Sexual Orientation and Gender Identity (SOGI) in Schools

Project Summary

December 2019

CDC
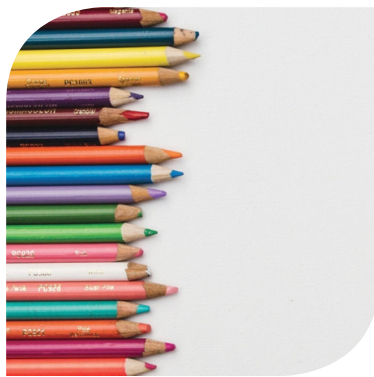
BC Centre for Disease Control
Provincial Health Services Authority

Prepared for the BC Centre for Disease Control (BCCDC)

Noorjean Hassam, Chief Operating Officer, BCCDC, Provincial Health Services Authority

Research Team:

Lisa W. Loutzenheiser, PhD
Lead Investigator
University of British Columbia

Bruno Zumbo, PhD
Co-Lead Investigator
University of British Columbia

Nathan Roberson, MA
Lead Quantitative Analyst
University of British Columbia

Paulina Semenec, MA
Lead Qualitative Analyst
University of British Columbia

Project Management:

Svetlana Ristovski-Slijepcevic, PhD
Project Manager, Healthy Families BC
Population and Public Health, BCCDC, Provincial
Health Services Authority

Drona Rasali, PhD, FACE
Director, Population Health Surveillance and
Epidemiology Population and Public Health,
BCCDC, Provincial Health Services Authority

Alberto Almeida, MPH
Coordinator, Project and Administrative Support
Population & Public Health, BCCDC, Provincial
Health Services Authority

Adapted from:

For the full report, please contact:
Lisa W. Loutzenheiser, PhD, University of British Columbia at: lisa.loutzenheiser@ubc.ca

BCCDC contact:

This report can be found at: http://www.bccdc.ca/our-services/service-areas/population-public-health

For further information contact:
BC Centre for Disease Control
Population & Public Health
655 West 12th Avenue
Vancouver, B.C. V5Z 4R4
pph@bccdc.ca

Project Summary

Sexual orientation and gender identity (SOGI) in schools

Lesbian, Gay, Bisexual, Trans, Two Spirit and Queer/Questioning (LGBT2SQ) children and youth face systemic inequalities both within, and external to, the education system in North America (1-8). Victimization and harassment related to SOGI negatively impact students' educational and health outcomes with long term consequences lasting into adolescence and adulthood (9-18).

Educators, health professionals and administrators have the opportunity to support LGBT2SQ children and youth by improving school environments and reducing hostile school climates. Positive outcomes such as lower levels of victimization (14), less absenteeism (17) and greater feelings of school connectedness (19) are repeatedly reported where LGBT2SQ students are supported by school staff.

SOGI 1 2 3

SOGI 1 2 3 is a program that recognizes and is premised on the importance of supportive school staff for LGBT2SQ students. The organizational structure of the program is such that each school has a faculty or staff member who takes on the role of SOGI School Lead, supported by a District SOGI Lead. The District SOGI Lead is mentored by the Provincial SOGI Lead, a Ministry of Education and ARC Foundation funded position.

SOGI 1 2 3 provides professional development resources and leads a network of dedicated SOGI leads at the district and school level. It also provides resources and tools for educators who want to better understand SOGI issues. SOGI 1 2 3 was developed and piloted in nine school districts– Vancouver, North Vancouver, West Vancouver, Burnaby, Langley, Delta, Sea to Sky, Nanaimo-Ladysmith, and Kamloops/Thompson–across B.C. in the 2016-2017 school year.

The context in British Columbia

In the last two years (2016-2018), British Columbia has seen a significant change in law and policy in relation to LGBT2SQ rights for children, youth and adults. In July 2016, the Legislature introduced Bill C-16, which added "gender identity and gender expression" to the BC Human Rights Code's list of areas protected from discrimination. The bill passed with Royal Assent on June 19, 2017 (Bill C-16: An act to amend the Canadian Human Rights Code, 2017). After the passage of Bill C-16, then Minister of Education Mike Bernier signed ministerial orders requiring that all boards of education and independent school authorities make explicit references to sexual orientation and gender identity, in school district codes of conduct and school harassment and bullying prevention policies respectively, by the end of 2016.

