

THE PSYCHOLOGY OF SEXUAL ORIENTATION

a modular lesson plan/teaching
resource for high school
psychology teachers

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TOPSS



AMERICAN
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ASSOCIATION

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introduction

The American Psychological Association (APA) Education Directorate and the APA Committee of Teachers of Psychology in Secondary Schools (TOPSS) have published unit lesson plans for high school psychology teachers since 1992. The model for this endeavor is a package that includes a proposed timeline, content outline, student activities, and resources for topics included in standard introductory high school classes. This current teaching resource differs from this model in two significant ways. First, lesbian, gay, and bisexual issues are not typically covered in introductory courses or texts. The reasons for this omission vary. They range from time constraints to concerns about community reactions to the teacher's lack of training and information about various aspects of the topics involved in this area. While time constraints remain an obstacle, this resource provides ample content information and resources for the instructor. The second difference is the flexibility designed into this resource. While this material can be taught as a separate unit, it has been explicitly created to accommodate a modular approach. Suggestions are given as to where specific modules might most logically be inserted, but segments have been designed to support daily lessons in ways that the individual teacher finds most helpful and relevant.

This resource was developed to provide teachers with accurate and up-to-date information about sexual orientation to use in their psychology classes. Developed to help educate students, this resource contains terminology, scientifically based content, activities, and resources about sexual orientation. An appendix outlines historical lesbian, gay, and bisexual social movements.

Education is one of our best tools for reducing ignorance, and the information contained in this resource may ultimately contribute toward changing student attitudes and behaviors. Lesbian, gay, and bisexual issues can be accurately addressed by including content on sexual orientation within the psychology class, rather than leaving it out of the curriculum. Considering that certain school factors, such as the presence of lesbian, gay, and bisexual support groups, have been associated with the safety of lesbian, gay, and bisexual students with regard to lower reported rates of student victimization and suicide

attempts (Goodenow, 2006), the authors of this resource hope the information in this resource will make a contribution toward making schools a more positive climate for all students.

The focus of this unit plan is on sexual orientation rather than gender identity. Therefore, the authors have not included information concerning transgender issues. While there is some overlap in the psychological issues facing lesbian, gay, and bisexual individuals and transgender individuals, these two populations do have unique concerns. Our intention was not to minimize the importance of transgender issues; rather we attempted to provide a comprehensive overview of the psychological research on sexual orientation.

A WORD OF CAUTION: Any teacher who intends to address lesbian, gay, and bisexual issues in class **needs to first get the support of his or her department head and school administrators.** To secure this support in advance is a crucial first step in the process of successfully implementing a lesson plan that includes material that may be considered controversial. Teachers can use the data in the resources provided and discuss the core issues of their school (e.g., a school's mission statement). It is important for those in positions of power to know that discussion of lesbian, gay, and bisexual issues is about teaching scientifically sound content, not about morals or telling people what to believe. It is our desire as educators to create an environment in which excellence can be expected of all of us, an environment that will ultimately support the desire to introduce and explore these important, albeit controversial, issues in psychology class.

HOW TO USE THIS RESOURCE

This resource contains terminology, scientifically based content, activities, and resources about sexual orientation. The content can be utilized either as a stand-alone unit that would take one week or as a way of integrating lesbian, gay, and bisexual issues into existing chapters or units in the introductory psychology class. Teachers can use entire sections of this lesson or select particular content within each lesson. For example, a teacher may choose to cover only Section II-A (Sexual orientation) in the Development unit, or to cover Sections II-A, II-B (Lesbian/gay identity development), II-C (Bisexual identity development), and II-D (Heterosexuality identity development). Regardless of how a teacher decides to use this content, he/she can know that the content is accurate and up to date.

The outline on the following page provides teachers with a guide on how to integrate this information into existing class units. Wherever you introduce sexual orientation in the unit, be sure to clarify terminology (provided in Lesson I).

GUIDE ON INTEGRATING LESSONS INTO CLASS UNITS

LESSON WITHIN THIS RESOURCE	CORRESPONDING CLASS UNIT*
I. Terminology and Historical Perspectives on Sexual Orientation	
I-A. Terminology	Motivation and Emotion Life Span Development
I-B. History of Homosexuality as a Mental Disorder	Introduction and Research Methods Psychological Disorders Treatment of Psychological Disorders
I-C. Changing Terminology to Speak About Sexual Orientation	Life Span Development Psychological Disorders Social Psychology
II. Sexual Identity Development	
II-A. Sexual Orientation	Motivation and Emotion Life Span Development
II-B. Lesbian/Gay Identity Development	
II-C. Bisexual Identity Development	
II-D. Heterosexual Identity Development	
II-E. Interaction of Cultural Factors With Lesbian, Gay, and Bisexual Identity Development	Life Span Development Social Psychology
III. Lesbian and Gay Family Relationships	
III-A. Lesbian and Gay Couples	Life Span Development Stress, Coping, and Health Social Psychology
III-B. Lesbian and Gay Parents	
III-C. Children of Lesbian and Gay Parents	
III-D. Family of Origin	
III-E. American Psychological Association's Stance	
IV. Social Factors and Their Influence on Mental and Behavioral Health of Lesbian, Gay, and Bisexual Populations	
IV-A. Prejudice and Stigma	Stress, Coping, and Health Life Span Development Psychological Disorders Treatment of Psychological Disorders Social Psychology
IV-B. Minority Stress	
IV-C. Effects of Minority Stress	
IV-D. Protective Factors Against Minority Stress	
IV-E. Psychotherapy With Lesbian, Gay, and Bisexual Individuals	

ACTIVITIES IN THIS RESOURCE	CORRESPONDING CLASS UNIT*
Activity 1: Promoting Social Awareness Through Project Implicit	Introduction and Research Methods Learning Thinking and Language Social Psychology
Activity 2: Label Activity	Motivation and Emotion Stress, Coping, and Health Personality Psychological Disorders Social Psychology
Activity 3: Survey—LGB Students and School	Introduction and Research Methods Sensation and Perception Stress, Coping, and Health Learning Psychological Disorders Social Psychology
Activity 4: Silent Discussion (Critical Thinking Questions)	Introduction and Research Methods Motivation and Emotion Stress, Coping, and Health Life Span Development Psychological Disorders Treatment of Psychological Disorders Social Psychology

*The above class units correspond to the Standard Areas within the *National Standards for High School Psychology Curricula* (APA, 2005).

The high school teacher coauthors of this resource, Jeanne Blakeslee and Hilary Rosenthal, have collected additional activities on lesbian, gay, and bisexual issues. Teachers are invited to contact either if they are interested in receiving additional activities. You can reach Jeanne at JBlakeslee@spsfg.org, or Hilary at HROSENTHAL@glenbrook.k12.il.us.

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procedural timeline

LESSON I. Terminology and Historical Perspectives on Sexual Orientation

LESSON II. Sexual Identity Development

LESSON III. Lesbian and Gay Family Relationships

LESSON IV. Social Factors and Their Influence on Mental and Behavioral Health of Lesbian, Gay, and Bisexual Populations

Activity 1: Promoting Social Awareness Through Project Implicit

Activity 2: Label Activity

Activity 3: Survey—LGB Students and School

Activity 4: Silent Discussion (Critical Thinking Questions)

Lesson I. Terminology and Historical Perspectives on Sexual Orientation

A. There are many terms that are used when talking about sexual orientation. Below are definitions of terminology commonly used when discussing sexual orientation.

