parent-teacher associations, press for nondiscrimination policies, train teachers in crisis intervention, engage in speaker panels, donate literature to libraries, and support gay/straight alliances (Bee-

man, 1999). Gay/straight alliances have also been a major factor in helping teenagers create openly gay lives (Peysner & Lorch, 2000). There are an estimated 700 of these alliances worldwide.

Harm reduction principles for developing school climates that will avert violence are described by Dwyer, Osher, and Hoffman (2000). They advocate use of "Early Warning, Timely Response," a guide produced by the U.S. Department of Education and Justice to minimize the risk of violence through early intervention. Dwyer et al. warn against doing harm, specifically the importance of not stigmatizing high-risk students by the use of negative labels. Strategies include inculcating respect for diversity, addressing emotional problems through individualized intervention, and monitoring students wherever they congregate.

School authorities have an important role to play in helping children feel safe. Olweus (2001), who has studied bullying in Scandinavia, has introduced the Bullying Prevention Programme. In addition to being offered throughout Norway, this program has been shown to be highly effective in the U.S. The program combines adult awareness, parent meetings, strict classroom rules about bullying, and regular work with students, and has been found to create a safe environment for all students. Whole-school, anti-bullying programs work because of the active participation of bystanders, who take responsibility and intervene to defuse the power that the bully has over a victim.

Toronto, Canada, has approximately 90 school-based social workers who deal with a wide variety of issues, including those pertaining to sexual orientation and gender identity. One social worker, in fact, is designated to work exclusively with gay and lesbian youth in the schools (Loughborough, 2000)

The state of Massachusetts has led the U.S. in educating teachers to discuss homosexuality as well as heterosexuality in age-appropriate ways so that all students will feel included (Lipkin, 2000). The Massachusetts Safe Schools Program seeks to dispel myths about the behavior of gender-nonconforming youth. In British Columbia, Canada, PFLAG has sponsored the Safe Spaces Program. Such safe spaces are vital for gay and lesbian adolescents given the amount of abuse they often are forced to endure (Slavin, 2000). Opposition from the religious right has hindered progress in initiating programs such as these aimed at reducing homophobia in U.S. schools; similar attempts by Canada's fundamentalist right have been less successful (Dwyer, 1997).

CONCLUSION

The area of social work practice with the greatest relevance for youth suicide prevention is school social work. Unfortunately, in the U.S. and Canada, school social work tends to be crisis-driven rather than prevention-driven (Loughborough, 2000). This needs to change. School bullying, which takes a tragic toll on gender-nonconforming youth, can and must be stopped through effective adult intervention. School social workers can provide teacher workshops on homophobia; representatives from gay, lesbian, and bisexual organizations can address the student body, preferably in small groups, to respond to personal issues and concerns.

School guidance counselors are well positioned to reach out to individual students, teachers, and the school community. Many guidance counselors, unfortunately, stress the academic and career aspects of counseling and neglect students' social needs. For these and other adults who work closely with children, training in the area of sexuality and sexual diversity is essential, with self-awareness being an important element. They should consider such questions as the following: What are your thoughts and feelings about working with people who are lesbian, gay, or bisexual? Seeing lesbian, gay, and bisexual people being affectionate with one another? What are your thoughts about lesbian, gay, and bisexual people and issues of morality? What are your thoughts and feelings about teachers who are openly gay, lesbian, or bisexual? Gays and lesbians as parents, adoptive parents, or foster parents? Working with thirteen- and fourteen-year-olds who self-identify as lesbian, gay, or bisexual, or who are questioning their sexual orientation? Working with bullies who persecute gays, lesbians, and bisexuals?

As previously noted, adolescents dealing with uncertainty over issues related to sexual orientation, especially males, are at highest risk for suicide. Substance abuse, a common outcome of childhood emotional pain, increases the likelihood of suicide. School social workers and guidance counselors are in an ideal position to engage in suicide prevention work with all youth. Central to this work is to "be there" for young persons wrestling with sexual identity issues.