This Project

In the fall of 2017, the Population and Public Health Program, BC Centre for Disease Control, Provincial Health Services Authority, on behalf of the provincial Healthy Schools BC Working Group, commissioned an academic team to complete a study of the pilot year of the SOGI 1 2 3 program. This work is the first step in a larger ask by the Prevention and Health Promotion Policy Advisory Committee at the Ministry of Health to develop a plan that addresses the social and emotional health needs of children and youth in schools, in particular LGBT2SQ students.

What can we learn from SOGI 1 2 3?

A mixed method study was conducted, which included a survey and semi-structured interviews with District and School Leads who took part in the 2016-2017 pilot program and also examined respondents' experiences with SOGI.

The pilot year of the SOGI 1 2 3 program showed promising findings, such that after the implementation of SOGI 1 2 3:

- The number of instances of **discrimination and harassment** witnessed by respondents decreased by 5-10%.

- Positive shifts were observed in almost all **school climate-**related survey questions, including about having adequate social and emotional support in school, perceptions of fair policies for LGBT2SQ staff, feeling comfortable to attend LGBT2SQ events, and being comfortable to report acts of discriminations either witnessed or experienced.

- There was a clear shift towards having increasingly **inclusive and supportive spaces** in schools, and a higher degree of staff confidence to support LGBT2SQ students.

- Most respondents indicated that they obtained **information from SOGI 1 2 3 sources** to support LGBT2SQ students (nearly 80%) and had seen an **increase in SOGI discussions** in staff meetings, professional development days and in classrooms.

In general, respondents indicated that support for staff and students was increasing, and that students were receiving messages about support, safety, inclusivity and acceptance. While it is difficult to suggest that SOGI 1 2 3 alone contributed to a significant degree, most respondents considered the program to be a valuable resource for district and school staff in supporting LGBT2SQ students.

Despite progress being made in relation to SOGI, most respondents stated a need for more training and support. There were a number of priority areas identified for further support, including:

- **Continued training and professional development** for administrators, teachers, health professionals, educational assistants and other staff involved with SOGI - not only basic training for those new to SOGI, but also continuing training for those already engaged in SOGI work.

- **Inclusion of student voices** by actively engaging students and asking them what they need regarding support concerning SOGI.

- **Addressing the unique needs** of non-binary/gender non-conforming, transgender, Two Spirit students, and their families, including considerations of pronoun use, and transitions.

- **Acknowledging and addressing added layers of discrimination** experienced by Indigenous/ Two-Spirit students.

In addition, **an intersectional lens**, which takes into consideration the multiple and intersecting identities (including regarding race, ethnicity, Indigenous viewpoints) alongside sexual orientation and gender identity was highlighted as key in providing the appropriate supports to students. This was seen as a "bigger topic" than SOGI 1 2 3 and one that education needs to tackle:

> "…[Y]ou're going to be a teacher who sees that students aren't just gay; they are also maybe people of colour, maybe poor… so many different things, female, you know, all these different things right?… [E]ducation programs need to be very specific about 'hey, you teach all of this stuff because all of your students live with all of this stuff', right?"

Overall, there seems to be a critical opportunity for cross-sector collaborations, both to review current SOGI-related supports and to provide additional ones. During the SOGI 1 2 3 pilot, collaboration and joint training amongst District Leads offered a diversity of viewpoints and approaches to the implementation of SOGI education. Community involvement and collaboration between school boards, community partners and between school boards and District Leads are key, as are cross-sector collaboration with relevant ministries, health authorities, community groups and health professionals who work in school settings.

References

1. Coker, T. R., Austin, S. B., & Schuster, M. A. (2010). The health and health care of lesbian, gay and bisexual adolescents. Annual Review of Public Health, 31, 457 – 477.

2. Darwich, L., Hymel, S. & Waterhouse, T. (2012). School avoidance and substance use among lesbian, gay, bisexual, and questioning youth: The impact of victimization and adult support. Journal of Educational Psychology, 104(2), 381-392.