1. *Sexual orientation*—This is an enduring pattern of attraction, behavior, emotion, social contacts, and identity related to one's sexual partners.
2. *Sex*—This refers to biological traits (e.g., gonads, hormones) and chromosomal (e.g., XX, XY) traits that determine whether someone is male or female.
3. *Gender*—This refers to socially constructed roles and behaviors that are ascribed to masculinity and femininity.
4. *Gender identity*—This refers to a person's sense of himself or herself as male, female, somewhere in between, both, or neither.
5. *Homosexual*—This is a sexual orientation that is primarily focused on sexual partners of the same sex.
6. *Bisexual*—This is a sexual orientation that is focused on sexual partners of both sexes.
7. *Heterosexual*—This is a sexual orientation that is primarily focused on sexual partners of a different sex.
8. *Gay*—This term is used to describe men and women who have a homosexual sexual orientation; this term is more affirming than the term *homosexual*. Though *gay* can be used to refer to both men and women, it is more commonly used to refer to men.

9. *Lesbian*—This is a term used to describe homosexual women only; this term is more affirming than the term *homosexual*.

10. *Same-gender loving or similar term*—These terms are used by some people of color (particularly by some African Americans) to describe same-sex attraction among males or females when the terms *gay*, *lesbian*, or *bisexual* feel culturally inappropriate.

B. History of homosexuality as a mental disorder—Psychology and psychiatry have long examined same-sex sexual behavior and desire and, until fairly recently, viewed homosexuality as a mental illness. This framing of homosexuality as a mental illness was rooted in societal and historical prejudice and stigma. While viewing homosexuality as an illness helped to diminish the view of homosexuality as a moral shortcoming, it still framed homosexuality as something inferior to heterosexuality. As such, classifying homosexuality as a mental illness actually contributed to the stigma associated with same-sex desire and behavior. Homosexuality was first officially classified as a mental illness in the *Diagnostic and Statistical Manual of Mental Disorders (DSM)*. The *DSM* is a listing of mental and behavioral disorders and is developed and published by the American Psychiatric Association. The first *DSM (DSM-I)* was published in 1952; the second edition (*DSM-II*) was published in 1968. In 1973, as a result of several decades of research and changing social norms, homosexuality was removed from the *DSM-II* and was not listed as a mental disorder in the *DSM-III* (published in 1980). However, the *DSM-III* did include the diagnosis of “ego-dystonic homosexuality,” which referred to distress about homosexual arousal. In 1986, the third edition of the *DSM* was revised (*DSM-III-Revised*) and contained neither homosexuality nor ego-dystonic homosexuality in its list of mental disorders (Bayer, 1987). With the removal of homosexuality from the *DSM*, the field of psychology began to take an active role in removing the stigma long associated with homosexuality. Indeed, in 1975 the American Psychological Association stated that

Homosexuality, per se, implies no impairment in judgment, stability, reliability, or general social and vocational capabilities; Further, the American Psychological Association urges all mental health professionals to take the lead in removing the stigma of mental illness that has long been associated with homosexual orientations (Conger, 1975, p. 633).

C. Changing terminology to speak about sexual orientation—The term *homosexual* was first coined in the late 1860s by Karl Maria Kertbeny (Greenberg, 1988). As lesbian, gay, and bisexual issues became more prominent in the latter half of the 20th century, the terminology used to refer to sexual orientation began to change. In 1991, the American Psychological Association Committee on Lesbian and Gay Concerns (now the Committee on Lesbian, Gay, Bisexual, and Transgender Concerns) published a report entitled *Avoiding Heterosexist Bias in Language*. In that report, the Committee on Lesbian and Gay Concerns recommended that the terms *gay* and *lesbian* be used instead of *homosexual*. Use of the term *homosexual* is problematic because of its historical association with pathology. As such, *gay* and *lesbian* are more affirming terms. The committee also recommended, among other things, the use of the phrase *sexual orientation* rather than *sexual preference*. *Preference* incorrectly implies a deliberate choice concerning sexuality. Recently, the word *queer*, once a derogatory term, has begun to be used in the psychological literature. The use of the word *queer* began to be used within academic literature in the 1990s with the emergence of queer theory, which is based on principles of contextualization and empowerment (Minton, 1997). *Queer* is now used as a positive term that speaks to both an identity (someone who is not heterosexual) and a political movement toward

empowerment. As can be seen, words used to describe sexual orientation and associated identities have changed over time; it is likely that sexual orientation terminology will continue to change in the future.

See Appendix A: History of Lesbian, Gay, and Bisexual Social Movements

Lesson II. Sexual Identity Development

A. Sexual orientation—Sexual orientation is an important aspect of human experience. Sexual orientation, be it lesbian, gay, bisexual, or heterosexual, is multifaceted and encompasses attraction (to whom one is sexually attracted), behavior (with whom one engages in sexual/intimate behavior), emotion (to whom one feels love/infatuation/warmly toward), social contacts (with whom one prefers to spend his or her time), and identity (one's concept of himself or herself as heterosexual, gay, lesbian, or bisexual). Sexual orientation needs to be differentiated from sex and gender. Gender, as opposed to sex, is socially constructed and refers to the roles and behaviors that are attributed as masculine or feminine. Sex, on the other hand, refers to the biological makeup of individuals that determines whether they are male or female. Sex is determined by chromosomes, hormones, and physical traits. Individuals who are biologically male (sex) are expected to act in certain ways, such as dressing in men's clothing, acting in a dominant manner, and so forth (gender). The various facets of sexual orientation (attraction, behavior, emotion, etc.) do not have to all be consistent. For example, a person can experience attraction to members of the same sex, but only engage in sexual behavior with members of the opposite sex. A person can identify as gay but not engage in sexual behavior with either sex. A person can identify as heterosexual, but engage in same-sex sexual behavior. For many, sexual orientation is an enduring trait that is consistent throughout the life span. However, for others, sexuality can be fluid and can shift throughout the life span. Some people may always view themselves as heterosexual (or lesbian or gay or bisexual); however, others may question their sexual orientation at different points in their lives.

B. Lesbian/gay identity development—Several theories of lesbian/gay identity development have been proposed (e.g., Cass, 1979, 1984; McCarn & Fassinger, 1996; Troiden, 1989). These theories have in common a developmental perspective that views lesbian/gay identity development as happening in stages. The early stages of lesbian/gay identity are characterized by feelings of being different and conflicted around sexual orientation. The later stages are characterized by self-acceptance of one's sexual orientation and integration of a lesbian/gay identity into the larger identity of the person. Not all individuals with same-sex attraction develop a lesbian or gay identity. For those who do, this framework can help to describe the developmental process of lesbian/gay identity development. It should be noted that not all persons who develop a lesbian or gay identity will go through all stages or in the same order. Also, it should be noted that the research used to develop these models was based on retrospective reports. That is, lesbian and gay individuals reported, after the fact, what happened to them when they were developing their lesbian/gay identity.

Vivienne Cass's (1979, 1984) model of lesbian/gay identity development is cited often in the psychological literature. Her model contains six stages of lesbian/gay identity development:

1. *Identity confusion*—Individuals are aware of feeling different and feel confusion about their sexual orientation.
2. *Identity comparison*—Individuals begin to imagine the possibility of being lesbian/gay.

3. *Identity tolerance*—Individuals begin to accept that they are lesbian/gay and seek out lesbian/gay social interactions.
4. *Identity acceptance*—Individuals have greater acceptance of lesbian/gay identity and actively form friendships with other lesbian/gay individuals; they begin to move away from heterosexual community.
5. *Identity pride*—Individuals feel connected to and immerse themselves in the lesbian/gay community; they reject heterosexual ideals and possibly denigrate heterosexuals.
6. *Identity synthesis*—Individuals integrate their lesbian/gay identity into their larger view of themselves and feel that being lesbian/gay is only one aspect of their identity.

