

GAY AND LESBIAN ADOLESCENTS:
THE ROLE OF SCHOOL COUNSELLORS

CENTRE FOR NEWFOUNDLAND STUDIES

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**Gay and Lesbian Adolescents:
The Role of School Counsellors**

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As media personalities such as Ellen DeGeneres, Melissa Etheridge, k.d. Lang, and Elton John openly "come out," or disclose their sexual orientation, people are generally becoming more aware of homosexuality (Handy, 1997). Within the school system gay and lesbian adolescents are more willing than ever before to be open about their sexual orientation. However, these students face an array of problems stemming from such difficulties as lack of family and peer support, resources, and positive role models (Shortall 1998). What follows is a series of three papers that attempt to inform school counsellors, and others working within the school system, about homosexuality and the issues that adolescent homosexuals must confront.

Paper one describes the historical basis underlying the current views held about homosexuality. Understanding the historical development of homosexual identity helps us to recognize why mainstream society reacts as it does to homosexuals and homosexual behaviour. These reactions reflect the attitudes that most North Americans hold towards homosexuality. The impact that these attitudes have upon homosexual adolescents can be devastating, as the manifestation of internal and external homophobia can be grave. By being knowledgeable about the current attitudes towards homosexuality and how these views are expressed, counsellors and other professionals within the school system, may be more effective in working with gay and lesbian students and the issues they face.

Home and school environments can be stressful for a homosexual adolescent or for any adolescent still unsure of his or her sexual identity. Paper two concentrates on the issues faced by homosexual students within each of these environments. Regardless whether adolescents are unsure of their sexual identity or if they are open about their homosexuality, the

homophobic atmosphere in which they live may result in several developmental problems. The school counsellor can play an important role in the healthy development of adolescent homosexuals as they lack the traditional venues of support and guidance that are available for their heterosexual peers.

Paper three concentrates on the role a counsellor can play in the school environment to help make it a safer place for both those homosexual students who have declared their sexual orientation, and for those still unsure. Not only will the school counsellor's role includes working with students, but it is crucial for services to be provided to the homosexual adolescent's family, to the other personnel working within the school, and to the general school population. Hopefully, paper three will provide useful material that school counsellors can draw upon when they find themselves working with gay and lesbian adolescents. As well, it is hoped that these papers will bring attention to the importance of this issue within the school system and the need for further knowledge and exploration into adolescent homosexuality.

PAPER 1

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**The development and impact of North Americans'
views of adolescent homosexuals.**

Introduction

Throughout history homosexual activity has been recorded across all cultures. However, the present-day homosexual identity is believed by some to be a phenomenon of Western society (Shortall, 1998). In her view, homosexual activity may have existed elsewhere throughout history; however, the notion of identifying with a separate and unique group based on sexual orientation appears to be specific to Western culture. Thus, homosexual behaviour in itself does not constitute a homosexual identity. To "commit" a homosexual act is one thing, but to "be" a homosexual is something entirely different (Shortall, 1998, p.9). One's sexual orientation encompasses more than just behaviour. However, homosexuality, like heterosexuality, is part of one's core identity and is expressed in all aspects of one's life. Dress, mannerisms, choice of friends, career, and interests, in addition to one's behaviour, constitute one's homosexual identity (Hersch, 1993).

Homosexuality, as defined by Bass and Kaufman (1996), refers to a person who has romantic, emotional, physical, and sexual attractions to someone of the same sex. As these authors have stated "it is a label that identifies who we fall in love with" (p.5). The terminology used within the homosexual community to refer to homosexuals of each gender has had mixed acceptance. The word "gay" is used to refer to male homosexuals. It was used as early as the 13th and 14th centuries and derived from the French word "gaie", where it was used as a type of password or code to help homosexuals communicate with one another and identify a common

bond (Burnham, 1995, p.13). The word "lesbian" is used to refer to female homosexuals. It is derived from the name of a Greek island, Lesbos, where Sappho resided in the 7th century B.C. Sappho was regarded as the greatest woman poet of ancient time and known for her love poems to other women who resided with her on the island. There has been confusion over the use of these terms within the homosexual community. Often the term "gay" has been used to refer to all homosexual people, whether male or female. However, throughout this paper "gay" will be used to refer to male homosexuals, while "lesbian" will be used to refer to female homosexuals.

It is crucial to understand the history of homosexuality in order to have an appreciation for the development of the attitudes surrounding sexual orientation. The attitudes held by North American's are reflected in the treatment of all homosexuals in that society. Gay and lesbian adolescents, however, are a minority group that is often overlooked or ignored within the larger homosexual community. They are exposed to these negative attitudes just as are adult homosexuals, often, however, with more devastating affects. For counsellors working within the school setting it may be beneficial to understand the barriers that these adolescents face in attempting to develop into adulthood. This paper will discuss the history of homosexuality, its influence upon the development of these negative attitudes, and the impact that these attitudes have upon gay and lesbian adolescents.

Throughout this paper the focus will be on gay and lesbian adolescents, rather than all sexual orientations. This in no way lessens the importance of other sexual orientations, however, the scope of this paper is too narrow to include a description and analysis of all possible orientations. Further research is required in the areas of bisexuality and transgendered adolescents in order to adequately address their needs in counselling settings.

Historical Development

The homosexual identity found in modern Western society began to take shape towards the end of the 19th century. A division among historians occurred during this period resulting in the essentialist and the social constructivist approaches to viewing the development of present day homosexuality. Essentialists view homosexuality as something that has always existed in society, something that a person is born with that makes him or her biologically different from heterosexuals. In comparison, social constructivists view homosexual identity as a relatively new phenomenon which has been created by North American culture (Miller, 1995). The essentialist view of homosexuality is continuous throughout history, whereas, social constructivists stress discontinuity in its development with many stops and starts depending upon the social context (van Kooten Niekerk, 1989). Bass and Kaufman (1996) follow an essentialist approach in that they believe gay and lesbian youth have always existed. It is only recently, however, that many gay and lesbian adolescents are able to recognize and name the feelings they are experiencing.

It could be said that the development of the present day homosexual identity has occurred as a result of both the essentialist and the social constructivists approaches. Homosexual behaviour is something that has always existed and the development of the homosexual identity has been a continuous "battle". However, the cultural and societal developments of the past have provided the setting necessary for the evolution of the homosexual identity that we see within North American societies today. It seems that neither approach alone can claim to be providing an explanation for the present day homosexual identity. Thus, the continuous development of already existing homosexual behaviours, combined with the appropriate social setting, has resulted in the present day homosexual identity.

Many events over the past 125 years have contributed to the creation of the modern understanding of homosexual identity and community. Thus, elements in the history of homosexuality in North America are crucial to our understanding of the modern day homosexual. Much of the literature in the history of homosexuality stems from American sources, rather than Canadian sources. This is because the United States has been in the forefront of North American research and study in the area of homosexuality. Canadian research in this area follows the American work but the majority of this has taken place in the 20th century.

A review of Shortall's (1998) work indicates that historical studies provide no evidence of a distinction between homosexuality and heterosexuality in ancient Greece. Adult men behaved sexually with both men and women. This homosexual activity appeared to be an accepted aspect of male culture at that time, just as it was for the females who resided with Sappho on the island of Lesbos (Shortall, 1998).

The homosexual identity of the 1900s is distinguished from anything that had existed in earlier decades. Homosexuality was represented as a medical condition, thereby setting it apart and stigmatizing the homosexual person. Another factor involved the economic changes that were taking place in the early 1900s as the industrial revolution was in full swing (Miller, 1995). Many people moved to urban centres away from their family and friends. This allowed people who lived in these urban centres to become anonymous and to seek out others like themselves. Liberal and democratic societies began to evolve within these ever expanding cities. Gay and lesbian people began to acquire, increase, and defend their personal rights (Miller, 1995). They were provided with the opportunity to bond together and create their own institutions which made them feel more comfortable about disclosing their sexual orientation in public.

During the early 1990s women were also becoming more independent from their own families and from men in general. Many females were becoming educated and more career oriented often allowing them to live comfortably without the financial support that men provided (Miller, 1995). Private colleges for women brought them together and provided the opportunity to develop intimate relationships with one another. For females it was becoming more acceptable to remain unmarried for longer periods of time as they were improving their education (Miller, 1995).

By the early 20th century, however, a shift had occurred in social attitudes. Same-sex relationships were condemned by the Christian Church, meaning that the only places these relationships could survive were in artistic or Bohemian pockets where the social rules were more relaxed (Miller, 1995). As well, homosexual behaviour was being classified as deviant. Historians such as Faderman and Smith-Rosenberg tend to blame sexologists for creating this idea (Miller, 1995). Sexology is the scientific study of sexual relationships (Miller & Waigandt, 1993). Despite the efforts of sexologists to categorize and label the homosexual person, up to the time of World War I, the notion of a specific homosexual personality type was not widespread. In fact during WW I, there was little or no recognition that passionate feelings towards another soldier labelled or stigmatized a person in any way (Miller, 1995). However, by the end of the war this had completely changed. National disapproval of homosexuality resulted in near hysteria within North American society as homophobia was born (Miller, 1995). The term "homophobia" is derived from and used primarily in the academic discipline of psychology. "Phobia" comes from the Greek word "fear", which is an irrational anxiety or dread. Thus, the word homophobia refers to an irrational fear or dread of homosexuals and of homosexual

behaviours (Kitzinger,1996)

During the 1920s universities and members of sophisticated upper class circles began to view art for art's sake and unconventionality was now in vogue again. There was a certain level of tolerance for homosexuals, but according to Miller (1995) the anti-homosexual feelings lay just beneath the surface. By the end of the 1920s these fears and prejudices had resurfaced, but not before the development of a middle class homosexual community where sexual orientation was the unifying factor. Within this community homosexual people could live in peace, at least as long as they did not draw attention to themselves. Greenwich Village, New York, was at the centre of the development of this new community and it continued to play a large role in the development of the homosexual community (Miller,1995).

During the 1930s, anti-homosexual regulations were enacted which forced homosexuals to move from place to place and depend upon word of mouth to inform them of the location of new meeting places (Miller. 1995). In contrast to WW I, when homosexuality was not even recognized, WW II marked the first time that the United States military asked recruits "are you homosexual?"(Miller 1995. p. 231). Prior to the war a military policy to exclude homosexuals did not exist. However, new screening procedures were introduced which began the ongoing struggle for acceptance and efforts to end discrimination within the military. This marked the recognition of homosexuals as a defined, separate, and distinct group of people.

During WW II and the post-war era, psychiatry's influence in American society increased. The mental health profession began to take a negative stance towards homosexuality. In the 1950s and 1960s there was near unanimous consensus from North American schools of psychology that homosexuality represented a pathology (Miller, 1995). The first significant

challenge to this "gay is sick" mentality came in the reports of Alfred C. Kinsey in 1948 and 1953. Kinsey was a researcher at the University of Indiana where he interviewed more than ten thousand white Americans about their sexual habits. The results of his work showed that homosexuality was more widespread than what was originally thought. He hypothesized that human sexuality is extended across a continuum from exclusively homosexual to exclusively heterosexual (Miller, 1995). In this view, each person falls somewhere along a continuum which would help explain the wide diversity in sexual orientation and the difficulties and confusion in attempting to classify oneself as solely homosexual or solely heterosexual (Burnham, 1995; Hersch, 1993).

Despite the repressive political and social atmosphere in North America during the 1950s homosexual subcultures continued to evolve. The prevailing society of the time was hostile and ignorant about homosexuality. Homophobia was predominant as persecution of homosexuals occurred across the continent (Miller, 1995). Gays and lesbians were left to fight for their own interests without support from mainstream society. As a result, they began to organize themselves against the common oppression, but keeping these organizations alive was not an easy task. People were afraid of "coming out" in public because of persecution, discrimination, and rejection. The process of "coming out" is referred to disclosing one's sexual orientation to others. It is a shortened form of "coming out of the closet", where "being in the closet" or "closeted" refers to homosexuals who keep their sexual orientation hidden from others (Herek 1996, p.107). Therefore, many organizations did not survive due to low and inconsistent membership (Miller, 1995).

The climate in America began to change in the 1960s when the Black Civil Rights

movement was growing. It had paved the way for other minority groups to stand up and fight for their rights. With the availability of the "pill" the sexual revolution was expanding and sex and sexuality were spoken about more openly (Miller,1995). Gay and lesbian people were speaking out in public, following the lead of other minority groups of the time.

Possibly the most influential event in the development of the present day homosexual identity was the raid upon Stonewall in 1969. Stonewall was a less than respectable gay bar owned by the Mafia in Greenwich Village, New York. On June 17, 1969 the police raided the club. Rather than dispersing, the homosexual clientele remained outside and rebelled against the police. Reinforcements had to be called to control the scene and the following night the events were repeated as the riots began to take on a political flavour. Signs had been displayed in boarded up windows, "they invaded our rights; legalize gay bars; support gay power" (Miller 1995, p.366). The old homosexual culture was quickly disappearing, as events would soon be described as occurring in either the pre-Stonewall or post-Stonewall era, signifying its importance to gay and lesbian history. One month after the Stonewall incidents three to four hundred gay and lesbians gathered at Washington Square, New York, and marched to the site of the riots chanting "gay power" (Miller 1995, p. 368). The gay revolution had finally arrived. Gays and lesbians were standing up, rather than hiding. They were shouting for their rights and privileges in North American society.