Due to public concern over deadly school shootings across the United States, federally funded block grants have been made widely available for a variety of school programs to increase the safety of all students. Social workers and school counselors are being hired with such grant money to conduct sensitivity training for teachers and parents. Peer-mediation programs have also been successfully implemented to assist

students in resolving conflict. The goal of these initiatives is to make school culture less heterosexist and eliminate the harassment of gays, lesbians, and bisexuals.

In the meantime, school counselors and community leaders can use their local PFLAG organization as a resource. In some high schools, PFLAG posters are displayed in hallways, providing phone numbers for students who have questions concerning sexual orientation. Suggestions for gay/lesbian-supportive counselors and teachers include the following: (a) help institute programs in the school to prevent bullying and verbal abuse of students who are deemed different; (b) organize workshops on sexual orientation for student leaders, faculty, and administrators; (c) provide school-based support for gay/lesbian youth and their families; (d) help organize and support gay/straight alliance groups; (e) invite gay, lesbian, and bisexual panels from a nearby college or university to conduct classroom discussions; (f) organize informal rap sessions for interested parties; (g) make sure the school library contains helpful information about homosexuality; (h) link students and their families with helpful community resources; (i) maintain strict confidentiality in all services provided; and (j) support education geared toward encouraging safer sex and discouraging high-risk behaviors including substance abuse, which is closely associated with unsafe sex (van Wormer et al., 2000, p. 100).

REFERENCES

- Aarons, L. (1995). *Prayers for Bobby: A mother's coming to terms with the suicide of her gay son*. San Francisco: Harper.
- Beeman, P. (1999, October). Personal letter from the president of PFLAG to PFLAG members.
- Berzon, B. (1996). *Setting them straight: You can do something about bigotry and homophobia in your life*. New York: Plume.
- Bower, B. (1999). Social factors may make gay men suicidal. *Science News*, 156(17), 261.
- Califa, P. (1994). *Public sex: The culture of radical sex*. Pittsburgh: Cleis Press.
- Charles, D. (2000, July 18). Victims of gay bullying drop out of school. *London Times*, p. 1.
- Chibbaro, L. (1999, May 7). Young gays traumatized by shooting. *Washington Blade*, p. 1a.
- Chung, C. (1999, September 13). *Throwaway teens (20/20)*. New York: ABC News.
- Cloud, J. (1998, July 20). Trans across America. *Time*, pp. 48-49.
- Comstock, G. D. (1991). *Violence against lesbians and gay men*. New York: Columbia University Press.
- Dempsey, C. (1994). Health and social issues of gay, lesbian, and bisexual adolescents. *Families in Society*, 75, 160-167.