C. Bisexual identity development—In comparison to lesbian and gay identity development research and theory, research into and theories of bisexual identity development are sparse. Research has typically focused on the experiences of lesbian and gay individuals to the exclusion of bisexual individuals (e.g., Bradford, 2004; Philips, Ingram, Smith, & Mindes, 2003). Potoczniak (2007) was only able to identify three theories of bisexual identity development (i.e., Bradford, 2004; Brown, 2002; Weinberg, Williams, & Pryor, 1994). These authors note that bisexual identity development is different from lesbian or gay identity development in that there tends to be a lack of social support and visible role models for a bisexual identity. They further note that there is little acceptance of bisexuality in both the heterosexual community and the lesbian/gay community.

Brown's (2002) model overlaps with the other two models and is presented in four stages:

1. *Initial confusion*—Individuals feel conflict between their gender role and their sexual feelings, anxiety about same-sex attractions, and inhibition in acting upon same-sex attractions.
2. *Finding and applying the label*—Individuals discover that the label of "bisexual" is available (as opposed to only labeling themselves as lesbian/gay or heterosexual) and begin to apply it to themselves; lack of acceptance of bisexuality in both the lesbian/gay and heterosexual communities may inhibit this self-labeling.
3. *Settling into the identity*—Individuals seek out social networks that are supportive of their bisexual identity; romantic relationships become more central in this stage.
4. *Identity maintenance*—Individuals may still question their bisexual identity, though the majority will continue to self-label as bisexual regardless of the gender of their romantic partner.

D. Heterosexual identity development—Because individuals with a heterosexual sexual orientation constitute the majority, little research has focused on heterosexual identity development. Indeed, this literature is almost nonexistent. The assumption is that because heterosexuality is the "norm" there is no process by which heterosexual individuals develop their sexual orientation (Worthington, Savoy, Dillon, & Vernaglia, 2002). However, just as lesbian, gay, and bisexual individuals develop a sexual orientation, so do heterosexual individuals.

Worthington and colleagues (2002) developed a model of heterosexual identity development that contains five identity statuses:

1. *Unexplored commitment*—Individuals have not questioned their sexuality and assume themselves to be heterosexual because of social mandates; they have not explored their sexual needs/behaviors or gender roles; they have repressed the existence of lesbian, gay, and bisexual individuals and/or accepted the oppression of lesbian, gay, and bisexual individuals.
2. *Active exploration*—Individuals actively explore their sexual needs, values, and orientation; question sexual mores and traditional gender roles; question the privileged status of heterosexual individuals.
3. *Diffusion*—Individuals are neither exploring their sexuality nor committed to it; may challenge societal prescriptions about sexuality, but do not do it as a means of self-exploration, rather as a “rejection of social conformity for its own sake” (p. 518); lack self-awareness. Their diffusion often results from crisis or trauma.
4. *Deepening and commitment*—Individuals are more committed to their sexual needs, values, and preferences; this status may occur without individuals actively exploring their sexuality but simply through maturation; attitudes toward lesbian, gay, and bisexual individuals become more crystallized (in either a positive or negative direction).
5. *Synthesis*—Individuals have a well-developed sense of their sexual orientation in addition to a well-examined view of lesbian, gay, and bisexual individuals. This status is characterized by a well-integrated sense of self.

E. Interaction of cultural factors with lesbian, gay, and bisexual identity development

1. *Critique of current research*—Models of lesbian, gay, and bisexual identity development have been based largely on the experiences of White men and women within Western cultures. The way in which we think about sexual orientation is constrained by Western ideals of sexuality, gender, and identity. Indeed, in other cultures, the phenomenon of sexual orientation may not exist and/or may not be stigmatized (Fukuyama & Ferguson, 2000). Within Western traditions, theories of lesbian, gay, and bisexual identity development have historically ignored the experiences of individuals of color. Ryan (2003) notes that no studies have emerged that have examined identity development among lesbian, gay, and bisexual persons of color. McCarn and Fassinger (1996) did, however, develop a model of lesbian identity development that took into account the experiences of lesbians of color.
2. *Issues for lesbian, gay, and bisexual persons of color*—It is important to note that lesbian, gay, and bisexual persons of color have experiences that are unique from their White counterparts. In addition to experiencing discrimination because of their sexual orientation, lesbian, gay, and bisexual persons of color may also have to contend with prejudice based on their race, lack of economic resources, and lack of acceptance from their own racial culture (Bridges, Selvidege, & Matthews, 2003; Diaz, 1999; Greene, 2000; Martinez & Sullivan, 1998). Lesbian, gay, and bisexual persons of color may experience discrimination from both heterosexual communities of color and the largely White lesbian, gay, and bisexual community. Discrimination within communities of color may cause some individuals to only identify as lesbian, gay, or bisexual within nonheterosexual environments but not within contexts such as the family setting (e.g., Zea, Reisen, & Diaz, 2003). Because lesbian, gay, and bisexual people of color have multiply oppressed social identities, it is important to recognize the complexity of multiple identities and attendant multiple oppressions.

Lesson III. Lesbian and Gay Family Relationships

A. Lesbian and gay couples—Same-sex couples issues have become increasingly salient given the emergence of same-sex-marriage ballot initiatives and legislation. In July 2000, Vermont became the first state to allow same-sex couples to enter into civil unions. These civil unions provided same-sex couples with many of the same rights and responsibilities afforded to married heterosexual couples. In May 2004, the Supreme Judicial Court of Massachusetts ruled that it was unconstitutional to deny same-sex couples the right to marry; subsequently, Massachusetts became the first state to allow same-sex marriage. As of the beginning of 2008, one state (Massachusetts) allowed same-sex marriage, six states (California, Connecticut, New Hampshire, New Jersey, Oregon, and Vermont) allowed same-sex civil unions or domestic partnerships, and three states (Hawaii, Maine, and Washington) and the District of Columbia had laws that provided some of the benefits of marriage to same-sex couples. While the beginning of the first decade of 2000 saw many strides for marriage equality for same-sex couples, there were also many strides for those who oppose marriage equality. Constitutional amendments banning same-sex marriage were passed in many states. In addition, though it did not pass, an amendment to the U.S. Constitution to ban same-sex marriage was voted on by the U.S. Congress. (For up-to-date information about state, federal, and international same-sex marriage, please see the Human Rights Campaign Web site: <http://www.hrc.org/issues/marriage.asp>). Given the recent attention directed toward lesbian and gay couples, it is important to understand what the research has to say about same-sex couples.

1. Lesbians and gay men form committed, long-term relationships. The 2000 U.S. census revealed that almost 600,000 same-sex couples were living together (Simmons & O'Connell, 2003). This estimate likely underreports the number of cohabitating same-sex couples.
2. Same-sex couples are strikingly similar to heterosexual couples. Among same-sex couples, a substantial number have been in their relationships for over 10 years (e.g., Kurdek, 2003; Peplau & Spalding, 2000). They tend to be just as satisfied and committed as, and face the same challenges as, their heterosexual counterparts (Kurdek, 2004; Peplau & Beals, 2004).
3. One of the main differences between same-sex couples and different-sex couples is that few same-sex couples have legal recognition for their relationship.

B. Lesbian and gay parents—A large number of same-sex couples are raising children. Though there are not exact numbers, some estimates state that over 1 million children are being raised by same-sex parents (Patterson & Friel, 2000; Perrin, 2002). Existing research has found no support that lesbian and gay parents are unfit (Cramer, 1986; Falk, 1989; Gibbs, 1988; Patterson, 1996). Further, research that has compared lesbian and gay parents to heterosexual parents has found no differences in terms of parenting effectiveness (e.g., Armesto, 2002; Patterson, 2000; Perrin, 2002; Tasker & Golombok, 1997).