During this exciting time the word "gay" began to replace the clinical term "homosexual" and the more derogatory term "queer". Today, as the homosexual identity continues to evolve, a new generation of homosexuals have taken back the term "queer" to reflect their pride in themselves and who they are. It has become a unifying term that describes all gay, lesbian,

bisexual, and transgendered people and has a political overtone of sisterhood or brotherhood (Rhoads, 1994). It has become a political term that, for many people, symbolizes a challenge to traditional category boundaries (Rust, 1996).

During the 1960s lesbians began to separate themselves from the "mixed" gay movement. Instead, they formed all women groups committed to lesbian-feminist issues and concerns. This was not easy as many feminists groups did not want to be associated with lesbians (Miller, 1995). Many sectors of the feminist movement, however, continued to progress with the lesbian groups and the "political lesbian" was born. A political lesbian was defined as a woman who did not have sexual relations with other women, but who had made a commitment to the lesbian movement out of solidarity to other women and in opposition to male power and control (Miller, 1995).

The 1970s saw thousands, rather than the hundreds, of gay and lesbians marching to support a movement that was spreading from coast to coast. In 1971 Canada's first gay newspaper, "The Body Politic", appeared (Miller 1995, p.389). By the mid 1970s progress for gay and lesbian rights looked unstoppable as no formal opposition had yet been formed. However, by the late 1970s attitudes were again shifting. Television evangelists were tapping into society's worries about moral decline and they were gaining popularity with the general public (Miller, 1995). Anita Bryant, a pop singer, spokesperson for Florida Orange Juice, and a born again Christian, announced that she would be leading a campaign against the progress of gay and lesbian rights. Within six weeks she had received 65,000 signatures in support of the campaign. She had based her campaign on the slogan "homosexuals can not reproduce, so they must recruit" (Miller 1995, p.402). A new dangerous atmosphere for gays and lesbians was

created. The stabbing death of Robert Hillsborough in San Francisco by several youth shouting "faggot" placed fear within the entire homosexual community. At the same time however, the San Francisco Gay Freedom Day parade that year had its largest ever turnout with over 250,000 people marching for homosexual rights (Miller 1995, p.403).

Homosexuality had come to stand for everything that many heterosexual North Americans felt was wrong with society (Miller, 1995). Homosexuality became the scapegoat for the problems that existed at the time: a sense of social breakdown, growing sexual permissiveness, and the weakening of family and authority structures could all be blamed on homosexuality. By the end of the 1970s however, this opposition to the gay and lesbian rights movement had slowed (Miller, 1995). Gays and lesbians had now established themselves as a force in mainstream North American politics, regardless of the opposition.

As the 1980s arrived so did AIDS, which was a devastating blow to gay liberation. Gay men mainly expressed their homosexual identity sexually, therefore, their freedom was curtailed as sexual activity became a matter of life and death. Safe sex was emphasized as the secrecy and living in the shadows of the past were replaced with frankness and openness. By the middle of the decade safe sex had become the norm for most gay men (Miller, 1995). Thus, a different kind of gay community began to evolve- a community that revolved around monogamy rather than sexual pickups. Male homosexual relationships began to take on a more emotional and intimate component. Gays were less likely to define themselves in sexual terms, thus changes occurred in their patterns of interaction and intimacy (Altman, 1989). The AIDS epidemic also brought the gay and lesbian communities together again to fight the common cause. Even though the gay community was more fatally affected than the lesbian community,

they joined forces in support of one another.

Anti-homosexual forces quickly took advantage of public concern, equating homosexuality with disease once again. Many gays began to fear a nationwide witch hunt. Instead, AIDS helped to make the homosexual community more visible and to give it a human face (Miller,1995). A deeper sense of community was created as gays were placed in the public eye. Homosexuals were seen as courageous caring individuals, rather than the past stereotype of frivolous pleasure-seekers. It appears that AIDS may have strengthened the growth of homosexual identity and community (Miller,1995).

In the 1990s a stronger more committed homosexual community exists in North America than ever before. Although there is still much progress to be made, great gains have been made in increasing the rights of gays and lesbians. In December 1997, amendments were made to the Canadian Human Rights Code making it illegal to discriminate against anyone on the basis of sexual orientation. British Columbia was the first province in Canada to voluntarily grant pension benefits to same-sex couples who are public employees (Meissner, 1998). AIDS has resulted in the development of large homosexual community organizations concerned with providing education, support, services, and counselling to both the homosexual community itself and the general public (Altman,1989).

Development of Attitudes about Homosexuality

Attitudes towards homosexuality in North American society remain predominantly negative, despite recent progress in Human Rights legislation. The development of these

attitudes can be traced back for over 100 years by studying psychology, sociology, and feminism, among others. Over this span of time homosexuals have been oppressed and persecuted by the majority heterosexual population, for the most part on both religious and scientific grounds (Moses & Hawkins, 1982). The prevailing social, legal, and religious attitudes of North American society have identified homosexual people, because of their sexual preferences, throughout this 100 years as being sick, illegal, and sinful. The attitudes and beliefs held by social scientists and mental health professionals have directly affected the way homosexuals are treated and studied by members of these professions (Moses & Hawkins, 1982). The attitudes and beliefs held by religious leaders, educators, and those in the legal professions have affected the treatment of homosexuals in the Church, school, and the court room. These attitudes feed down into the general community and affect the way average people think about, talk about, and act towards homosexual people. Homosexual people themselves are even affected by these attitudes because they grow up in the same environment as everyone else (Moses & Hawkins, 1982).

Psychological influences.

The work of twentieth century criminologists and psychologists helped to set the tone for future research in homosexuality (Moses & Hawkins, 1982). The definition of homosexuality as being deviant and pathological arose from this research and persists to the present day. Some people view the psychologist as promoting the distinction between heterosexuality and homosexuality. Trumbach (1989) states that psychology "constructed the foundations of oppression of the gay male in the contemporary world" (p.159).

The psychological approach to sexuality has been heavily influenced by the work of Sigmund Freud. He believed that homosexuality indicated arrested development and that homoeroticism was a stage to be passed through on the way to heterosexuality (Miller,1995; Miller & Waigandt, 1993; Moses & Hawkins,1982). Psychodynamic theorists believe that people are pansexual, a situation where they are aroused by both sexes. According to psychodynamic theory, during life we go through stages of homoeroticism and heteroeroticism. Conflict or fixation at key stages within this development can then result in homosexuality or heterosexuality (Miller & Waigandt, 1993). Many psychoanalysts took this argument as grounds for labelling homosexuals as sick, and therefore, people who needed to be cured. It was believed that the homosexual person was stuck or fixated in one stage of his or her psychosexual development and only required help in overcoming this fixation to be considered well and heterosexual.

Many members of society began to look to psychiatry, rather than religion, for solutions to the social problems. The religious view of homosexuality as a sin was translated into the scientific belief that it was a symptom of a mental disease or a dysfunction. This change in the labelling was caused by a shift in social attention from the Church to the mental health professions (Moses & Hawkins, 1982).

In 1986 the American Psychological Association (APA) removed all references to homosexuality from its Diagnostic and Statistical Manual (DSM-111 R) (Miller 1995, p.257). Despite this change many psychiatrists still continue to accept the notion that homosexuality represents a pathological state (Miller, 1995). Some psychiatrists claim that heredity plays no part in a person's sexual orientation and that the environment, specifically the mother, can

produce homosexuality. These psychiatrists believe psychotherapy to be the "cure" for returning the person to a heterosexual existence (Burnham, 1995). The famous Kinsey reports of 1948 and 1953 began to discredit the notion of parental influence on homosexuality. Thus, it is still not known what makes a person homosexual, heterosexual, or somewhere in between.

Sociological influences.

Social theory supports the ideology that people define themselves through their social interactions. Within society individual's actions and the messages they receive regarding those actions help them to define this identity (Shortall, 1998). Thus, the manner in which we view our social behaviour is not individualistic, but is rather a social process. In this view, the gender at birth becomes linked to sexuality and sexual identity through the social processes one becomes engaged in. This theory, however, does not address the homosexuals who have always felt they were different from their peers. Some homosexuals have always known that they were different; it was not a sudden change influenced by their social interactions within the environment. "I've always known that I'm fundamentally different", is a frequent claim of homosexuals who feel that their sexual orientation is innate and not formed by their social environment (Barinaga 1993, p.18). At the same time, social theory has influenced the development of numerous negative attitudes towards homosexuality. Its influence has contributed greatly to the limited access to information for gay and lesbian adolescents because of the fear that exposing adolescents to homosexuality will predispose them to becoming homosexual later in life.

Society's influence upon sexual orientation varies depending upon the society in which one lives. Within some cultures males and females are expected to become involved in

homosexual activity. Conversely, in North American culture we learn early in life that physical contact with a person of one's own gender is to be avoided (Miller & Waigandt, 1993). Thus, sexual orientation may be partly determined by the society in which one lives.

Overall, because North American society views sexuality in a negative way, homosexuality was primarily studied by sociologists in terms of it being a form of social deviance and a criminal activity (Moses & Hawkins, 1982). Kinsey's reports (1948 & 1953) legitimized human sexuality as an area for sociological research as it questioned the idea that homosexuals were sick. In the 1930s sociologists began to look at deviance as a natural part of social life. They tried to understand how these deviants "fit" into society. This new appreciation of deviance developed into Labelling theory. This theory stressed the role that social definition plays in the creation and maintenance of deviance. In other words, homosexuality was considered deviant because society had decided that it was undesirable (Ross 1996, p.205). In turn, people react negatively based on the label they are given and the meaning that label has for them. Labelling theorists would contend that the label creates the deviance and not the other way around.

The work of many sociologists has provided a fund of knowledge about attitudes towards gays and lesbians, their lifestyles, and the consequences of being homosexual in our society. Kinsey's reports (1948 & 1953) on human sexuality opened the door to viewing homosexuality as an alternative sexuality, not as an illness. Sociologists began to question the "scientific" approach to understanding homosexuality and the academic community began to look at homosexual people as potentially healthy (Moses & Hawkins, 1982). The norm of heterosexuality was looked at more closely and the problems associated with this norm were

researched. Labelling a person as simply heterosexual or homosexual seems to be too simplistic. According to Hersch (1993), sexuality is a broad spectrum of behaviours all with different causes and characteristics. Thus, these more recent sociological approaches to understanding homosexuality underlines the ways individuals and cultures have constructed, and are still constructing, the meaning of sexuality.

Feminist influences.

Feminist theory, like social theory, views sexuality as a product of social interaction (Shortall, 1998). The interactions and experiences we have with both males and females influence the development our sexual identity. The feminist approach to sexual orientation was the first real indication that choice is a relevant factor in understanding sexual orientation (Bohan, 1996). The feminist theory of sexuality describes sexuality as a social construct of male power, defined by men and forced on women (Mackinnon, 1997).

The feminist movement of the 1970s influenced the development of lesbianism in North American society. The interactions that occurred between the Gay Liberation and the Women's Liberation Movements were in response to male heterosexual oppression (LeVay & Nonas, 1995). Homosexual women, as discussed earlier, abandoned the term "gay" to describe themselves during the 1970s and instead began to join the growing women's organizations (LeVay & Nonas, 1995). The Women's Movement helped to give lesbians a new status and encouraged more lesbian women to come out. Lesbianism was becoming a choice, a political statement, the ultimate in liberation from male dominance (LeVay & Nonas, 1995). Increasing identification with feminism created a political agenda for lesbians that went beyond equal rights.

Some women were clearly lesbian in their orientation; they had sexual feeling for other women for as long as they could remember. Other women, who had previously identified themselves as heterosexual, chose to become lesbian. They chose to invest their political, social, emotional, and sexual energies with other women against male oppression. This choice was political in nature and it was made in opposition to the male dominated system (Miller, 1995).

Many females chose their sexual identity as a result of their social interactions within the male dominated society. By choosing to be homosexual, these females acknowledged the limitations and injustice in the rigid roles prescribed by the society. Feminist writers like Moraga & Smith (1996) feel that the majority of women who came out as lesbians through the feminist movement had very little understanding of what it meant to be gay without the support of the women-identified political movement.

The lesbian-feminism movement saw a large increase of females moving into college towns, rather than to the urban centres as the gay males had (Miller, 1995). Lesbians had begun to establish their own culture separate from gay males. Feminism helped to distinguish lesbianism from being "gay" (Miller, 1995).

The Women's Liberation Movement not only created an opportunity for women and girls to be recognized as smart, strong, and independent but it also created an opportunity for men and boys to be sensitive, nurturing, and receptive (Bass & Kaufman, 1996). In this sense, the Women's Liberation Movement had an influence on lesbian, gay, and to some extent, heterosexual development. It attempted to create more equal and less strict gender-role expectations. Some historians however, view this movement as widening the gap between masculinity and femininity. Rather than males and females being accepted by these less strict

gender-role guidelines, males were devalued for expressing female traits (Friend, 1993).