- Denning, P. (2000). *Practicing harm reduction psychotherapy: An alternative approach to addictions*. New York: Guilford Press.
- Dennis, D. L., & Harlow, R. E. (1986). Gay youth and the right to education. *Yale Law Journal and Policy Review*, 4, 447-478.
- Dwyer, K. P., Osher, D., & Hoffman, C. C. (2000). Creating responsive schools: Contextualizing early warning, timely response. *Exceptional Children*, 66(3), 347-363.
- Dwyer, V. (1997, May 19). Class action: Fighting homophobia in school. *Maclean's*, 110(20), 52-54.
- Friedman, R., & Downey, J. (1994). Special article: Homosexuality. *New England Journal of Medicine*, 331(14), 923-930.
- Gay, Lesbian and Straight Education Network (GLSEN). (1999, September 24). *Report on anti-gay school violence* [online]. Available: www.glsen-la.org.
- Gibson, P. (1989). Gay male and lesbian youth suicide. In *Report of the Secretary's Task Force on Youth Suicide: Vol. 3. Prevention and interventions in youth suicide* (DHHS Pub. No. ADM 89-1623). Washington, DC: Superintendent of Documents, U.S. Government Printing Office.
- Handled with care. (1996, March 21-27). *Community Care*, 112, 23.
- Hetrick, E. S., & Martin, A. D. (1987). Development issues and their resolution for gay and lesbian adolescents. *Journal of Homosexuality*, 14(1/2), 25-43.
- Human Rights Watch. (2001). *Hatred in the hallways: Violence and discrimination against lesbians, gay, bisexual, and transgender students in U.S. schools* [Online]. Available: www.hrw.org/reports/2001/us/lgbt.
- Hunter, J., & Schaecher, R. (1987). Stresses on lesbian and gay adolescents in schools. *Social Work in Education*, 9(3), 180-190.
- Jennings, K. (1994). American dreams. In B. Singer (Ed.), *Growing up gay/growing up lesbian* (pp. 2-7). New York: New Press.
- Johnston, R. C. (1999). Columbine serves as catalyst for lawmakers. *Education Week*, 18(40), 12-20.
- Kasl, C. (1989). *Women, sex, and addiction: A search for love and power*. New York: Harper & Row.
- King, M. (1996, November 12). Suicide watch. *The Advocate*, pp. 41-44.
- Lipkin, A. (2000). *Understanding homosexuality: Changing schools*. Scranton, PA: Harper Collins.
- Lock, J. (1999). Gay, lesbian, and bisexual youths' risks for emotional, physical, and social problems: Results from a community-based study. *Journal of the American Academy of Child and Adolescent Psychology*, 38(3), 297-305.
- Loughborough, J. (2000, July/August). *School social work in Canada*. Paper presented at the Joint Conference of the International Federation of Social Workers and the International Association of Schools of Social Work, Montreal, Canada.
- Monette, P. (1993). *Becoming a man: Half a life story*. San Francisco: Harper.
- Olweus, D. (2001, March). Bullying at school: Tackling the problem. *OECD (Organization for Economic Cooperation and Development) Observer*, pp. 24-28.
- Pederson, W. (1994). HIV risk in gay and lesbian adolescents. *Journal of Gay and Lesbian Social Services*, 1(3/4), 131-147.

- Peyser, M., & Lorch, D. (2000, March 20). High school controversial. *Newsweek*, pp. 55–56.
- Proctor, C., & Groze, V. (1994). Risk factors for suicide among gay, lesbian, and bisexual youths. *Social Work*, 39, 504–513.
- Remafedi, G. (1999). Sexual orientation and youth suicide. *Journal of the American Medical Association*, 282(13), 1291.
- Remafedi, G., Farrow, J. A., & Deisher, R. W. (1991). Risk factors for gay and bisexual youth. *Pediatrics*, 87(6), 869–875.
- Slavin, P. (2000, May). Gay students backed. *NASW News*, p. 7.
- Tully, C. (2000). *Lesbians, gays, and the empowerment perspective*. New York: Columbia University Press.
- Uribe, V., & Harbeck, K. (1991). Addressing the needs of lesbian, gay and bisexual youth: The origins of PROJECT 10 and school based intervention. *Journal of Homosexuality*, 22(3/4), 9–28.
- U.S. Department of Health and Human Services. (1989). *Report of the Secretary's Task Force on Youth Suicide: Vol. 3. Prevention and interventions in youth suicide*. Rockville, MD: Author.
- van Wormer, K., & Davis, D. (2003). *Addiction treatment: A strengths perspective*. Pacific Grove, CA: Brooks/Cole.
- van Wormer, K., Wells, J., & Boes, M. (2000). *Social work with lesbians, gays and bisexuals: A strengths perspective*. Boston: Allyn and Bacon.
- Whitlock, K. (1989). *Bridges of respect: Creating support for lesbian and gay youth* (2nd ed.). Philadelphia: American Friends Service Committee.
- Youth at risk: Are gay youth suicide risks? New research may settle the debate. (1997, October 14). *The Advocate*, p. 15.