C. Children of lesbian and gay parents—Research on children raised by same-sex parents has focused almost exclusively on children of lesbian parents. Despite this limitation, the research shows that children of lesbian mothers are just as psychologically healthy and well adjusted as children of heterosexual mothers.

1. *Personal/emotional development*—Research on a number of personal/emotional factors, such as separation/individuation, personality, behavior problems, and intelligence, has revealed that children of lesbian mothers show no more developmental problems than do children of heterosexual mothers (Patterson, 1995).

2. *Sexual identity*—Research on children of lesbian parents has revealed that these children do not evidence problems with gender identity or with gender-role behaviors (e.g., Golombok, Spencer, & Rutter, 1983; Green, 1978; Kirkpatrick, Smith, & Roy, 1981). Children of lesbian mothers feel comfortable with and tend to engage in behaviors that are consistent with their assigned gender. Likewise, research on children of lesbian and gay parents has revealed that the majority of these children identify as heterosexual. Children raised by lesbian or gay parents are just as likely to be heterosexual as those raised by heterosexual parents (e.g., Bailey, Bobrow, Wolfe, & Mikach, 1995; Huggins, 1989).

3. *Social relationships*—Research on the peer relationships of children of lesbian parents has revealed that these children show normal development of social relationships (Golombok et al., 1983; Green, 1978; Green, Mandel, Hotvedt, Gray, & Smith, 1986).

D. Family of origin—Most lesbian, gay, and bisexual individuals grow up in families headed by a heterosexual mother, a heterosexual father, or both. As such, many lesbian, gay, and bisexual individuals develop their identity within the context of a family that does not share their same identity. The coming out process (disclosing one's sexual orientation) can have a variety of effects on the lesbian, gay, or bisexual individual and his or her family. Family members may experience grief at the loss of the idea that their son, daughter, brother, or sister will live a heterosexual life; this grief process may be similar to Kubler-Ross's (1969) stages of grief (Dahlheimer & Feigal, 1994). These reactions can range from denial and anger to acceptance and advocacy. The national organization Parents and Friends of Lesbians and Gays (PFLAG) was founded to advocate for and support lesbian, gay, and bisexual individuals and their families. Initial reactions to a family member's coming out may be negative or positive; regardless, the majority of lesbian, gay, or bisexual children are able to maintain positive relationships with their parents (Ben-Ari, 1995a, 1995b; Laird, 1996). It should be noted that most of the research conducted on the parents of lesbian, gay, and bisexual children is conducted among parents involved in some type of supportive organization, such as PFLAG (Peplau & Beals, 2004); thus, these results may not be typical of all families.

E. American Psychological Association's stance—The American Psychological Association (APA) has developed policies based on the most up-to-date and rigorous science, regarding same-sex marriage and lesbian and gay parenting. In 2004, the APA adopted two resolutions, "Sexual Orientation and Marriage" and "Sexual Orientation, Parents, and Children." In the first resolution, the APA stated that it "believes that it is unfair and discriminatory to deny same-sex couples legal access to civil marriage and to all its attendant benefits, rights, and privileges" (Paige, 2005, p. 498). The APA urged psychologists, in all their various activities, to oppose discrimination against same-sex couples. In the second resolution, the APA stated that it "opposes any discrimination based on sexual orientation in matters of adoption, child custody and visitation, foster care, and reproductive health services" (Paige, 2005, p. 496). It should be noted that numerous professional organizations have also made similar policy statements supporting same-sex marriage and lesbian and gay parenting (see the Human Rights Campaign Web site for links to professional organizations' policy statements: <http://www.hrc.org/issues/parenting/professional-opinion.asp>).

Lesson IV. Social Factors and Their Influence on Mental and Behavioral Health of Lesbian, Gay, and Bisexual Populations

A. Prejudice and stigma—The majority of Americans hold antigay beliefs (Yang, 1999). However, there have been shown to be particular demographic characteristics that are related to having negative views of lesbian, gay, and bisexual individuals. Individuals who tend to hold more negative attitudes toward lesbians, gay men, and bisexual individuals include older individuals; those with fundamentalist religious beliefs; those in more rural or southern areas; men; and those with less contact with lesbian, gay, and bisexual individuals (e.g., Basow & Johnson, 2000; Herek, 1984, 1987, 1991; Johnson, Brems, & Alford-Keating, 1997). Prejudice directed toward lesbian, gay, and bisexual individuals has been termed *heterosexism*. Heterosexism is defined as “an ideological system that denies, denigrates, and stigmatizes any nonheterosexual form of behavior, identity, relationship or community” (Herek, 1992, p. 89). Prejudice and stigma can take both subtle and overt forms. More subtle forms include ideas that heterosexuality is the norm (thereby assuming that everyone is heterosexual); more overt forms include verbal attacks and violence. National studies have revealed that the majority of lesbian, gay, and bisexual people have been victimized because of their sexual orientation (Kaiser Family Foundation, 2001). Heterosexism can be manifested at a number of levels:

1. The individual level (e.g., someone verbally or physically attacking a lesbian, gay, and bisexual person)
2. The institutional level (e.g., an employer firing an employee for being lesbian, gay, or bisexual)
3. The sociocultural level (e.g., laws limiting the rights of lesbian, gay, and bisexual persons)

B. Minority stress—Because lesbian, gay, and bisexual individuals are stigmatized in American society, they encounter discrimination on a regular basis. Living in a stigmatizing environment creates stress for lesbian, gay, and bisexual persons. This stress has been labeled “minority stress” (Brooks, 1981; Meyer, 1995, 2003) and refers to the chronic stress that results from living within a stigmatizing environment. Meyer (1995, 2003) identified four components of minority stress:

1. *Internalized homophobia*—Refers to the negative evaluations of nonheterosexuality that have been internalized by lesbian, gay, and bisexual people
2. *Perceived stigma*—Refers to the fear of being mistreated because of one’s nonheterosexual orientation
3. *Prejudice events*—Refers to the subtle and overt instances of discrimination that individuals have experienced as a result of having a nonheterosexual orientation
4. *Concealment of sexual orientation*—Refers to lesbian, gay, and bisexual people keeping their sexual orientation a secret from those around them

C. Effects of minority stress—Minority stress has been demonstrated to have a negative impact on the psychological and physical health of lesbian, gay, and bisexual individuals. Research has found links between minority stress and a number of negative health outcomes. These include depression, anxiety,

substance abuse, suicide attempts, somatic symptoms (including, but not limited to, sleep disturbances, headaches, and decreased immunologic functioning), and behavioral problems (such as risky sexual behavior and problems at school or work) (see Meyer, 2003, for a review). Research into the prevalence of psychological disorders (such as depression, anxiety, and substance use) has found that lesbian, gay, and bisexual persons tend to have higher rates of psychological disorders than do heterosexuals. However, these higher rates of disorders can be attributable to societal factors such as prejudice (Meyer, 2003). Research on the effects of prejudice-based crime has revealed that these types of crimes motivated by antigay bias have a more significant impact on mental health than do comparable crimes not based on antigay bias (Herek, Gillis, & Cogan, 1999).