Many of the negative attitudes present in North American society today are based in myth and misconception and have developed from areas such as psychology, sociology, and feminism. It is difficult to be a member of this society and not hold these attitudes as they permeate all facets of life; school, family, religion, and the legal arenas. Both homosexuals and heterosexuals hold these negative attitudes to some degree implying that the attitudes can only be changed by separating the myth from fact.

Homophobia and Heterosexism

Much of the research that have taken place over the past 125 years in the area of homosexuality have concentrated on finding the cause of homosexuality. Numerous theories have been developed to explain homosexuality, each with its own flaws. Harrison (1993) criticizes these theories as being too simplistic to explain the complexity of human sexuality. She argues that time and money would be better spent on reducing the prejudice and discrimination towards homosexuals, rather than searching for the cause and ultimately the "cure". Searching for a cause, if one exists, would possibly only increase the amount of prejudice and discrimination felt by the minority group. In the preceding discussion of the history of homosexuality and the attitudes surrounding homosexuality, the majority of research has been about what makes a person homosexual. These years of research and study have not moved North American society much closer to creating an equal environment where all people are accepted regardless of their sexual orientation.

Many of the negative stereotypes about homosexual people are the result of the attitudes

held by heterosexuals. These attitudes fuel the fire of homophobia. Homophobia, as defined earlier, is a fear or dread of homosexuals or of homosexuality which can apply to both homosexuals and heterosexuals (Kitzinger, 1996). It generally applies to anyone who does not like or is afraid of homosexual people. Society's attention is focused on the irrational fears, attitudes, and the resulting behaviours of those who react negatively to homosexuals (Moses & Hawkins 1982). Homophobia does not have anything to do with the homosexual person or with anything inherent in him or her. Rather, homophobia is a product of the culture and the society in which we live.

The notion that some people might have a phobia regarding homosexuality began to appear in psychological writings in the late 1960s and early 1970s (Kitzinger, 1996). Homophobic people appear to use myths to create reasons for their irrational fears. These myths and stereotypes become seeds of hate, prejudice, discrimination, and violence for the dominant heterosexual population (Pollack & Schwartz, 1995).

Heterosexism is the belief that heterosexual identity and behaviours are normal and legitimate and that any other sexual orientation is deviant, perverse, and abnormal (Bohan, 1996). Institutional heterosexism occurs where social institutions assume heterosexuality to be the only legitimate sexual orientation. The institutions support this assumption with policy, rituals, and resources while at the same time ignoring, demeaning, or even punishing alternative sexual orientations (Bohan, 1996). This type of prejudice is distinguished from all other forms because, generally, it is socially accepted. Homophobia, then, emerges from the heterosexism that exists in society. Unfortunately, schools and families work together to perpetuate the ideologies of heterosexism and homophobia (Friend, 1993). Heterosexism causes homosexuality to be

invisible. If it is visible, heterosexism then stigmatizes, trivializes, or represses it. Like all other forms of oppression, heterosexism is built into our institutions and customs and in individual attitudes and behaviours.

Societal homophobia is referred to as external homophobia, while individual homophobia is referred to as internal homophobia (Herek, 1993). External homophobia is the hatred that the wider society feels and expresses towards homosexuality and the homosexual person (Bohan, 1996). For example, homosexual people experience discrimination in housing, employment, and the legal system, they experience harassment and assaults, often on a daily basis, they are often rejected by family and peers, and the portrayal of homosexuals in the media is usually based on negative stereotypes.

Internalized homophobia refers to the psychological consequences of living in a homophobic society (Bohan, 1996). It occurs when the hatred of homosexuality is internalized by gay and lesbian people. Internalized homophobia may be expressed through substance abuse, depression, or even suicide: as a verbal or physical aggression towards other gay and lesbian people; or as hatred of the qualities stereotypically attributed to gays and lesbians (Bohan, 1996).

All individuals are socialized to varying degrees to view homosexuality negatively. This socialization causes reactions that may range from denial of the existence of homosexuals, to the belief that they are diseased and criminal, and to verbal and physical assault. According to Gonsiorek (1993), the intensity of these feelings is determined by one's personal history, contact with homosexual people, and one's individual psychological make up. Because of society's hostility, internalized and externalized homophobia create numerous psychological challenges for all homosexuals.

The Impact of Homophobia upon Adolescents

Adolescence is generally marked as a period of uncertainty and confusion in one's life- a time when a person begins to discover who they are and what type of person he or she wants to be (Bohan, 1996; Rhoads, 1994). The development of a sense of self is complicated for any individual by the stressors of adolescence. However, this task is more complicated for gay and lesbian adolescents because the heterosexist biases that exist in society devalue their same-sex feelings (Garnets & Kimmel, 1993). Homophobia can be used to stigmatize, silence, and target people who are perceived as deviating from their gender-role, whether they are gay, lesbian, or heterosexual (Garnets & Kimmel, 1993). It is important to examine the effects of homophobia upon adolescents because they are at a crucial period in their lives, and the effects of homophobia can have devastating results upon their psychological well-being and future development into adulthood (Bohan, 1996). If not addressed, homophobia can create even more problems for a society in terms of providing mental health services, crime prevention, etc. A further consideration is that if professionals from all fields hope to decrease the amount of prejudice surrounding sexual orientation, measures in this direction must be taken before the individual reaches adulthood. Certainly professionals would be more successful in reaching this goal if they understood how homophobia is manifested and displayed in adolescence.

Internalized homophobia in adolescence.

Internalized homophobia is one of the greatest impediments to mental health in gay and lesbian adolescents (Gonsiorek, 1993). Ross (1996) hypothesizes it to be responsible for

psychological dysfunction in gay and lesbian adolescents. Internalized homophobia, as already discussed, occurs when a gay or lesbian person incorporates the negative attitudes about homosexuality that exist in society into his or her own self image. Eventually these negative feelings about that part of the self may be overgeneralized to include the whole self. It is a very small step from feeling that one part of the self is unacceptable to feeling that the whole self is unacceptable. Overt self-hatred, whereby the adolescent consciously views himself or herself as being evil or inferior, may result (Gonsiorek, 1993). Internalized homophobia should not be confused with self-doubt, which is a part of natural development in adolescence (Pollack & Schwartz, 1996). All people doubt themselves at times, especially when they are attempting to discover their true selves. Internalized homophobia, however, is more than a questioning or doubting of one's identity: it is a hatred and denial of the sexual part of oneself. This can cause numerous problems as adolescents may engage in self-destructive behaviours, either as a means of self-punishment, or as a way to escape from the reality of their sexual orientation.

Internalized homophobia can be covert in that gay or lesbian adolescents may make the effort to appear to accept their sexuality, but at the same time they sabotage their efforts to develop this identity. They may tolerate or ignore discrimination or abusive treatment from others, which affirms their view of being inferior to heterosexuals. They may not stand up for themselves; they may also allow themselves to be provoked, blame themselves for failure, have low self-esteem, and feel isolated from others. Each of these responses undermines the gay or lesbian adolescent's self-worth and contributes to the predominant heterosexist ideology.

All aspects of an adolescent's life are coloured by the internalized homophobia he or she has developed from simply being raised in a homophobic society. Internalized homophobia is

the result of early lessons in homonegative attitudes learned inside and outside of the family. It is difficult to grow up in a culture that has only negative things to say about homosexual people and not believe it about oneself if one is homosexual. This internalized homophobia can leak out in obvious or more subtle ways. Many gay and lesbian adolescents believe that they cannot have enduring relationships, raise children, or accomplish their goals because they are not heterosexual (Bass & Kaufman, 1996).

Internalized homophobia may also be intensified once a person has been victimized. The lingering feelings one has about homosexuality being wrong may resurface and lead to self blame and increased vulnerability. Sexual orientation then becomes a source of anxiety and punishment rather than a positive aspect of one's life (Bohan, 1996).

Externalized homophobia in adolescence.

While internalized homophobia can cause severe problems for homosexual adolescents, many of their problems also stem from external stressors. One of the most obvious stressors is verbal and physical abuse from their peers. According to Gonsiorek (1993), more than any other period in one's life, adolescence is a time of polarization, particularly for sex roles. There is no place between these poles; one is either male or female in terms of sexual identity. Adolescents, as a group, are intolerant of differences and as a result ostracize peers who do not conform with the larger group (Gonsiorek, 1993). This makes life very difficult for adolescents who find themselves within the homosexual minority group.

External homophobia can cause psychological problems for gay and lesbian adolescents who have been victimized (Bohan, 1996). The psychic scars that remain following a verbal or

physical assault affect how one feels about oneself and may lead to misunderstood feelings of fear and self-hatred. Internalized homophobia, in a sense, can be a direct result of external homophobia.

Any person can fall victim to anti-homosexual violence, if it is the perpetrator's assumption that he or she is dealing with a homosexual person. The climate of fear that is reinforced by harassment and intimidation often keeps lesbian and gay adolescents from socializing because they want to avoid situations where assaults may take place. As a result, gay and lesbian adolescents begin to lose control over their lives, as they are pressured to hide their sexual orientation. Throughout history, as documented above, the fear surrounding being identified as a homosexual has kept many people living in secrecy. This was especially true during the 1930s, when homosexuals were forced to move from place to place and depend upon others for information regarding their secret meeting places. Ironically, some homosexual people tend to blame the victim of anti-homosexual violence, focusing on his or her "obvious" behaviours, gestures, or clothing- which reinforces the heterosexism. (Garnets, Herek, & Levy, 1993).

Insults are a common form of harassment even if one is only perceived as being homosexual. The name-calling can be devastating to an adolescent's self-image but the harassment can go much further to include obscene gestures, "gay bashing" jokes, and nasty notes on seats or lockers. This can escalate into physical threats or actual violence where things are thrown, people are spit on, shoved, kicked, beaten up, and sexually assaulted (Bass & Kaufman, 1996). Some of the common somatic and behavioral reactions to victimization, for any age, include sleep disturbances and nightmares, headaches, diarrhea, uncontrollable crying,

agitation and restlessness, increased use of drugs, and deterioration in personal relationships (Garnets, Herek, & Levy, 1993). For adolescents these reactions may be particularly detrimental to their well-being as they interfere with their natural development. Such reactions may result in isolation from others, further ostracism, poor academic performance, and possible addiction problems.

Conclusion

Heterosexism and homophobia create challenges for adolescents in terms of self-acceptance, rejection from family and peers, isolation, depression, problems with intimacy, verbal and physical abuse, substance abuse, school failure and drop out, and being forced from their homes prematurely. These factors, together or in isolation, put the gay and lesbian adolescent at risk for a number of other problems, including suicide. Homophobia and heterosexism affect homosexuals and heterosexuals alike, as the root of heterosexism is sexism. The homophobic label is used to enforce a heterosexist arrangement. It functions to keep all adolescents from violating the expected gender role behaviours (Friend, 1993).

As the present day homosexual identity has been developing, attitudes regarding homosexuality have been shifting back and forth, without ever reaching a place where homosexuals have been accepted within the larger society. Traditionally, homosexual adolescents have never been a group of homosexuals who have received much professional or research attention. The history of homosexuality has been described in terms of adult homosexuals, rather than including adolescent homosexuals. This may be due in part to societal attitudes and fear of accusation as discussed above. The problem for the adolescent is not the

homosexuality, but rather the homonegative attitudes of his or her society. Homosexual adolescents must hide their identity and remain in constant fear that their sexual orientation will be discovered, a situation which may lead to social withdrawal, isolation, and other consequences as outlined above.

There is some evidence according to Savin-Williams (1990) that the attitudes about homosexuality are beginning to shift in a positive direction. However, this shift is reported to be occurring among the economically, educationally, and socially privileged. Although social attitudes may be becoming more positive, heterosexism and homophobia still pervade our culture and our social, legal, educational, and political systems. Change will only occur when attitude shifts begin to move into the less privileged groups of society and when the amount of heterosexism ceases to govern the way societal institutions operate.

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PAPER 2

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The lives of gay and lesbian adolescents

Introduction

Most adults would probably prefer to think of homosexuality as an adult-only sexual orientation, which does not affect children or adolescents (Telljohann & Price, 1993). However, many young people become aware of their same-sex attractions in adolescence, as they reach puberty and begin to have sexual feelings (Bass & Kaufman, 1996). In fact, research obtained in the 1970s and 1980s indicates that gay and lesbian adolescents are acquiring their homosexual identity at younger ages than did their older counterparts (Troiden, 1993). The age of awareness of same-sex feelings appears to have decreased in recent years - about age ten for boys and age fifteen for girls (Bohan 1996). Increased openness, tolerance, and accurate information about homosexuality have made it easier for adolescents to perceive similarities between themselves and other homosexuals (Troiden, 1993). According to Bohan (1996) and Moses & Hawkins (1982), adolescents become aware of their sexual preference before age fifteen. For homosexual adolescents, the actual labelling of those feelings as a homosexual identity may take another year or two as they are in the process of forming their homosexual identity (Bohan 1996; Moses & Hawkins 1982).