3. Taylor, C. & Peter, T., with McMinn, T.L., Elliott, T., Beldom, S., Ferry, A., Gross, Z., Paquin, S., & Schachter, K. (2011). Every class in every school: The first national climate survey on homophobia, biphobia, and transphobia in Canadian schools. Final report. Toronto, ON: Egale Canada Human Rights Trust.

4. Morrow, D.F. (2004). Social work practice with gay, lesbian, bisexual, and transgender adolescents. Journal of Contemporary Social Services, 85(1),91-99.

5. Saewyc, E.M., Poon, C., Kovaleva, K., Tourand, J., Smith, A. (2016). School-based interventions to reduce health disparities among LGBTQ youth: Considering the evidence. Vancouver: McCreary Centre Society & Stigma and Resilience Among Vulnerable Youth Centre.

6. Saewyc, E. M., Konishi, C., Rose, A.H., & Homma, Y. (2014). School-based strategies to reduce suicidal ideation, suicide attempts, and discrimination among sexual minority and heterosexual adolescents in Western Canada. International Journal of Child, Youth and Family Studies, 5(1), 89-112.

7. Sausa, A. L. (2005) Translating research into practice: Trans youth recommendations for improving school systems. Journal of Gay & Lesbian Issues in Education, 3(1), 15-28.

8. Taylor, G., C. Meyer, J., E., Peter, T., Ristock, J., Short, D., & Campbell, C. (2016) Gaps between beliefs, perceptions, and practices: The Every Teacher Project on LGBTQ-inclusive education in Canadian schools. Journal of LGBT Youth, 13:1-2, 112-140.

9. Bontempo, D.E., & D'Augelli, A.R. (2002). Effects of at-school victimization and sexual orientation on lesbian, gay, or bisexual youths' health risk behavior. Journal of Adolescent Health, 30(5), 364-374.

10. Fredericks, J.A., & Eccles, J.S. (2006). Is extracurricular activity participation associated with beneficial outcomes? Concurrent and longitudinal relations. Developmental Psychology, 42(4), 698-713.

11. Goodenow, C., Szalacha, L., & Westheimer, K. (2006). School support groups, other school factors, and the safety of sexual minority adolescents. Psychology in the Schools, 43(5), 573-589. doi:10.1002/pits.20173/

12. Kosciw, J. G., Greytak, E. A., Bartkiewicz, M. J., Boesen, M. J., & Palmer, N. A. (2012). The 2011 National school climate survey: The experiences of lesbian, gay, bisexual and transgender youth in our nation's schools. New York: GLSEN.

13. Grossman, A.H., D'Augelli, A.R., & Frank, J.A. (2011). Aspects of psychological resilience among transgender youth. Journal of LGBT Youth, 8(2), 103-115.

14. Murdock, T. B., & Bolch, M. B. (2005). Risk & protective factors for poor school adjustment in lesbian, gay, and bisexual (LGB) high school youth: Variable and person-centered analyses. Psychology in the Schools, 42, 159.

15. Prior, L., Hughes, D., & Peckham, S. (2012). The discursive turn in policy analysis and the validation of policy stories. Journal of Social Policy, 41, 271-289.

16. Pritchard, E.D. (2013). For colored kids who committed suicide, our outrage isn't enough: Queer youth of color, bullying, and the discursive limits of identity and safety. Harvard Educational Review, 83(2), 320-345.

17. Seelman, K. L., Walls, N. E., Hazel, C., & Wisneski, H. (2011). Student school engagement among sexual minority students: Understanding the contributors to predicting academic outcomes. .Journal of Social Service Research, 38(1), 3-17.

18. Shields, J.P., Whitaker, K., Glassman, J., Franks, H.M., & Howard, K. (2012). Impact of victimization on risk of suicide among lesbian, gay, and bisexual high school students in San Francisco. Journal of Adolescent Health, 50(4), 418-420.

19. Diaz, E. M., Kosciw, J. G., & Greytak, E. A. (2010). School connectedness for lesbian, gay, bisexual, & transgender youth: In-school victimization & institutional supports. The Prevention Researcher, 17(3), 15-17.