D. Protective factors against minority stress—Despite the fact that minority stress has a detrimental impact on the well-being of lesbian, gay, and bisexual individuals, research has revealed that when confronted with discrimination, lesbian, gay, and bisexual individuals are able to effectively utilize coping resources. Several authors have argued that minority stress need not have a long-term negative impact on well-being (e.g., Garnets, Herek, & Levy, 1990; Weinberg & Williams, 1974). Indeed, many studies have revealed that lesbians, gay men, and bisexual individuals tend to be as healthy and well adjusted as their heterosexual counterparts (e.g., Cabaj & Stein, 1996; Gonsiorek, 1991; Hooker, 1957). When faced with discrimination, lesbian, gay, and bisexual individuals engage in a variety of coping responses. In general, the way a person copes with a stressor will determine the impact of that stressor (Lazarus & Folkman, 1984). For example, social support has been shown to be effective at alleviating the negative impact of discrimination on well-being of lesbian, gay, and bisexual individuals (Hays, Chauncey, & Tobey, 1990; Kurdek & Schmitt, 1987; Meyer, 1995). Russell and Richards (2003), in examining the impact of antigay legislation, found that lesbian, gay, and bisexual individuals engage in a number of strategies to deal with prejudice, including reframing, self-examination, expressing emotions, and seeking social support, among others. Among lesbian, gay, and bisexual high school students, having a gay-straight alliance was related to feeling safer in school, feeling a greater sense of belonging, and missing fewer days of class. In addition, lesbian, gay, and bisexual students who were in schools that addressed issues of sexual orientation in the curriculum were less likely to miss classes, more likely to feel a sense of belonging, and more likely to feel comfortable talking to teachers about sexual-orientation-related issues (Kosciw & Diaz, 2006).

E. Psychotherapy with lesbian, gay, and bisexual individuals—Lesbian, gay, and bisexual individuals seek psychotherapy for a variety of reasons. Some of these reasons are similar to the reasons that heterosexual individuals seek psychotherapy (e.g., depression, relationship difficulties). However, some lesbian, gay, and bisexual individuals have unique reasons for seeking psychotherapy, such as internalized homophobia, discrimination, or issues related to coming out (disclosing one's sexual orientation to others) (Platzer, 1998).

1. *Affirmative psychotherapy*—Affirmative psychotherapies view lesbian, gay, and bisexual orientations as valid and healthy. Affirmative therapies hold the therapist responsible for examining and working to overcome her or his biases and for taking a pro-active stance in dealing with lesbian, gay, and bisexual clients (Chen, Stracuzzi, & Ruckdeschel, 2004; Tozer & McClanahan, 1999). These therapies help clients to deal with societal prejudice, explore their sexual orientation, examine developmental issues, and work on relationship issues.

2. *Conversion therapy*—Some lesbian, gay, and bisexual persons, because of societal pressures, religious convictions, and/or internal conflict, may seek psychotherapy because they are unhappy about their sexual orientation. They may undergo therapy aimed at changing their sexual orientation from lesbian, gay, or bisexual to heterosexual. This type of psychotherapy has been called conversion therapy, reorientation therapy, or reparative therapy. Specific techniques range from behavioral, cognitive, psychodynamic, and biological to religion-based. Because homosexuality was declassified as a mental disorder in 1973, many professional organizations have noted that these types of therapies attempt to treat something that is not at all pathological (Morrow & Beckstead, 2004). The evidence supporting the efficacy of conversion or reorientation therapies is equivocal. There is some evidence that these types of therapies can result in a change of sexual orientation for some people (Spitzer, 2003). However, there is also evidence to suggest that these types of therapies result in depression, suicidality, internalized homophobia, sexual dysfunction, and abandonment of spirituality/religion (Haldeman, 2001; Shidlo & Schroeder, 2002). Both the American Psychological Association (DeLeon, 1998) and the American Psychiatric Association (2000) have passed resolutions urging caution in the use of these therapies.

activity 1: promoting social awareness through *project implicit*

Project Implicit, accessible at www.projectimplicit.net, is an amazing resource for the teaching of psychology. While it is most logically used as a part of a social cognition unit, it may also be used in conjunction with lessons on research methodology or consciousness. Students may access the site through a class visit to the computer lab or on their own. To go straight to the tasks involved in assessing implicit associations, visit the site at <https://implicit.harvard.edu/implicit/demo/>. In addition to information on implicit stereotypes, students may gain self-knowledge through participating in the Implicit Associations Tests available at this ongoing research site.

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The following description is from the *Project Implicit* Web site:

Project Implicit is a Virtual Laboratory for the social and behavioral sciences designed to facilitate the research of implicit social cognition: cognitions, feelings, and evaluations that are not necessarily available to conscious awareness, conscious control, conscious intention, or self-reflection. *Project Implicit* comprises a network of laboratories, technicians, and research scientists at Harvard University, the University of Washington, and the University of Virginia. The project was initially launched as a demonstration Web site in 1998 at Yale University and began to function fully as a research enterprise following a grant from the National Institute of Mental Health in 2003.

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INSTRUCTIONS

For a lesson in awareness of unconscious bias concerning sexual orientation, students will log on to the Web site for *Project Implicit*, found at <https://implicit.harvard.edu/implicit>.

From that page, it is possible to choose either Demonstration or Research options. The tasks will be the same in either, but choosing the Research site means the data will be collected for the ongoing research being conducted by *Project Implicit*.

Note. Students must be 18 in order to grant informed consent for this aspect.

In either case, students should begin with the demonstration site and go to the demonstration tasks. They should click on the link to general information about the IAT, then go to the link labeled “I wish to proceed.” They may also go back to the research section from there, where they will need to register and will be randomly assigned to topics. For the sexual orientation exercise, students must proceed from the demonstration site, where they are able to choose topics. The sexual orientation exercise is under the label

activity 1 *continued from previous page*

“Sexuality IAT.” You may want to combine this with other tests (such as gender and careers). Each test takes about 10 to 15 minutes.

When students have finished, they should write a brief reflection on what the tests mean. How do the tests reflect social cognition? Why are they called implicit associations? How do they relate to stereotypes, prejudice, and discrimination? A discussion to debrief the results is also helpful.

activity 2: label activity

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M. W. Smith**

Adapted by students from
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Gay, lesbian, and bisexual students are often marginalized. This activity will demonstrate to students how it might feel to be in that position.

DIRECTIONS

Apply labels (see below) to the foreheads of students in the class. Tell students to close their eyes as a label is placed on their foreheads. Tell students that throughout this activity, they are not to look at their own labels or inform another of what his or her label says. While discussing and debating their opinions on an issue, instruct students to interact and treat others based on the directions on their labels. Students should keep in mind that this activity and the labels are just an exercise, but they should remember how they feel so a real discussion can be held afterwards.

Topic: Assign a debate topic, phrased as an assertion, to the group (such as "Women should be drafted" or "Sixteen-year-old boys are less mature than 16-year-old girls").

Labels: Make masking tape labels, each from 3 to 4 inches long, with the commands listed below written on them:

COMMANDS

- | | |
|----------------------|-----------------------|
| 1. Respect me | 13. Include me |
| 2. Ignore me | 14. Praise me |
| 3. Listen to me | 15. Don't look me |
| 4. Tell me I'm right | in the eyes |
| 5. Talk over me | 16. Admire me |
| 6. Ask me questions | 17. Mock me |
| 7. Laugh at me | 18. Argue with me |
| 8. Don't take | 19. Repeat what I say |
| me seriously | 20. Stare at me |
| 9. Tell me I'm wrong | 21. Feel sorry for me |
| 10. Distract me | 22. Agree with me |
| 11. Interrupt me | 23. Value my opinion |
| 12. Exclude me | 24. Intimidate me |

If you feel the exercise is getting off topic, announce a change in the discussion subject.