Early identification as gay or lesbian may have grave psychological consequences for adolescents because they have to cope with the stigma surrounding their sexual orientation for a longer period of time than those who identify themselves as gay or lesbian in adulthood. Homosexual adolescents must deal with the implications this has upon their family relationships, friends, and peers (Bohan, 1996). Negative reactions from family members and others may make

the environment unbearable. This can result in a number of other problems. A great deal of stress is generated from the lack of role models, inaccessibility to the gay and lesbian community, and the lack of information and resources available to homosexual adolescents. Early identification has been positively correlated with low self-esteem, higher incidence of substance abuse, and perhaps a greater risk of suicide (Bohan 1996).

A great deal of the problems that adolescent homosexuals face can be attributed to their status as minors. They have no mobility, poor access to information, and they are economically dependent upon their parents (Moses & Hawkins, 1982). As well, homosexual adolescents are surrounded by heterosexual peers who are often struggling with their own sexuality. Gay and lesbian adolescents are immersed in a superconformist, highly anti-homosexual world of adolescence. Coming out, defined earlier as disclosing one's sexual orientation to others (Herek, 1996), often results in ostracism of the most severe kind unless they live in an area where enough gay and lesbian adolescents exist to form a support group, a situation which is highly unlikely, especially in rural areas (Moses & Hawkins, 1982). Urban areas provide more resources, a sense of anonymity, and more opportunities for gay and lesbian adolescents to meet other adolescents like themselves. In spite of these advantages, urban homosexual adolescents still face many challenges in developing a homosexual identity. Many of the examples and personal stories used throughout this paper are taken from a Newfoundland context in order to illustrate the existence of the issues and challenges within this province.

This paper will attempt to describe the lives of gay and lesbian adolescents as they are struggling to form a homosexual identity. The process of forming this homosexual identity involves the use of the various coping strategies by gay and lesbian adolescents. These strategies,

however, may create new problems for the homosexual adolescent. Both "coming out" and remaining "closeted" create a very stressful environment for the adolescent. Possibly the most influential institutions within North American culture for a developing adolescent are home and school. For the gay and lesbian adolescent this often means that life can be very difficult because heterosexism and homophobia are prevalent within these institutions. The negative effects that this has upon the development of gay and lesbian adolescents can be enormous (Bohan, 1996).

Because gay and lesbian adolescents who are raised in rural areas face more challenges than urban adolescents, in attempting to form their sexual identity, many adolescents leave their rural homes and move to urban areas where they can better develop their homosexual identity. This paper will look at some of the challenges faced by rural homosexual adolescents in comparison to urban homosexual adolescents in the hope of preparing professionals who will be working in these areas. Understanding the challenges faced by all homosexual adolescents, whether they come out or remain closeted, or whether they are from rural or urban areas, is crucial in order to be an effective helper to gay and lesbian adolescents.

Throughout this paper gay and lesbian adolescent issues will be described. This in no way lessens the importance of the issues that bisexual or transgendered adolescents experience. However, the scope of this paper is too narrow to include all sexual orientations. Further research and study is required into the concerns of all adolescents, but especially those adolescents who are discriminated against and in the minority.

Developing a Homosexual Identity

There is very little research on the development of sexual orientation in adolescence. Most of the available information comes from adult homosexuals recalling their pasts (Anderson, 1994). The information that has been gathered appears to indicate that coming to a homosexual identity is not inherently different than coming to a heterosexual identity. Rather, the difference lies in the response from one's community and society (Bohan, 1996).

The conflicts that gay and lesbian adolescents experience when they begin to recognize their feelings for others of the same sex can be traumatic. No one wants to be someone that other people hate. The level of inner conflict that homosexual adolescents experience will depend upon various factors - their families, religious beliefs and the strength of these beliefs, and the nature of the community in which they live. The homosexual adolescent is vulnerable to a host of adjustments, compromises, negotiations, pains, and a multitude of harassment and discrimination as they come to believe that they are compelled to live a lifestyle that is not condoned by most of society. The effects can be felt across the adolescent's entire life. Their feelings about themselves, intimacy with others, and interactions with others are all influenced by the conflicts they experience (Moses & Hawkins, 1982).

The effects of homophobia upon gay and lesbian adolescents can be drastic. Homosexual adolescents are most commonly victimized by their peers. Males are more likely to be the victims of physical assault and verbal harassment in school, while females are more likely to experience verbal harassment at home (Bohan, 1996). The majority of anti-homosexual crimes are committed by late adolescent and young adult heterosexual males, usually acting within groups (Bohan, 1996). Heterosexual adolescents may be participating in these acts to be

socially accepted by their peer group. At the same time, committing anti-homosexual acts could be a means by which they are coping with insecurities about their own sexuality.

It is doubtful that many homosexual adolescents will find support and information about homosexuality because sexual feelings and acts are considered taboo topics for many people within North American society for this age group. As a consequence, most adolescents do not have access to either positive homosexual role models or information that presents homosexuality in a positive light (Moses & Hawkins, 1982; Rotheram-Borus & Fernandez, 1995). Low self-esteem, feelings of isolation, and alienation are common; hence, many homosexual adolescents become involved in self-destructive behaviours. Many gay and lesbian adolescents report feeling as if they exist in a box, with no adults to talk to, no traditional supports to lean on, and no young people like themselves with whom to socialize (Uribe & Harbeck, 1991). According to Uribe & Harbeck (1991), recognizing and accepting one's own sexual orientation, without psychological or social support was described as a time when "I wanted to die", a period where "I just wanted to blot out all of my feelings", or "a time when I felt I was suffocating" (p.22).

It is hard to feel good about oneself when one must keep an important part of oneself secret from everyone. This hiding reinforces the belief that there is something wrong or shameful within oneself. The emotional cost of living in fear and living a lie can be enormous. Gay and lesbian adolescents must come to terms with their identity, which they know is condemned by society and often to some extent by themselves. Since the tools required for the development of this identity are not often available, the adolescents are left to construct an identity from scratch while feeling a profound sense of isolation (Bohan, 1996).

The most common models used to explain the formation of a homosexual identity describe a final stage of integration where one's sexual identity influences all other aspects of one's life. At this stage, gays and lesbians accept their identity and integrate it into their personality and their lives (Gonsiorek, 1993). Many models of forming one's homosexual identity are presented in a step-like sequence. The process of forming sexual identity, however, is not linear, even though it is often represented as such (Rotheram-Borus & Fernandez, 1995). In reality, this process is continuous with many backward steps occurring simultaneously with the forward steps. Stages occur back and forth, up and down, and overlap and reoccur in different ways for different people (Savin-Williams, 1990; Troiden, 1993).

In essence, the primary developmental task for gay and lesbian adolescents is to adjust to a socially stigmatized role in isolation without adequate, accurate information about themselves or about others like themselves, in a time of tremendous physical, social, emotional, and intellectual change (Uribe & Harbeck, 1991). The techniques used by gay and lesbian adolescents to help cope with their sexual identity can be as varied as the individuals. Some drop out of school and society, while others excel in academic and social circles (Uribe & Harbeck, 1991).

Development stages.

Many authors such as Bohan (1996), Gonsiorek (1993), Treadway & Yoakam (1992), and Troiden (1993) discuss various developmental stages in the creation of a homosexual identity. Bohan (1996) describes the stages of development as identity confusion, comparison, tolerance, acceptance, pride, and synthesis. Gonsiorek (1993) describes the stages of development as

denial, crisis, emotional and behavioural experimentation, and integration. This developmental process is peppered throughout with crisis and experimentation before reaching integration.

Troiden (1993) describes the process in a four stage model consisting of sensitization, confusion, assumption, and commitment. Treadway and Yoakam (1992) describe the process of identity formation as awareness, acknowledgement, acceptance, and affirmation. As stated, these stages may overlap and occur concurrently as people progress in their development until they reach the final stage of integration (Bohan, 1996).

Each of these models makes an attempt to describe the process of developing a homosexual identity. However, one model alone can not adequately describe this process for every individual. The stages described by these authors have a common thread in which each begins with learning about homosexuality and mainstream society's reaction towards homosexuals and ends with positive acceptance and integration of one's homosexual identity into the whole person. For the purposes of this paper, these various models of identity development will be integrated to help present the process of development in a concise manner.

Identity confusion: The initial stage which may possibly be the most traumatic for adolescents. In this model, gay and lesbian adolescents will experience a period of identity confusion, whereby they attempt to cope with the possibility of being homosexual by adopting one or more strategies (Troiden, 1993). These strategies may result in the adolescents engaging in dangerous behaviours, becoming withdrawn and isolated from family and peers, or committing suicide as they are unable to handle the confusion felt over their sexual identity (Bohan, 1996). Before moving on to the next stage, the homosexual adolescent must examine how he or she feels about homosexuality. The internalized homophobia, as discussed in paper one "The

rejection and violence they may be experiencing from family, friends, and peers. These areas may be particular city districts or hang outs that are advertised as homosexual. For example, in the United States places like West Hollywood or San Francisco have large homosexual communities. In St. John's, night clubs such as the Zone and the Outpost have been advertised as gay and lesbian meeting places. Often within these places gay and lesbian adolescents may engage in problem behaviours that put them at risk for contracting HIV, and other sexually transmitted diseases (Rotheram-Borus & Fernandez, 1995). As a consequence of their strong desire to connect with others, the homosexual adolescents' judgement about who they get involved with may be impaired. This is even more dangerous for those adolescents who are in need of money or do not have a place to live. Prostitution can then become a part of life for these adolescents (Bohan, 1996).

It is anticipated that over time, as adolescents acquire more information about homosexuality, their attitudes about themselves and about homosexuality in general will become more positive (Rotheram-Borus & Fernandez, 1995). Nonetheless, developing these more positive attitudes can be a daunting task since adolescents are often denied access to information about human sexuality and alternative lifestyles because of the belief that having this information could cause young people to become gay or lesbian (Uribe & Harbeck, 1991).

Acceptance: A growing commitment to one's gay or lesbian identity signifies a fourth stage of acceptance of one's sexual orientation (Treadway & Yoakam, 1992). The homosexual identity begins to feel "normal" for the adolescent whereby he or she experiences a feeling of belonging and validation.

Affirmation: Once gay and lesbian adolescents accept their homosexual identity, a fifth

stage, pride follows, in which they express group commitment and immersion in the homosexual culture. They begin to see homosexuality in a more positive light as they confirm their sexual orientation, rather than deny it as they may have previously (Treadway & Yoakam, 1992).

Integration: If the experience of disclosure is positive, a final synthesis, or integration occurs, where all boundaries in the gay and lesbian person's life are non-existent, meaning a greater integrity in one's sense of self. No longer is the gay or lesbian person required to avoid particular situations because of the fear of disclosure of his or her sexual identity. They can be a whole person without anything to conceal.

Failure to fully integrate one's sexual identity into one's personality is perhaps the central mental health problem for gay and lesbian adolescents (LeVay & Nonas, 1995). The mental health problems may be the result of viewing their sexual orientation from the outside, rather than from actually experiencing or acting as their heterosexual peers have (LeVay & Nonas, 1995). Thus, homosexual adolescents must rely on coping strategies to help them survive throughout the process of forming their sexual identity and integrating this identity into their lives.

Coping strategies.

A major challenge faced by gay and lesbian adolescents is developing appropriate strategies to cope with internal and external stressors associated with forming their homosexual identity (Rotheram-Borus & Fernandez, 1995). Not all gay and lesbian adolescents reach the point of affirming their homosexuality (Treadway & Yoakam, 1992). Most homosexual people grow up receiving negative messages about their sexuality, thus it is unlikely that they will be

happy about discovering that they are attracted to someone of the same sex. As a result, they may spend a great deal of energy burying those feelings so that they fit in with the heterosexual world. Only when homosexual adolescents accept these feelings can they begin to move forward in their identity development. Until then they will remain stuck in their development (Bass & Kaufman, 1996).

Stranded in an environment that shuns their existence, many adolescents remember being called a "faggot" or a "dyke" in elementary school, especially if they departed from the traditional gender stereotypes (Uribe & Harbeck 1991, p.19). Elaborate concealment strategies are often put in place to avoid this harassment. The strategies used however, may eventually delay the adolescents' emotional and social maturity. Thus, the social development of homosexual adolescents may be inhibited by their sexual orientation and as a result, they may not develop to their full potential.

Garnets and Kimmel (1993) and Savin-Williams (1990) describe three styles that gay and lesbians may use to cope with their homosexual identity- repress, suppress, or disclose. Some gay and lesbians may repress their awareness of their homosexual identity from their consciousness. Often, however, this awareness eventually emerges later in life with harmful consequences, as it disrupts the coping strategies that they have established.

Other homosexual adolescents may suppress or hide their true feelings. However, this often interferes with the development of their sense of identity, including sexual identity. A "developmental moratorium" may occur, whereby the adolescent's identity development comes to a halt (Savin-Williams 1990, p.38). This developmental block may lead to underachievement in school, unhappy heterosexual relationships as homosexual adolescents attempt to pass as

development and impact of North American's views upon adolescent homosexuals", needs to be resolved (Gonsiorek, 1993).

Identity comparison: Occurs when the gay or lesbian adolescent begins to examine the implications of the possibility that he or she may be homosexual. At this point, homosexual adolescents become aware that they are different from their peers and start to identify what these differences mean in their lives (Treadway & Yoakam, 1992). The homosexual adolescent comes to realize that there are no guidelines to replace the lost heterosexual cultural expectations. Faced with alienation from the dominant society, these adolescents may withdraw and further isolate themselves, they may reject their homosexual identity, or they may become involved in anti-homosexual activities in an attempt to try to eradicate same-sex feelings (Treadway & Yoakam, 1992).