FOLLOW-UP QUESTIONS

- How did you feel when you were treated like your label?
- Do you ever feel like you wear an invisible label?
- Do you ever label others?
- What are these labels?
- Are these labels ever right? Are they ever wrong?
- How do labels hurt a group's ability to converse safely?
- How can these labels be (metaphorically) erased?

ADAPTED FROM

Kasschau, R. A., Fordham, L. W., Stewart, P. A., McCombs, H. G., & Smith, M. W. (1981). Self-concept and group interaction. In L. T. Benjamin & K. D. Lowman (Eds.), *Activities handbook for the teaching of psychology, Volume 1*. Washington, DC: American Psychological Association.

activity 3: survey lgb students & school

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Please choose an answer among those supplied to fill in the blank.

- ____ percent of lesbian, gay, and bisexual (LGB) students who skipped school in the past month because they felt unsafe there (a rate that is 5 times greater than the general student population).
a. 10.9 b. 12.3 c. 16.5 d. 28.8
- ____ percent of LGB students who reported hearing homophobic remarks such as “faggot” or “dyke” frequently or often.
a. 21.7 b. 44.6 c. 62.4 d. 75.4
- ____ percent of students who reported being the target of cyber bullying (threatening or harassing e-mail or text messages) related to sexual orientation.
a. 9.3 b. 18.7 c. 26.4 d. 41.2
- ____ percent of students who reported there were no positive portrayals of LGB people, history, or events in their classes.
a. 32.8 b. 54.4 c. 68.3 d. 81.7
- ____ percent of LGB students who reported being physically assaulted, including threatened/injured with a weapon, at school in the past year.
a. 8.5 b. 13.9 c. 15.6 d. 16.5
- ____ percent of students who report frequently or often hearing “that’s so gay” or “you’re so gay” to indicate someone or something stupid or worthless.
a. 48.1 b. 59.2 c. 76.4 d. 89.2
- ____ percent of LGB students who attempted suicide in the past year, according to the Massachusetts Youth Risk Behavior Survey, 2005.
a. 11.4 b. 18.7 c. 25.5 d. 32.8
- ____ percent of LGB students who reported that faculty or staff intervened frequently when present when homophobic remarks were made.
a. 16.5 b. 40.7 c. 74.5 d. 86.2
- ____ percent of LGB students who reported hearing homophobic remarks from faculty or school staff at least some of the time.
a. 12.9 b. 15.4 c. 19.3 d. 23.6
- ____ percent of students harassed because of sexual orientation who fail to report it because they believe nothing will be done.
a. 10.5 b. 16.6 c. 20.2 d. 31.9

SOURCES

- Massachusetts Department of Education. (2005). *Massachusetts Youth Risk Behavior Survey (2005)*. Retrieved March 7, 2008, from <http://www.doe.mass.edu/cnp/hprograms/yrbs/>.
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activity 3 answer key

Choice d is the correct answer to questions 1-7 and 9-10.
Choice a is the correct answer for question number 8.

activity 4: silent discussion (critical thinking questions)

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DIRECTIONS

The silent discussion is an excellent technique for promoting dialogue with full participation of the class. Students write responses to a variety of questions and to each other in a way that promotes dialogue that can be anonymous yet carefully crafted. The silent discussion may be used to introduce topics for a more traditional discussion or may take the place of a lengthier discussion when time is short. Comments can be reviewed by the teacher at a later time in order to get a sense of where the class stands and/or what they understand about a particular subject.

MATERIALS

Individual sheets of paper with a single question listed on top. You will need one sheet for each student desk in the class. Depending on class size, 5 or 6 different questions work well.

METHOD

Students find a sheet with a question at their desks at the beginning of class. After giving students a few minutes to respond to the question in writing, they should rotate to a desk with a different question. They read both that question and the response already written there. They are then to respond to the second question, the initial response to that question, or both. After a few minutes, students rotate again to repeat the process with a new question. As more responses are included, teachers may give a few more minutes of reading time. If time permits, students should have an opportunity to read and respond to each of the questions by changing desks the same number of times as there are questions. At the conclusion of the exercise, students return to their own desks and read all responses following their own.

SAMPLE QUESTIONS ON SEXUAL ORIENTATION

- For Research: In a self-report survey or interview method, how should researchers approach personal issues such as sexual orientation?
- For Development: What parts are played by nature and nurture in sexual orientation?
- For Motivation: What is the difference between gender identity and sexual orientation?
- For Social Psychology: How might laws which protect the rights of people regardless of sexual orientation affect attitudes over time?
- For Social Psychology: How are social norms illustrated by the evolving treatment of lesbian, gay, and bisexual members of our society?
- For Social Psychology or Health, Stress, and Coping: How does discrimination, such as treatment and attitudes toward gay and lesbian students, affect both the subjects and the perpetrators of such discrimination?
- For Psychopathology or Therapy: In 1973, homosexuality was removed from the DSM as a disorder. How do cultural factors enter into such decisions?

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appendix a: history of lesbian, gay, and bisexual social movements

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Washington, DC

I. History of lesbian, gay, and bisexual social movements: Most historians agree that there is evidence of homosexual activity and same-sex love, whether such relationships were accepted or persecuted, in every documented culture.

A. European history: There was little formal study of homosexuality before the 19th century, however. Early efforts to understand the range of human sexual behavior came from European doctors and scientists, including Sigmund Freud and Magnus Hirschfield. Their writings were sympathetic to the concept of a homosexual or bisexual orientation occurring naturally in an identifiable segment of humankind, and Freud himself did not consider homosexuality an illness or a crime. Hirschfield founded Berlin's Institute for Sexual Science, Europe's best library archive of materials on gay cultural history. These efforts contrasted with the backlash, in England, against gay and lesbian writers such as Oscar Wilde and Radclyffe Hall. With the rise of Hitler's Third Reich, however, the former tolerance demonstrated by Germany's Scientific Humanitarian Committee vanished. Hirschfield's great library was destroyed and the books burnt by Nazis on May 10, 1933.

B. United States history: In the United States, few attempts were made to create advocacy groups supporting gay and lesbian relationships until after World War II, although prewar gay life flourished in urban centers such as Greenwich Village and Harlem during the Harlem Renaissance of the 1920s. The disruptions of World War II allowed formerly isolated gay men and women to meet as soldiers, war workers, and other volunteers uprooted from small towns and posted worldwide. Greater awareness, coupled with Senator Joseph McCarthy's investigation of homosexuals holding government jobs during the early 1950s, led to the first American-based political demands for fair treatment in mental health, public policy, and employment.

1. *Advances in the 1950s and 1960s*: The primary organization acknowledging gay men as an oppressed cultural minority was the Mattachine Society, founded in 1950 by Harry Hay and Chuck Rowland. Other important homophile organizations on the West Coast included One, Inc., founded in 1952, and the first lesbian support network, Daughters of Bilitis, founded in 1955 by Phyllis Lyon and Del Martin. Through meetings and publications, these groups offered information and outreach to thousands. These first organizations soon found support from prominent sociologists and psychologists. In 1951, Donald Webster Cory published *The Homosexual in America* (Cory, 1951), asserting that gay men and lesbians were a legitimate minority group, and in 1953, Dr. Evelyn Hooker won a grant from the National Institute of Mental Health (NIMH) to study gay men. Her groundbreaking paper, presented in 1956, demonstrated that gay men were as well adjusted as heterosexual men, often more so. But it would not be until 1973 that the American Psychiatric Association removed homosexuality as an “illness” classification in its diagnostic manuals. Throughout the 1950s and 60s, gay men and lesbians continued to be at risk for psychiatric lockup and jail and for losing jobs or child custody when courts and clinics defined gay love as sick, criminal, or immoral.
2. *The civil rights movement*: In 1965, as the civil rights movement won new legislation outlawing racial discrimination, the first gay rights demonstrations took place in Philadelphia and Washington, DC, led by longtime activists Frank Kameny and Barbara Gittings. The turning point for gay liberation came on June 28, 1969, when patrons of the popular Stonewall Inn in New York’s Greenwich Village fought back against ongoing police raids of their neighborhood bar. Stonewall is still considered a watershed moment of gay pride and has been commemorated since the 1970s with “pride marches” held every June across the United States. Recent scholarship has called for better acknowledgement of the roles that drag performers, minorities, and transgender patrons played in the Stonewall Riots.
3. *The gay liberation movement*: The gay liberation movement of the 1970s saw myriad political organizations spring up, often at odds with one another. Frustrated with the male leadership of most gay liberation groups, lesbians formed their own collectives, record labels, music festivals, newspapers, bookstores, and publishing houses and called for lesbian rights in mainstream feminist groups like the National Organization for Women (NOW). Expanding religious acceptance for gay men and women of faith, the first out gay minister was ordained by the United Church of Christ in 1972. Other gay and lesbian church and synagogue congregations soon followed. Parents and Friends of Lesbians and Gays (PFLAG), formed in 1972, offered family members greater support roles in the gay rights movement. And political action exploded through the National Gay and Lesbian Task Force, the Human Rights Campaign, the election of openly gay and lesbian representatives like Elaine Noble and Barney Frank, and, in 1979, the first march on Washington for gay rights.
4. *1980s through today*: Through the 1980s, as the gay male community was decimated by the AIDS epidemic, demands for compassion and medical funding led to renewed coalitions between men and women as well as angry street theatre by groups like AIDS Coalition to Unleash Power (ACT UP) and Queer Nation. Enormous marches on Washington drew as many as 1 million gay rights supporters in 1987 and again in 1993. A different wing of the political rights movement called for an end to military expulsion of gay and lesbian

soldiers, with the high-profile case of Col. Margarethe Cammermeyer publicized through a made-for-television movie, "Serving in Silence." The patriotism and service of gay men and lesbians in uniform eventually resulted in the uncomfortable compromise "Don't Ask, Don't Tell" as an alternative to decades of military witch hunts and dishonorable discharges. Finally, in the last decade of the 20th century, millions of Americans watched as actress Ellen DeGeneres came out on national television in April 1997, heralding a new era of gay celebrity power and media visibility. Celebrity performers, both gay and heterosexual, have been among the most vocal activists, calling for tolerance and equal rights. As a result of hard work by countless organizations and individuals, helped by Internet and direct-mail campaign networking, the 21st century heralded new legal gains for gay and lesbian couples. Same-sex civil unions were recognized under Vermont law in 2000, and Massachusetts became the first state to perform same-sex marriages in 2003. With the end of state sodomy laws (*Lawrence v. Texas*, 2003), gay Americans were finally free from criminal classification. Gay marriage is now legal in the Netherlands, Belgium, Spain, and Canada, although the recognition of gay marriage by church and state continues to divide opinion worldwide.

REFERENCE

Cory, D. W. (1951). *The homosexual in America: A subjective approach*. New York: Greenberg.

PRINT AND ELECTRONIC RESOURCES

Myers, D. G., & Scanzoni, L. D. (2005). *What God has joined together: A Christian case for gay marriage*. San Francisco: Harper.

Coauthored by introductory psychology textbook author David Myers, PhD, this text bridges the gap between marriage-supporting and gay-supporting people of faith to affirm marriage for all individuals.

Savin-Williams, R. (2005). *The new gay teenager*. Cambridge: Harvard University Press.

This book discusses sexual orientation as it relates to 21st century teenagers. This book was awarded the 2005 Distinguished Book Award from the American Psychological Association Division 44.

RESOURCES FOR EDUCATORS AND PARENTS

American Psychological Association. (2008). *Answers to your questions: For a better understanding of sexual orientation and homosexuality*. Washington, DC: Author. Retrieved February 21, 2008, from www.apa.org/topics/orientation.pdf.

This brochure, published by the APA, provides basic information about psychology and sexual orientation. It is geared toward a general audience.

American Psychological Association Commission on Ethnic Minority Recruitment, Retention, and Training in Psychology Task Force Textbook Initiative Work Group. (2004, April). *Toward an inclusive psychology: Infusing the introductory psychology textbook with diversity content*. Retrieved September 5, 2007, from <http://www.apa.org/pi/oema/inclusivepsychology.pdf>.

This document is designed to provide suggestions and examples for publishers, authors, and instructors to help them advance psychology

as an inclusive science. It provides concrete suggestions and examples to help incorporate diversity into textbooks by infusing race/ethnicity, culture, gender, sexual orientation, disability, and aging into the content of introductory psychology textbooks.

American Psychological Association Task Force on the Sexualization of Girls. (2007). *Report of the APA Task Force on the Sexualization of Girls*. Washington, DC: American Psychological Association. Retrieved January 10, 2008, from www.apa.org/pi/wpo/sexualization.html.

This report claims that the proliferation of sexualized images of girls and young women in advertising, merchandising, and media is harming girls' self-image and healthy development. It explores the impact of that proliferation on girls' cognitive, emotional, mental and physical health, and development of a healthy sexual self-image.

Elmore, L. A. (2007). *The development of sexual orientation: A teaching resource*. Washington, DC: Society for the Teaching of Psychology, American Psychological Association. Retrieved January 28, 2008, from <http://www.teachpsych.org/otrp/resources/elmore07.pdf>.

This is a series of modules designed by Lynn Elmore as a guide for teaching an entire course on the subject. Each module contains lecture material and a long list of relevant articles, multimedia, and Web sites.

First Amendment Center & BridgeBuilders. (2006). *Public Schools and Sexual Orientation: A First Amendment framework for finding common ground*. Retrieved May 25, 2007, from <http://www.firstamendmentcenter.org/PDF/sexual.orientation.guidelines.PDF>.

This is a guide for school officials, parents, and students on engaging in respectful dialogue on sexual orientation.

Just the Facts Coalition. (2008). *Just the facts about sexual orientation and youth: A primer for principals, educators, and school personnel*. Washington, DC: American Psychological Association. Retrieved February 29, 2008, from www.apa.org/pi/lgbc/publications/justthefacts.html.

The information in this booklet has been developed by a coalition of education, health, mental health, and religious organizations that share a concern for the health and education of all students in schools, including lesbian, gay, and bisexual students, and believe that all students should have an opportunity to learn and develop in a safe and supportive environment.

Kosciw, J. G., & Diaz, E. M. (2005). *The 2005 National School Climate Survey: The experiences of lesbian, gay, bisexual and transgender youth in our nation's schools*. New York: Gay, Lesbian, and Straight Education Network.

The National School Climate Survey (NSCS) is the only national survey to document the experiences lesbian, gay, bisexual, and transgender (LGBT) students in American high schools.

The Safe Schools Coalition. (2006). *An educator's guide to intervening in antigay (LGBTQ) harassment*. Retrieved January 9, 2008, from http://www.safeschoolscoalition.org/guide_educator_interveneharass2005WA.pdf.

The Safe Schools Coalition offers resources for educators, parents/guardians, and youth. This guide for educators outlines interventions for antigay harassment.