Shortly after one comes to his or her gay or lesbian identity, life is reported to be the most difficult. Approximately one third of all suicide attempts among gay and lesbian adolescents occur within the first year after self-identification (Bohan 1996). Adolescents are far less prepared to face this period in their life than those homosexuals who are older and have more psychological and social resources. Often, because homosexual adolescents lack the psychological and social resources to deal with accepting their sexual orientation, they may attempt suicide (Bohan, 1996). Sadly, however, many of these attempts have been successful. Often, in unsuccessful suicide attempts, the adolescent is demonstrating that he or she only wants to talk to someone about the issues they may be facing. For example, Sears (1991) describes the story of Georgina:

I was going to take some sleeping pills and eat them right before my mom came home. I thought if she catches me in time, I'll get to talk to someone. I didn't want to kill myself; I just wanted to talk to someone who knew what they were talking about. (p.36)

Recent reports on suicide suggest that 20 to 40 percent of suicide attempts among adolescents are by gay and lesbian adolescents (Bohan, 1996). Estimates provided by the United States Department of Health and Human Services suggests that out of 5000 adolescent suicides, over 30 percent may be related to homosexuality and the issues surrounding same-sex relationships (Harbeck 1993, p.3). These statistics signify the importance of professionals becoming aware of adolescent homosexual issues.

Tolerance: According to most models, gay and lesbian adolescents reach a third stage of tolerance when they become aware of their sexual identity and begin to sense the separation between themselves and heterosexuality (Bohan, 1996). At this point, the confusion and turmoil they experienced in the earlier stages may have diminished somewhat. However, internalized homophobia may still result in self-devaluation, withdrawal, and identity foreclosure (Bohan, 1996). The homophobic society creates an atmosphere where gay and lesbian adolescents do not have an opportunity to date and form romantic relationships with their peers as heterosexual adolescents do. Isolated and unable to explore their feelings, gay and lesbian adolescents are often hungry for connection and affection (Bass & Kaufman, 1996). In seeking out others like themselves, many gay and lesbian adolescents may move to areas that are gay and lesbian identified, or they may frequent areas where they can be anonymous and protected from the

heterosexual adolescents, and constant psychological unbalance (Savin-Williams, 1990).

Disclosing their sexual orientation is another way to cope for gay and lesbian adolescents. This, however, may not be an option for many as it may result in painful confrontation or lead to family rejection and separation. Coming out can be risky, nevertheless many adolescents often do so when surrounded by supportive family and friends.

Continuing to conceal their core identity from family, friends, teachers, or religious leaders, gay and lesbian adolescents generally feel isolated, alone, and alienated from supports needed to survive. At the same time, remaining secretive about one's homosexuality can be a healthy choice for many adolescents while they are becoming more self-accepting, affirmative, and confident in their identity (Treadway & Yoakam, 1992).

According to Friend (1993), the most common method of coping with confusion surrounding sexual identity is through the use of avoidance. Often adolescents will avoid the possibility of their homosexual identity by concentrating on gender typical behaviours. These adolescents may overcompensate for their lack of heterosexual interests by immersing themselves in heterosexual activities in the hope of "curing" their homosexual feelings and to ward off any fears they may have about being homosexual. In other words, homosexual adolescents inhibit any behaviours that could be associated with homosexuality (Troiden 1993). For example, females may exhibit typical feminine qualities such as using make up or wearing particular clothing styles and avoid becoming involved in sports or other activities that are viewed as being masculine. Males may become overtly masculine by becoming involved with weight lifting and sports and avoiding any interests that may be deemed feminine by their peers. Others may begin dating members of the opposite sex. They may become involved in intimate

heterosexual relationships just to eliminate any "inappropriate" sexual interests or confusion they are experiencing. These intimate heterosexual relationships may often result in teenage pregnancy as a means of confirming their heterosexuality so that any doubts may be removed from the minds of family and friends (Rotheram-Borus & Fernandez, 1995; Treadway & Yoakam, 1992; Troiden 1993). Thus, it is not uncommon for homosexual adolescents to engage in anti-homosexual behaviour as a way to "cover" themselves in the eyes of their peers (Anderson, 1994). A false persona results, so that they may gain acceptance and maintain status in their peer group. This duality exacts a high cost in terms of developing a healthy identity (Anderson, 1994).

Many homosexual adolescents may limit their exposure to the opposite sex in order to prevent peers and family members from recognizing their lack of heterosexual interest (Troiden, 1993). For example, adolescents may avoid school dances because they fear that their friends will notice their lack of interest in dancing with members of the opposite sex. Gays and lesbians may also withdraw from social interaction, not only because of their fear that peers and family will notice their lack of interest in the opposite sex, but also because their interest in the same sex may be recognized. They may try to remain asexual or celibate (Savin-Williams, 1990). The interactions with the same gender may arouse strong sexual or emotional feelings, in addition to the painful reminder of their absent heterosexual interest. Therefore, they avoid interpersonal experimentation that is a part of normal adolescent development. In this way, many gay and lesbian adolescents do not get the opportunity to develop the social skills which are required in order to lead healthy adult lives (Gonsiorek, 1993). This in turn leads to further isolation and withdrawal. At the same time, by avoiding personal contact with others, homosexual adolescents

may be branded as cold, aloof, snobbish, and generally disinterested in others (Moses & Hawkins, 1982; Telljohann & Price, 1993). Furthermore, development of poor social skills may leave the gay and lesbian adolescent ill equipped to manage the complicated interpersonal events that will take place later in his or her life. This often results in failed relationships and further isolation and withdrawal (Bohan 1996; Gonsiorek, 1993).

Similarly, homosexual adolescents may avoid or ignore all information about homosexuality because they are afraid that it may confirm their suspected homosexuality (Troiden, 1993). Therefore, they do not learn anything about homosexuality and only continue their confusion. The lack of knowledge about homosexual relationships has also made it difficult for gay and lesbian adolescents to develop healthy, comfortable attitudes towards sex (Bass & Kaufman, 1996). If adolescents do seek out information at their local library it often becomes the first of many lessons that teach the gay and lesbian adolescents that they are "sick". This can make coming out traumatic for adolescents because they learn to think of themselves as sick and bad and they often feel isolated and trapped (Moses & Hawkins, 1982). Burnham (1995) describes one boy's experience in seeking information on homosexuality:

one day when I was about ten, I could stand no longer not knowing why I was so different from the others, so I decided to ask the coach. When I asked him what a homosexual is, he said abruptly, 'look it up in the dictionary'. So I went to the library and Webster's dictionary, but I could not make myself take it off the shelf. I felt that everyone was watching me. Finally, my heart pounding, I had the courage to open the

book and found that the word homosexual means 'someone attracted to members of the same sex'. This certainly was me but the description went on to other words, such as 'pervert', 'deviant', etc., which I had to look up also. These words had terrible meanings and certainly did not fit me (p. 72).

The lack of information for gay and lesbian adolescents can also be dangerous, especially in a time when HIV/AIDS is prevalent. For many young people, having sexual experiences are a means of exploring their homosexuality. Often this experimentation is unprotected which increases their chances of contracting sexually transmitted diseases, including AIDS.

Another avoidance strategy is escapism. Many gay and lesbian adolescents who are confused about their sexual identity avoid confronting the issue by using drugs and/or alcohol. The use of drugs or alcohol provides temporary relief so that the adolescents do not have to think about their homosexuality. It may also help to justify their sexual feelings and behaviours that may be viewed as unacceptable at other times (Troiden, 1993). Using drugs and alcohol may be attractive because of the desire to escape, but it does not bring the adolescent any closer to self-acceptance. If anything, using drugs and alcohol only endangers their health and further impairs their judgement.

For some gay and lesbian adolescents the ultimate escape may be suicide. Dealing with family conflict, physical or verbal abuse, lack of support, substance abuse, interpersonal conflict, loss, and legal or disciplinary problems is associated with suicide and suicidal behaviours (Rotheram-Borus & Fernandez, 1995). These factors are more predominant for gays or lesbians than for their heterosexual peers. Another common coping mechanism used by gay and lesbian

adolescents related to the lack of information is denial. Adolescents deny the possibility of a gay or lesbian identity because they do not fit the common stereotype of a gay or lesbian person (Bohan, 1996). Due to the lack of accurate information the gay or lesbian adolescent is not exposed to material that represents homosexual people accurately. Many adolescents may believe that they must live up to these stereotypical images, many of which include cross-gender behaviours. Often, as a result, the adolescents are rejected and ostracized by their peers.

Denial may stop all movement towards affirming a homosexual identity (Bohan, 1996). Often by the time adulthood is reached, gay or lesbian adolescents are strangers to themselves with regard to their own inner emotional life as they have developed habits of constricting any feelings from developing (Gonsiorek, 1993). Furthermore, denial of homosexual feelings may lead to denial of all feelings. Adolescents may learn to close themselves off from everyone as they learn skills of managing social interactions through deceit. Eventually it becomes difficult to conduct any relationship honestly. In addition, the gay or lesbian adolescent may engage in heterosexual dating or behaviours, either to prove to himself or herself or to others that he or she is in fact heterosexual (Savin-Williams, 1990). The denial of same sex attractions can only be maintained for only so long however, because like other coping strategies, it requires a great deal of energy.

Another coping strategy used by gay and lesbian adolescents is reaction formation (Bohan, 1996). Gay or lesbian adolescents often become the "best" at whatever they are doing to compensate for what they feel is an unacceptable aspect of their identity. The homosexual adolescent may redirect all of his or her energies into school work or other areas (Savin-Williams, 1990). This is not necessarily a bad coping mechanism because often this results in

some degree of acceptance from his or her peers. This may help to increase the adolescent's self-esteem and generate feelings of accomplishment and self-worth. The adolescent may be an overachiever in every facet of his or her life. He or she may be the most thoughtful son or daughter or exceptional in academic or physical performance. Homosexual adolescents "may believe that exceptional goodness will outweigh the wrongness they feel" (Bohan 1996, p.149). This is often referred to as the "best little boy in the world syndrome" and can create a great deal of unnecessary pressure on the adolescent (Friend 1993, p. 228).

Another coping strategy discussed by Savin-Williams (1990) involves rationalization. The gay or lesbian adolescent rationalizes that what he or she feels as being a normal part of growing up, that he or she will outgrow. They may look at a homosexual act as a one-time experience that will never happen again, reasoning perhaps that he or she was only lonely at the time. Gay or lesbian adolescents may try to convince themselves that it was an insignificant act and it only occurred because they were curious. It was just experimentation, not a reflection of his or her sexual identity.

In general the coping strategies used by gay and lesbian adolescents may predispose them to a particular pattern of functioning that can shape their life in marked ways (Bohan, 1996). These strategies often carry a high price including social isolation, drug and alcohol use, and suicide (Treadway & Yoakam, 1992). Many of the coping strategies discussed in this section can have negative impacts on homosexual adolescents if they are used as a means of dealing with homosexual identity for the long term. For most homosexual adolescents, repression or suppression of their homosexual feelings is more common than disclosure of these feelings. In attempting to understand the development of adolescent homosexual identity, professionals must

be aware of the various coping strategies and their impact on the homosexual adolescent.

Coming out

It appears that coming out is occurring earlier in each new generation of gay and lesbian adolescents, especially those from urban, media-saturated, college communities (Savin-Williams, 1990). Self-labelling also appears to be occurring earlier than in the past. This is probably due to changes that have been occurring in society whereby there are more discussions of homosexuality, where there are more media and public presentations of gay and lesbian people, and where there is more visibility of gays and lesbians in all walks of life (Anderson, 1994). As an example, in October 1994, an Oprah Winfrey program focused on the issues of gay and lesbian adolescents. This talk show highlighted the differences between homosexual adolescents and their older homosexual counterparts (LeVay & Nonas, 1995).

LeVay & Nonas (1995) would argue that today's adolescents are dealing with the coming out process in a society that is more aware of and interested in gays and lesbians than it was for earlier generations. The fact that this television program was aired expresses how North American's views about homosexuality have been changing. Topics that have been traditionally taboo are now more openly spoken about within the media in a matter-of-fact tone. This change in attitude would imply that today's homosexual adolescents in North American society would experience the coming out process much easier than past generations of homosexual adolescents. However, there is still a great deal of pain and suffering experienced by these adolescents as they grieve the loss of heterosexuality and the privileged life that goes with it. For many gay and lesbian adolescents, rejection and isolation are still dominant experiences of their lives (LeVay &

Nonas 1995).

Adolescents who do come out are often isolated from well functioning homosexual adults because of the homosexual adults' fear of being accused of sexual abuse or paedophilia by heterosexual adults (Gonsiorek, 1993). Society fears that the homosexual adults may be attempting to recruit the adolescents into homosexuality. As a result, gay and lesbian adolescents lack adult homosexual role models which can become a big problem with regard to their development into adulthood (Rotheram-Borus & Fernandez, 1995).

Heterosexual adolescents easily find role models who offer realistic goals for them to emulate. Conversely, most homosexuals keep their sexual preference hidden, which makes it difficult for gay and lesbian adolescents to find realistic models of behaviour. Those who grow up gay or lesbian are unlikely to know how to go about being homosexual in the same way that a heterosexual person knows how to be heterosexual (Moses & Hawkins, 1982).

Because of this isolation gay and lesbian adolescents often resort to meeting people in bars or other adult homosexual meeting places. This can often be dangerous, because people who frequent such places are older, possibly intoxicated, and possibly emotionally or sexually exploitative of the homosexual adolescents (Gonsiorek, 1993). As a consequence of this lack of acceptable social contact for homosexual adolescents, the gay and lesbian adolescent is left vulnerable to encounters that may have no basis in affection or caring. Instead, some of these encounters may be based on exploitation which can have a negative impact on the adolescent's sexuality for many years. It may also make it difficult to form emotional bonds or share mutual sexual gratification in the future (Moses & Hawkins, 1982).

The prevalence of alcohol and drug abuse in gay and lesbian adolescents may also be the

result of the fact that these adolescents must resort to meeting in bars and other adult places where alcohol and drugs may be used (Gonsiorek, 1993). The social forces that tend to reduce the use of alcohol and drugs after adolescence, such as marriage and parenthood, are usually not factors that occur in a homosexual's life (LeVay & Nonas, 1995).

The need for organizations and meeting places for gay and lesbian adolescents is all the more important when the effects of mingling with some adult homosexuals may be damaging to their development. Organizations for gay and lesbian adolescents regularly face pressure from both the members of the gay and lesbian community, who fear society's homophobia, and also from the conservative elements of the larger society (Gonsiorek, 1993). Thus, often these organizations are not very successful in establishing themselves as a resource for homosexual adolescents.

Coming out is an unpredictable and confusing process for all homosexual people, but particularly for gay and lesbian adolescents, as they may not have the physical or psychological resources required to complete the process. Coming out has many stops and starts and is usually accompanied by dramatic levels of emotional distress. However, most homosexual adolescents who weather the process, emerge with an improved sense of self (Gonsiorek, 1993). Once overcoming the threats to their psychological well being caused by heterosexism, many homosexual adolescents come out because they feel compelled to do so. In their eyes they have no other choice but to be honest with themselves and with those they care about (Gonsiorek, 1993).

Sharing the truth about yourself in a safe and supportive environment is a big step towards feeling better about yourself and your sexual identity. Coming out may be the first time

that a gay or lesbian adolescent feels a real connection with others. Bass & Kaufman (1996) describe one such adolescent's experience, "after all those years of being so absolutely lonely and alone, I found friends...they understood the way I walked, the way I dressed, the things I felt, the dreams I had. From that day forward I don't think I lied about anything" (p.63). Thus, many may experience a sense of relief because they no longer have to remain hidden and lead a double life due to their sexual orientation (Bass & Kaufman, 1996). For example, one Newfoundland homosexual adolescent recalls the coming out experience as a joyful one:

I was 15, and dropping hints like crazy. Some friends came to chat with me and see if I was okay. I was acting strange, and they asked me if I was gay. I said, 'Sure, of course I am', and then I was running up and down the halls screaming because I was so happy. Everyone was saying, 'He's gay, he's gay; he finally said it'. So I was really happy. (Shortall 1998, p.76).

Over time the process of coming out may become a process of "being out", where one simply is oneself, one's whole self in any situation. This process takes time, not only for gay or lesbian adolescents, but for those around them who care about them (Bass & Kaufman, 1996). At the same time, adolescent homosexuals who come out may not automatically belong to the gay and lesbian community - community meaning in connection with others like one's self where one can relax in a shared culture that is not based on the heterosexist model (Bass & Kaufman, 1996). Being a member of this community means having positive role models, allies, a strong support

system, and a place of refuge. However, as a result of the adult homosexual community's fears surrounding society's homophobic attitudes, they may not be readily accepting of adolescent homosexual members (Moses & Hawkins, 1982).

Some adolescents do not identify themselves as homosexual until they reach adulthood. This may be due either to their strong desire to be "normal" or because they lack the information which would help provide them with a label for their feelings (Moses & Hawkins, 1982). Stephen, a Newfoundland high school student, recalls his experience in attempting to obtain information regarding homosexuality:

I guess I became more comfortable with my sexuality since I came out. Before that I really felt inferior. I didn't know anything: I went to a Catholic school and there was nothing on the bookshelves. Everything written was in the AIDS context, or the sexual aspect. It made me feel I was doing something wrong with my life. I felt I was being punished. But now I feel being gay is the person I'm supposed to be (Shortall 1998, p.90).

Homosexual adolescents who have no difficulty in coming out are rare (Moses & Hawkins, 1982). In the best set of circumstances, homosexual adolescents would be able to tell their parents, peers, teachers, and siblings and receive support from all of them. More commonly, however, the homosexual adolescent is punished because of his or her sexual orientation (Moses & Hawkins, 1982). For those who reveal their sexual identity, school means a place for verbal and physical abuse from teachers and students in ways that undermine their

ability to learn (Uribe & Harbeck, 1991).

Coming out is a prolonged, unending process that demands considerable psychological strength and endurance. It requires that the person overcome a lifetime of learning that homosexuality is abnormal and then choosing to act in direct contradiction to that lesson. Every new situation or encounter involves decisions regarding coming out and risking discrimination, harassment, or assault (Bohan, 1996).

Today "coming out" is slowly taking on a new meaning- "coming in". The change of language denotes the idea that the adolescent is coming into a visible and welcoming community with extensive resources to support the individual in coming to terms with their new identity (Bohan, 1996). However, as discussed above, this may not be the case for many adolescent homosexuals.

Closeted

Many homosexual adolescents grow up and live without the support of family or friends. They feel outcast and alone as they are surrounded by a heterosexual culture that allows little representation, affirmation, or support for homosexuality. By remaining closeted adolescent homosexuals are put under a great deal of stress. They are trying to lead a life that is totally concealed from friends and family, which can become an awesome task over the years (Moses & Hawkins, 1982). According to Moses & Hawkins (1982) the extreme anxiety experienced by homosexual adolescents stems from an irrational fear about being discovered. This fear, however, may be quite rational in terms of the environmental conditions they experience.

Homosexuals who have difficulty disclosing their sexual orientation have usually

accepted the negative social views about homosexuality and have applied them to themselves and to others who are gay (Moses & Hawkins, 1982). The main reason many adolescents keep their sexual orientation a secret is because of their fear of being verbally or physically assaulted. Stories of violence are a constant reminder that to be out as a gay or lesbian person is dangerous (Shortall, 1998).

Homosexual adolescents who remain closeted experience damaged self-esteem and distancing from peers and family. The coping strategies of deception described earlier, distorts almost every relationship the adolescent may attempt to develop or to maintain and creates an increasing sense of isolation. The adolescent realizes that his or her membership in a group, family, classroom, church, etc. is based on a lie. As a result of feeling uncomfortable in these settings, the adolescent withdraws even further to increase their sense of isolation (Uribe & Harbeck, 1991).

Many gay and lesbian adolescents choose to remain hidden or closeted, rather than try to change the stigma surrounding their sexuality. They do not want to face the conflicts with parents, peers, school, authorities, the social ostracism, and threats to their physical safety (Uribe & Harbeck, 1991). By keeping their sexual orientation hidden the adolescents are putting themselves at a high risk for dysfunction because of their unfulfilled developmental needs of identification with a peer group (Uribe & Harbeck, 1991). Peer group interactions and acceptance are crucial to the identity formation process, which influences the development of self-concept and autonomy (Morrow, 1993).

To conclude, remaining closeted, adolescent homosexuals may demonstrate internalized homophobia where the gay and lesbian adolescent feels shame for their true identity. As a result,

they may display self-defeating behaviours, tolerate prejudicial treatment, and believe that they deserve ill fortune (Bohan, 1996). They may often emphasize exaggerated heterosexual behaviour, they may tell "fag" jokes or ridicule others who they perceive as being homosexual, or they may become superachievers to divert attention away from their sexual orientation (Treadway & Yoakam, 1992). All of which has been described earlier in this paper.

Family

Because most parents are heterosexual, they cannot teach their homosexual adolescent what it is like to be part of the homosexual culture; they are often unable to be role models for their children as other heterosexual parents can be for their heterosexual children (Morrow, 1993; Shortall, 1998). Further, the homosexual adolescent often receives negative stereotypes from the family about homosexuality and homosexual people (Morrow, 1993).

Because the adolescent's homosexual identity may cut him or her off from their family, there is no family role for the homosexual adolescent. Often the previous role played by the adolescent is negated as the family applies their negative misconceptions to the adolescent (Strommen, 1993; Telljohann & Price, 1993). Conflict with family members is a major stressor upon the gay or lesbian adolescent. Many adolescents who disclose their homosexuality are rejected, mistreated, or become the focus of the "family's dysfunction" (Gonsiorek, 1993). Most adolescents who are targets of hate crimes can usually find support and understanding from their families. The family generally helps to provide the emotional and physical tools for managing and responding to the oppression. For gays and lesbians, however, this is often not the case (Friend, 1993). Unlike other minority adolescent groups, gay and lesbian adolescents generally

find little support from their families. Most often the family is the most difficult to reveal one's sexual orientation to; often the family is the last to know. Many parents refuse to accept or acknowledge a homosexual child's sexual orientation (O'Connor, 1994). In fact, approximately half of the gay and lesbian adolescents targeted for violence experience this at the hands of their family. It is common for boys to be evicted from their homes prematurely, while girls are more likely to remain in the home but experience verbal and physical abuse (Bohan, 1996; Morrow, 1993). In coming out to family members, the gay and lesbian adolescent risks being rejected, expelled from the home, withdrawal of emotional and financial support, and decreased chance of healthy development (Morrow, 1993). Homelessness, substance abuse, and educational deprivation may result (Morrow, 1993).

The risks of coming out to friends is much less than the risk of coming out to family. New friends can be made much easier than a new family. Coming out within the family is different for every adolescent. Preparation and planning are very important before taking that step and disclosing one's sexual orientation. The adolescents must first assess whether or not it is in their best interests. They must carefully weigh the hoped-for benefits against the possible negative effects (Morrow, 1993). Further, in families where communication is strained and difficult topics are avoided the parents may not be willing to talk about sexual orientation. Sometimes it may be necessary to keep the homosexual identity private (Bass & Kaufman, 1996; Morrow, 1993).

When families are unsupportive or rejecting it is even more important to build nurturing bonds with loyal loving friends (Bass & Kaufman, 1996). The family is often the first closet that gay and lesbian adolescents experience (Moses & Hawkins, 1982). If the homosexual

adolescents are sure that the parents will respond negatively, then waiting until they are of legal age becomes a rational decision. Adolescents who do disclose are risking a sharp curtailment of their rights and possibly some kind of direct action from the parents to have them cured, saved, or changed (Moses & Hawkins, 1982).

School

Homosexual adolescents often face hostile school environments. Verbal abuse, physical assault, and destruction of personal property are outward manifestations of the negative attitudes towards homosexuality held by their fellow students. School professionals often fail to recognize the existence of homosexual students and are reluctant to intervene on their behalf (Treadway & Yoakam, 1992). According to Unks (1994), schools may be the most homophobic institutions in North American society.

Overcoming the internalized homophobia and coming out are two interrelated challenges that gay and lesbian adolescents face because of the heterosexist stigma that exists in society (Garnets, Herek, & Levy, 1993). School sanctioned homophobia is wide spread and a major contributor to the medical and psychological problems of gay and lesbian adolescents (Uribe & Harbeck, 1991). For example, educators and administrators who reprimand racial slurs but ignore homosexual slurs are sending a message to all students that homophobia is more socially acceptable than racism. When schools fail to provide protection from harassment, or when issues related to sexual orientation are omitted from the curriculum, contributions are being made to the continuation of heterosexism and homophobia (Friend, 1993).

Educational settings are the learning environments where the social norms that define

what is and what is not acceptable behaviours are taught. For most adolescents an open school, accepting of diversity, is a far cry from the reality they experience.

Many schools are making positive changes towards becoming more accepting and supportive of gay and lesbian adolescents. In these schools, programs that teach tolerance have been introduced to help students learn to appreciate and respect diversity. Some teachers are becoming aware of anti-homosexual remarks and the fact that they are not acceptable and responding appropriately. Administrators are adopting policies that prohibit discrimination on the basis of sexual orientation. In these schools, support groups and gay/straight alliances are being formed and students are beginning to stand up for their gay and lesbian classmates. Some brave gay and lesbian students are even bringing their same-sex dates to school functions (Bass & Kaufman, 1996). The strength, courage, and bravery required to stand up for homosexual rights can affect homosexuals in all areas. In 1996 in Newfoundland, a high school student took his same-sex date to the senior prom (Shortall, 1998). At the same time, the city of Toronto held the first gay and lesbian graduation, "Pride Prom '97", which was officially sanctioned by a School Board (Shortall, 1998). While the Newfoundland Roman Catholic school was supportive of homosexual rights, other schools in the area were not. These schools had advised students that no such same-sex dating would be occurring at their schools (Shortall, 1998). By taking their same-sex dates to school events, gay and lesbian adolescents are confronting the oppression they feel. They are refusing to accept the victimization and are fighting back in whatever way they can. A great deal of strength and courage is required to confront this oppression.