Tuerk, C., Menvielle, E., & de Jesus, J. (2003). *If you are concerned about your child's gender behaviors: A parent guide*. Washington, DC: Children's National Medical Center. Retrieved January 10, 2008, from <http://www.dccchildrens.com/dccchildrens/about/subclinical/subneuroscience/subgender/guide.aspx>.

This is a guide for parents who want information and advice on a child with gender-variant behaviors.

VIDEOS AND MOVIE RESOURCES

Chasnoff, D. (Producer), & Cohen, H. S. (Director). (1996). *It's elementary* [DVD/Video]. (Available from New Day Films, 190 Route 17M, P.O. Box 1084, Harriman, NY 10926 or call 888-367-9154)

It's Elementary discusses whether and how gay issues should be discussed in schools. This ground-breaking film focuses the debate of this controversial issue among school children as young as the first grade.

Dong, A. (Producer/Director). (1997). *Licensed to kill* [DVD]. (Available from DeepFocus Productions, P.O. Box 1084, Harriman, NY 10926, or by calling 800-343-5540)

This video offers a look into the minds of seven men whose hatred for homosexuals led them to murder. Filmmaker Arthur Dong, himself a hate-crime victim, speaks with these killers to find out what drove them to kill.

Deitch, D. (Director). (2002). *Common ground* [Motion picture]. (Available from Paramount Pictures at <http://www.paramount.com/paramount.php>)

This movie contains short stories about gay Americans during three different time periods.

Dupre, J. (Director). (1998). *Out of the past: The struggle for gay and lesbian rights in America* [DVD]. (Available from the Gay, Lesbian, and Straight Education Network, 90 Broad Street, 2nd Floor, New York, NY 10004, or by calling (212) 727-0135)

Told through the eyes of a high school student in Utah, *Out of the Past* highlights the history of the gay rights movement in America. This documentary also gives an expansive account of the struggles of the gay and lesbian community throughout America's history. Rated R.

Epstein, R. (Director). (1984). *The times of Harvey Milk* [Video]. (Available from Telling Pictures, 10 Arkansas Street, Suite F, San Francisco, CA 94107, or by calling 415- 864-6714)

This documentary is based on the political rise and death of gay political activist Harvey Milk. Milk, who was the first openly gay person to become an elected official in the state of California, was shot and killed by Dan White, a fellow council member, just one year after taking office.

Epstein, R., & Friedman, J. (Directors). (1995). *The celluloid closet* [DVD]. (Available from Telling Pictures, 10 Arkansas Street, Suite F, San Francisco, CA 94107, or by calling 415-864-6714)

This film explores how our attitudes and perceptions of homosexuality have been influenced by Hollywood. The film includes clips from more than 100 Hollywood movies and interviews with many of the filmmakers and actors who created them.

Kaufman, M. (Director). (2002). *The Laramie project* [DVD]. (Available from HBO Films at <http://store.hbo.com/product/index.jsp?productId=1888720>)

An adaptation of Moiss Kaufman's play about the 1998 hate-crime murder of University of Wyoming college student Matthew Shepard. The Laramie Project film and play served as the foundation of a national campaign of hate-crime education, and it fueled the drive to add legislation to the federal hate-crime laws to include crimes motivated by gender, sexual orientation, or gender identity. Rated R.

Mifsud, J. (Producer), & Coppel, A. (Director). (2004). *Speaking for ourselves: Portraits of gay and lesbian youth* [Video]. (Available from Diversity Productions, 216 30th Avenue, Seattle, WA 98122, or by calling 206-720-1744)

Speaking for Ourselves is a 27-minute documentary that profiles the lives of five lesbian and gay youths from various backgrounds and cultures (comes with a study guide).

Potter, N., & Simmons, G. (Directors). (2002). *Voices of GLBT youth* [Video]. (Available from Pan Left Productions, 631 S. 6th Avenue, Tucson, AZ 85701, or by calling 520-792-9171)

Produced by Pan Left Productions, this documentary features 12 young gay, lesbian, and transgender students who share their stories of growing up, harassment, violence, and coming out.

Schiller, G. (Director). (1985). *Before Stonewall* [VHS/DVD]. (Available from Jezebel Productions, PO Box 1348, New York, NY 10011 or at <http://www.jezebel.org/films/stonewall.html>)

Before Stonewall documents the 1969 police raid of the Stonewall Inn in New York City's Greenwich Village. This groundbreaking event fueled the Gay Liberation Movement.

Schmiechen, R. (Director). (1991). *Changing our minds: The story of Dr. Evelyn Hooker* [DVD]. (Available from Frameline, 145 Ninth Street, #300, San Francisco, CA 94103, or by calling 415-703-8560)

This movie highlights the research conducted by Dr. Evelyn Hooker during the 1950s, which proved to the psychiatric community that homosexuals were not, by definition, "sick." Dr. Hooker's findings served as a major victory for gay rights and led to the American Psychiatric Association's removal of *homosexuality* from its manual of mental disorders.

Shepard, T. (Producer/Director). (2001). *Scout's honor* [VHS/DVD]. (Available from New Day Films, 190 Route 17M, P.O. Box 1084, Harriman, NY 10926, or by calling 201-652-6590)

This film follows the conflict between the antigay policies of the Boy Scouts of America and the movement by many of its members to overturn those policies.

WEB SITES

Advocates for Youth

<http://www.advocatesforyouth.org/glbtc.htm>

APA Healthy Lesbian, Gay, and Bisexual Students Project

<http://www.apa.org/pi/lgb/hlgbsp/>

APA Office of Lesbian, Gay, Bisexual, and Transgender Concerns

<http://www.apa.org/pi/lgb/>

Gay, Lesbian, and Straight Education Network (GLSEN)

Includes information on starting gay-straight alliances

<http://www.glsen.org/cgi-bin/iowa/all/home/index.html>

Gay, Lesbian, Bisexual, Transgender, and Queer Encyclopedia

www.glbtc.com

ORGANIZATIONS

ACLU—American Civil Liberties Union

<http://www.aclu.org/>

Amnesty International

<http://www.amnesty.org/>

Children of Lesbian and Gays Everywhere

<http://www.colage.org/>

Gay and Lesbian Advocates and Defenders

<http://www.glad.org/>

GLAAD—Gay, Lesbian Alliance Against Defamation

<http://www.glaad.org/>

GLSEN—Gay, Lesbian, and Straight Education Network

<http://www.glsen.org/cgi-bin/iowa/all/home/index.html>

Gender PAC

<http://www.gpac.org/>

HRC—Human Rights Campaign

<http://www.hrc.org/>

Log Cabin Republicans

<http://online.logcabin.org/>

National Center for Lesbian Rights

<http://www.nclrights.org/site/PageServer>

National Coalition for GLBT Youth

<http://www.lgbthealth.net/resources2.shtml>

National Gay and Lesbian Task Force

<http://www.thetaskforce.org/>

National Transgender Advocacy Coalition

<http://www.ntac.org/>

Out and Equal Workplace Advocates
<http://www.outandequal.org/>

PFLAG—Parents, Friends, and Family of Lesbians and Gays
<http://www.pflag.org/>

Service Members Legal Defense Network
<http://www.sldn.org/templates/index.html>

Soulforce
<http://www.soulforce.org/>

Straight Spouse Network
<http://www.straightspouse.org/>

Stonewall Democrats
<http://www.stonewalldemocrats.org/>

Transgender Law and Policy Institute
<http://www.transgenderlaw.org/>

Youth Resource
<http://www.youthresource.com/>

ETHNIC MINORITY WEB SITES

Asian & Pacific Islander Family Pride
<http://www.apifamilypride.org/>

National Black Justice Coalition
<http://www.nbjcoalition.org/>