Unfortunately only a small number of students are fortunate enough to attend schools that actively support and protect the rights of gay and lesbian students. Gay and lesbian adolescents

are expected to go to school everyday where they are expected to work and socialize with other students while they are being taunted, threatened, and physically harmed. Gay and lesbian adolescents are expected to remain focused on assignments and other school work while their teachers and administrators condone or ignore the harassment they experience. Some gay and lesbian adolescents are even blamed for provoking the harassment because of the way they act, talk, or dress, while the tormentors are not held responsible for their actions. They may experience school as an unsafe place (Bass & Kaufman, 1996). A homosexual adolescent attending high school in Newfoundland recalled an incident occurring one day when he wore violet pants to school:

Some guy had a problem with me. He yelled stuff like 'big stupid queer' and asked if I went to any fag rallies lately. I just stared him down and laughed at him. A few times walking home from school some students would be driving by and yell 'faggo' or something (Shortall 1998, p.86).

The main feeling expressed by gay and lesbian students with regards to their school setting is the sense of isolation they face. The feeling that they do not belong or fit in and that they are different from their classmates pervade the school experience for most gay and lesbian adolescents. Another Newfoundland high school student recalls attending a school dance:

I went to a school dance and this guy pulled a knife on me; he was stoned. He was calling me a fruit and a fag; I was petrified. My friends said that

I wasn't gay, so he would leave me alone. This guy said, 'No, he's a fag for sure, he acts that way - look at him- he's different'. And he spread this all around the community (Shortall, 1998 p. 84).

Many homosexual adolescents find school an isolating, stressful experience in which they are outsiders within their own community. Persuasive anti-homosexual attitudes among adolescents' peers reflect the many biases and stereotypes held by the larger community. The fear of peer rejection forces many gay and lesbian adolescents to hide their sexual identity. In this oppression they are told that their development is abnormal and their prospects for future personal and family fulfilment is slim (D'Augelli, 1991).

Many students cope with the harassment they experience within school by cutting class or by dropping out all together. In a desire to escape or avoid the painful experiences that occur while they are at school, this is a common and understandable reaction (Bass & Kaufman, 1996; Morrow, 1993). Dropping out may be the only way to keep safe, by removing oneself from the psychologically and physically dangerous environment (Friend, 1993). Having one friend that can be counted on can make the difference between school being bearable or unbearable. Seeking out open minded students in clubs or groups can help make school more enjoyable and rewarding (Bass & Kaufman, 1996).

In an attempt to cope with the harassment and loneliness some gay and lesbian students direct their energies into their school work. They may become superstudents which can improve their options for their future. However, this may also have a negative effect in which the gay and lesbian adolescent feels that they must perform perfectly in order to conceal what they believe to

be a deeper "flaw" in their personality. They may even wish to go unnoticed by peers, teachers, and parents so that no one will suspect their secret (Treadway & Yoakam, 1992). The pressure may be overwhelming for some adolescents who may seek a means to escape in drugs, alcohol, or suicide. In some cases the gay and lesbian students may have to change schools in order to cope with the harassment. They may be left with no other choice but to search for a more supportive environment away from their families.

Many schools within Canada and the United States are beginning to be held liable for their failure to provide a safe environment for all students. In these schools, it is considered that all students are entitled to an environment that is conducive to learning, including heterosexual and homosexual students. The individual students who are harassing the gay and lesbian students are also being held accountable for their actions within the court system (Bass & Kaufman, 1996). Students are recognizing that they have a right to a safe environment and some students are demanding that teachers and administrators provide this environment. Student activists, educators, parents, and other concerned adults are beginning to address the needs of these students (Bass & Kaufman, 1996). The examples of these few schools indicate that school does not have to continue to be a dreadful place for gay and lesbian students.

Junior high has been signalled out as the most painful period of a homosexual adolescent's life (Uribe & Harbeck, 1991). Junior high appears to be a place where overt discrimination in the form of verbal and physical harassment occur with regularity and has become an accepted part of life (Uribe & Harbeck, 1992). A large number of adolescents have heard of other students who have been victims of such harassments, "the insults and harassment become part of everyday life, nothing can really be done about them" (Norris 1992, p.106).

Obviously, hearing these stories underline that schools can make life more difficult for the gay and lesbian student, and it increases the fear and anxiety they experience.

Being afraid of anti-homosexual violence is a reality for gay and lesbian adolescents as higher rates of victimization are reported in adolescence compared to adulthood (Bohan, 1996). In Wisconsin, for instance, a male student, Jamie Nabozy, reported being kicked in the stomach (an injury which required surgery) while other boys urinated on him. In 1996 he sued his school on the grounds that the administration had not done enough to protect him. The jury agreed and the district settled for \$900,000.00 (Cloud, 1997). This case is an indicator that some homosexual adolescents are beginning to stand up to the anti-homosexual violence that is occurring within their schools and that some of these students are being successful.

Rural Areas

According to Moses & Hawkins (1982), rural areas are characterized by conservatism, traditionalism, religious fundamentalism, isolation of atypical or deviant members, resistance to change, high visibility, lack of confidentiality, and a tendency to view problems as personal rather than system based. In these areas most rural heterosexuals view homosexuals as a contradiction to everything they value; family, church, and school. As a result, homosexual people are rarely accepted within rural areas. Heterosexual family, friends, church members, and neighbours are unlikely to rally in support of homosexual rights. Instead, they may be actively hostile.

The anticipation of this hostility may cause many rural homosexuals to conceal their sexual identity. Because they do not fit the norm they are afraid of what might happen to them.

As Moses & Hawkins (1982) state, "small town life imposes conformity" (p.174). Intense isolation, lack of communication with others, and feelings of hopelessness combine with other social limitations to create a difficult situation for the rural gay or lesbian adolescent.

The lack of support for lifestyle diversity renders invisible deviations from the norm. Media events covering homosexuality may be absent and if they are present they may represent homosexuality in a negative way. Homosexual people who are attempting to be visible within the rural community often leave because of disappointment or are driven out by fear of anti-homosexual activities. This contributes to the sense of isolation, creates a poor self-image, and adds to the lack of awareness about alternative lifestyles and of the positive aspects of being homosexual (Moses & Hawkins, 1982).

People who come out and remain living in rural areas are also isolated from other homosexuals who are closeted. Homosexual people do not have places to meet and are in constant fear of being seen with known homosexuals. For the closeted homosexuals this hiding and constant fear creates much anxiety and often leads to depression. Rural homosexuals may lack appropriate social skills, more so than urban homosexuals, because they are further isolated and lack visible role models whom they can emulate.

Any resources that are available are not usually taken advantage of because of the intense fear of being discovered (Moses & Hawkins, 1982). As a result, adolescent homosexuals may suffer from a poorer self-image than those from urban areas. Rural homosexuals may be exposed only to sensationalism in the media or to the traditional opinions from religious, medical, legal, and psychiatric fields which often result in negative or incorrect views of what it means to be homosexual. They are deprived of a sense of homosexual culture, pride, and community. Rural

homosexuals may be afraid to support or attend any homosexual social or cultural events out of fear of being identified. As a result then, they become out of touch with the growing rights movement, the larger national homosexual community, and the increasing amount of literature being made available (Moses & Hawkins, 1982).

The negative attitudes towards gay and lesbian people are consistently correlated with traditional views of gender and family roles (Herek, 1993). People in rural areas, in general, hold traditional views about the institution of family and on gender roles. Thus, it only follows that people in rural areas would hold more negative attitudes than those living in areas that are not as traditional.

The constant fear of discovery that homosexuals face while living in rural areas often causes them to avoid all social situations. Contact with other homosexuals and with heterosexuals is frightening. Therefore, they often further isolate themselves to avoid the stressful situations created by the continuous strain and anxiety (Moses & Hawkins, 1982). People in rural areas generally do not support the diversity in lifestyle that those in urban areas do. Their bookstores and libraries are less likely to carry information or controversial materials about homosexuals (Moses & Hawkins, 1982). In essence, rural areas generally have little or no services for gay and lesbian adolescents (Anderson, 1994).

In urban areas where coming out has begun to alter its meaning to "coming in", gay and lesbian adolescents will probably find life somewhat easier as more resources and support exist. For rural gay or lesbian adolescents there seems little opportunity to experience "coming in" to a welcoming community. Rather, they are ostracized and isolated from the majority heterosexual population.

Conclusion

Adolescence is a time of heightened awareness of sexuality and gay and lesbian adolescents are apt to become frustrated by the number of heterosexual outlets that are available for others compared to what is available for them. Continuously living in secrecy produces feelings of rage and sadness that are difficult to resolve. Low self-esteem, academic inhibition, substance abuse, social withdrawal, depression, and suicidal ideation are common.

Without the socialization that lesbian and gay networks provide, adolescents are left on their own to construct a social identity. The transition into adulthood from adolescence can be severely compromised for lesbian and gay adolescents. At a time when accurate information and supportive experiences are critical to development, gay and lesbian adolescents find few, if any, affirming experiences in their educational settings.

Tremendous amounts of energy and psychological cost is spent in staying hidden, and may be too much for some gay and lesbian closeted adolescents. In societies where the assumption is that all adolescents are heterosexual, it is easier to remain hidden than to face the ridicule and rejection from family and peers. By hiding, however, they are learning to devalue themselves.

Whether homosexual adolescents come out or remain closeted, they are still at a high risk of suicide. Many of these adolescents face isolation, rejection, depression, and high stress and anxiety levels. For many, substance abuse becomes their means of escape from the life they are living. Suicide, or attempted suicide, may also become an option as a way out or also as a means of reaching out to someone to whom they can confide.

Today's adolescents live a paradox. The greater visibility of the gay and lesbian

community and the issues that they face have been shown to be a catalyst in the process of forming their own identity. However, the adolescents are then left to deal with the consequences of early identification without the same level of support that is provided for older lesbian and gay people. This coming out process needs to be understood and recorded in detail so that professionals can appreciate the issues faced by homosexual adolescents.

The AIDS epidemic has further stigmatized homosexuality. The fear of being seen as a potential disease carrier may make young gays and lesbians delay their identity formation or make them less willing to disclose their homosexual identity. Supportive family and friends help to facilitate the formation of homosexual identity. Ignoring or avoiding discussion of adolescent homosexuality indicates society's fear in facing reality. If in fact sexual identity is formed within the adolescent years, professionals must be willing to work with gay and lesbian adolescents in terms of providing support and assistance throughout their development.

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PAPER 3

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**Issues and strategies for school counsellors
working with gay and lesbian adolescents**

Introduction

The issues faced by homosexual students within the school have not been adequately addressed for a number of reasons. School board policies, religious beliefs, and the attitudes of school administrators, staff, and parents all contribute to this neglect. As shown in paper two, North Americans have also generally ignored these issues. North Americans' assumptions about adolescent development do not appear to include sexual expression. In fact, youthful sexual expression has been considered a societal problem requiring a response from parents, schools, clergy, physicians, mental health professionals, and the court system (Gonsiorek, 1993). While adolescence is a time of exploration and self-identification, apparently any expression of confusion or same-sex attraction can be grounds for intensive parental and peer hostility (Uribe & Harbeck, 1991).

In general, researchers have been concentrating on finding the cause of homosexuality or what makes a person homosexual, instead of concentrating on the complexities associated with the development of homosexuality. This issue was addressed in paper one which indicates that we should be more concerned with the "treatment" of homosexuals in our culture and the impact that social norms have upon developing homosexual adolescents. As noted earlier, "treatment" should not be aimed at converting homosexuals, but instead it should be aimed at helping the homosexual adolescent to develop into a mentally healthy adult.

School and home are the major institutions that influence an adolescent's development.

The impact of mainstream attitudes upon homosexual adolescents within these two environments was discussed in paper two. Homosexual adolescents, and those still unsure of their sexual orientation, are in need of guidance and support. According to Telljohann & Price (1992) coping with the extreme loneliness and isolation, homosexual adolescents have two choices: casual sex with a stranger or help from a concerned professional. Within the school setting the guidance counsellor can play an important role in the healthy development of all adolescents, particularly those who are in need. Unfortunately, the school is a place where homosexual adolescents face rejection (Telljohann & Price, 1993). The fit between self-labelling and sexual behaviour is often highly variable for adolescents. Adolescence is a time of inconsistency in sexual behaviour, orientation, and self-labelling as one's identity is in the process of forming (Friend, 1993). The traditional areas of support for heterosexual students are often not available to most homosexual adolescents (Telljohann & Price, 1993).

The growing visibility of homosexual people, their issues in today's society, and the now familiar terminology has provided a great deal of support and labels for youth. However, a renewed wave of anti-homosexual attitudes have developed with the AIDS crises requiring more services for homosexual adolescents. Psychological and social services, however, are seldom available for gay and lesbian youth as they attempt to establish a sense of inner and outer identity. The majority of established activities and institutions are for adults only (Savin-Williams, 1990).

As well, the growing visibility of homosexuals has resulted in more adolescents declaring their homosexual identities earlier than ever before (Bohan, 1996). All indicators suggest that the earlier one discloses his or her sexual orientation the more external negative reactions he or she will experience (D'Augelli, 1996). This will undoubtedly require more support and

protection from professionals, particularly those in the school setting where adolescents spend most of their day. Clearly, counsellors will be required to pay more attention to the needs of these adolescents. As well, since the homosexual adolescent who discloses his or her sexual orientation at such an early age will likely be faced with family concerns and problems, counsellors may have to be prepared to work with the family, who may also require information and support (Rust, 1996).

This paper will outline many of the issues gay and lesbian adolescents may bring to the counselling session and the issues counsellors themselves must face in order to be effective helpers to gay and lesbian adolescents. Since the majority of people in Newfoundland and Labrador live in rural communities, this paper will also attempt to provide resources for school counsellors in these areas.

In addition, this paper will also discuss effective ways to develop strategies to work with gay and lesbian adolescents and the general school population. This is a key issue since counsellors and other school personnel need to understand the individual reasons a person may hold homophobic attitudes. Many adolescents may not come forward and disclose their sexual orientation to the school counsellor. Thus, much of the counsellor's work will be aimed at the larger school population in hopes of reaching closeted homosexual adolescents, those who are still uncertain about their sexual orientation, and homophobic individuals. In order to reduce the effects of homophobia within the school, the counsellor may also need to educate other students and professionals on homosexuality and the issues that homosexual adolescents face.

This paper will focus on gay and lesbian adolescents, rather than try to address the needs of people of all sexual orientations in one paper. Appendices listing various resources that

school counsellors and other professionals may find useful when working with gay and lesbian adolescents and their families will also be included.

Counsellors

Because of the difficulties in developing a healthy identity in a homophobic world, gay and lesbian adolescents are an "at risk" population. They are an oppressed group discriminated against by universal social institutions such as the family, social culture, and educational settings (Morrow, 1993). For the student, the conflicts in dealing with a homosexual identity may be expressed through various behavioural problems such as acting out in school, rebellion against authority, substance abuse, prostitution, depression, isolation, confusion, alienation, and suicide (Savin-Williams, 1990). Students dealing with these conflicts are often reluctant to talk to school counsellors because of their fear of rejection. At the same time, a counsellor may be reluctant to talk to the student, whom they believe may be homosexual and dealing with these conflicts, because of fear of alienating the student (Treadway & Yoakam, 1992).

Gay and lesbian adolescents often think that they are alone. This can be frightening, a situation which often lead to tragic consequences, as outlined earlier in papers one and two. The school counsellor can be an effective resource for these students. However, as Treadway and Yoakam (1992) reported, secondary school counsellors have underestimated the number of homosexual students in their schools. In addition, they have revealed a lack of interest in the concerns of these students. Similarly, a study conducted by Sears (1991) also found that homosexual adolescents perceived adults in the school system as ill-informed and unconcerned with the issues they are facing. Counsellors themselves believe that more work is required

within the school and within their own profession in helping them to work with gay and lesbian adolescents (Treadway & Yoakam, 1992).

In Newfoundland most gay and lesbian adolescents refused to speak to their school counsellors about their sexual orientation (Shortall, 1998). Many homosexual adolescents reported that they believed their counsellors were ill-informed about the issues affecting them and they were either unconcerned or uncomfortable about discussing the issue of homosexuality (Shortall, 1998). In order to help make school counsellors more approachable for homosexual adolescents, counsellors need to be more informed and aware of the issues affecting homosexual adolescents. This knowledge may allow them to feel more comfortable in discussing those issues. Counsellors must feel comfortable with the issue of homosexuality and one's own sexuality (Mallon, 1994) if they hope to be effective in working with this issue.

A study conducted by Chan (1996) found that school counsellors were biased against gay and lesbian clients and unqualified to meet the needs of their clients. The solution may be to include gay and lesbian issues and the effects of living in a homophobic society in counsellor training programs (Chan, 1996; Unks, 1994). Before working with homosexual adolescents counsellors must be aware of any heterosexist biases and assumptions they may hold. They should be familiar with current and accurate information about the gay and lesbian community and their concerns (Garnets, Herek, and Levy, 1993). In addition, Chan (1996) recommended that a list of resources would be beneficial for those working with homosexual adolescents, their families, and the issues they both face. The appendices of this paper includes a listing of various types of resources that may be beneficial.

Likewise, school counsellors need to be perceived as being gay and lesbian friendly by

the homosexual population within their school if they hope to work effectively with this group of adolescents (Rust, 1996). Gay and lesbian friendly posters and pamphlets displayed in the counsellor's office will go a long way towards helping the students feel as though they have a place to seek support (Shortall, 1998). Bass and Kaufman (1996) describe various ways that counsellors can show they are gay and lesbian friendly- use the words gay and lesbian in casual conversation without it being a big deal, keep one's language free of heterosexual bias, wear a button, pink triangle, or rainbow flag as a sign of support, display homosexual positive materials, always be prepared for inquires, and if one is homosexual, talk openly about one's orientation. As well, the counsellor must be supportive of the homosexual adolescent and be open to developing individualized treatment plans using a variety of approaches designed to meet the needs of each homosexual adolescent (Mallon, 1994).

Working with Homosexual Adolescents

Disclosing one's sexual orientation involves extensive psychological and social changes. While these changes are taking place the adolescent may not be able to rely on their usual sources of support. This can be a period of psychological vulnerability during which the adolescent requires a great deal of guidance and support (Rust, 1996). It is important for school counsellors to be aware and understand the process of coming out and the issues that may arise for the homosexual adolescent (Rust, 1996), as described in paper two. The models presented in paper two, which describe the process of coming out are not necessarily followed by everyone. In fact, given our present day culture, it would be unusual for an adolescent to reach their homosexual identity in such an orderly way (D'Augelli, 1996). Nonetheless, it is still important for

counsellors to be aware of these models so that they will be better able to understand the issues facing gay and lesbian adolescents. Being aware of the stages, at least in theory, can provide the counsellor with insight into what the adolescent may be experiencing. The models can offer a rough guideline for counsellors to follow while working with a gay or lesbian adolescent (Rust, 1996).

As more adolescents are declaring their sexual orientation at earlier ages there has been an increasing need for programs and services that empower the adolescent to develop and take charge of his or her destiny (Greeley, 1994). Counsellors can help gay and lesbian adolescents who have decided that they will disclose their sexual orientation by assisting them to predict the responses of others (Rust, 1996). Helping the adolescent to make healthy choices about when and to whom they will disclose their homosexuality can have profound effects upon identity development at such a vulnerable time in their lives (Rust, 1996). Adolescents, at this point, may not yet possess the skills and self-confidence to defend themselves against abusive reactions. Therefore, counsellors can be a useful support for the gay or lesbian adolescent when preparing to disclose his or her sexual orientation and during the rejection that may follow that disclosure.

D'Augelli (1996) describes various mental health issues faced by homosexual adolescents: stress associated with the management of a homosexual identity, disruptions in peer relationships, conflicts with family members, consequences of disclosure, emotional reactions to relationships, isolation from other homosexual adolescents, distress caused by discrimination, harassment, and violence, and anxieties related to sexual health (HIV/AIDS). Often, however, these issues are over-looked and the homosexuality becomes the focus of the counselling sessions (Gonsiorek, 1993). Thus, school counsellors are likely to work with homosexual

adolescents only when they find themselves in a crisis situation with no place to turn (D'Augelli, 1996). This is when they require help dealing with the issues that are affecting their lives at the present. The focus of intervention should be towards the obstacles that many impede the adolescent's optimal development (Jackson & Sullivan, 1994). Counselling interventions should be based on how the adolescent feels about his or her homosexual identity, rather than on trying to eliminate the homosexuality (Mallon, 1994).

Managing the internalized homophobia and the stigma that gay and lesbian adolescents experience is crucial to their social and emotional development (Anderson, 1994). It is important that school personnel understand the importance these factors play in healthy adolescent homosexual development. Adolescents can make one of three broad choices in dealing with their feelings - try to change them, continue to hide them, or accept them (Anderson, 1994). Each choice brings with it its own series of issues and problems, all of which have been outlined in the two previous papers. The counsellor can help the homosexual adolescent who is dealing with these issues to develop a realistic approach to functioning in the heterosexual world. Remaining reality focused can help the gay or lesbian adolescent work on his or her current problems and the potential solutions (Moses & Hawkins, 1982).

Various programs have been developed to assist homosexual adolescents in dealing with these issues in positive ways. One such program, Sexual Orientation and Youth Project (SOYP) was developed in Toronto. This program was established in 1983 to provide needed social services to gay and lesbian youth (D'Augelli, 1996). Other programs developed in the United States, such as Project 10 in Los Angeles and Harvey Milk School in New York city, have also provided essential social and emotional support for homosexual adolescents. The adolescents

attending these programs have expressed relief that the isolation and loneliness is over (Mirken, 1993). They have experienced academic success, interpersonal connections, higher self-esteem, and social acceptance (Harbeck, 1991).

Many homosexual adolescents coping with the feelings surrounding their sexual orientation may experience extreme anxiety. Useful tools the counsellor may employ in this case are relaxation strategies and cognitive restructuring (Moses & Hawkins, 1982). Often the anxiety experienced is triggered by irrational thoughts. Therefore, teaching the adolescent to look at a situation more rationally, or using self-talk methods to restructure their perceptions of a situation, can be effective in reducing anxiety (Moses & Hawkins, 1982).

Supports

In attempting to establish supports for gay and lesbian adolescents, Bass and Kaufman (1996) describe different types of youth groups that could be considered when developing programs to implement within a school or community. Youth groups can be an integral part of the services offered to homosexual adolescents. They are generally seen as excellent vehicles for providing adolescents with the opportunity to develop peer relations, expand social skills, and reduce loneliness and isolation (Greeley, 1994; Bass & Kaufman, 1996). Support groups allow gay and lesbian adolescents the opportunity to talk about what is going on in their lives or about issues that are affecting them at the present time (Bass & Kaufman, 1996). Many school support groups are opening across North America which provide a safe place where homosexual adolescents can learn in a positive environment. These groups can help provide the adolescents with a sense of community and increase their self-esteem (O'Connor, 1994). Political groups

focus on educating all people about homosexual issues and working for positive change. The Lesbian, Gay, Bisexual Questioning Youth Group (LGBQ) in Newfoundland is attempting to improve the status of all homosexual and bisexual people within the province (Shortall, 1998). Other groups may be gay/straight alliance groups where straight supporters join with homosexuals to work for justice of all people, but particularly for gays and lesbians (Bass & Kaufman, 1996). For example, the Youth for Social Justice group in St. John's, has homosexual and heterosexual members who support the struggle of justice for all people. Appendix C, at the end of this paper, lists various types of groups and how they may be contacted.

Participating in a group may not be appropriate or successful for all adolescents thus, other forms of support should also be utilized if possible. Talking to those who have identified themselves as gay and lesbian friendly can be an effective means of support (Bass & Kaufman, 1996). School counsellors, teachers, coaches, and others within the community may be able to direct the homosexual adolescent to other sources of support. Counsellors can take a leading role and become an advocate for gay and lesbian adolescents within their school (Bass & Kaufman, 1996). They can make themselves aware of the community resources and how those outside the community may be contacted. Encouraging homosexual adolescents to volunteer in various community organizations can also be a good way for them to make contact with caring people. It can also be a way to help them feel good about themselves and thus, build their self-esteem (Bass & Kaufman, 1996).

The importance of role models and the issues surrounding the lack of such models was discussed in paper two. Role models are required for healthy socialization processes to develop, as they may counteract the prevalent negative stereotypes about homosexual people. Learning

from competent gay and lesbian adults can improve an adolescent's self-concept (Gonsiorek, 1993). The homosexual adolescent can observe how successful adults develop productive and ethical lifestyles, resolve problems of identity disclosure, obtain support, manage careers, and build relationships (Gonsiorek, 1993). A role model can be effective in helping a homosexual adolescent develop a sense of who he or she is and what their future may hold (Bass & Kaufman, 1996). The adolescent can see what a real homosexual person is like and their daily lifestyle, instead of a model embellished for media purposes. However, exposing gay and lesbian adolescents to positive role models from within the homosexual community continues to be a controversial issue (Rotheram-Borus & Fernandez, 1995). The belief that exposing adolescents to homosexuals or homosexual materials will predispose them to becoming homosexual is still held by many people in mainstream society. To avoid this issue the role model could be a well known athlete, a performer, poet, leader, or even a fictional character (Bass & Kaufman, 1996). Reading materials can be also useful in helping homosexual adolescents find role models that are appropriate. Included in appendix A is a reading list that may be effective in assisting homosexual adolescents to find such role models.

Living in a large metropolitan area allows homosexual adolescents access to such resources as telephone hotlines where they can seek support and meet others like themselves anonymously. Services such as newsletters and agencies may be accessible, however, the majority of these are directed towards the adult homosexual community. Rural areas, as discussed in paper two, lack the necessary resources resulting in profound isolation as the homosexual adolescents internalize the negative views of society (D'Augelli, 1996). However, as more people have access to the internet the boundaries keeping gay and lesbian adolescents

isolated in rural areas may be breaking down. Bass and Kaufman (1996) describe one such experience. "I used to type the word 'gay' and a whole new world opened up for me" (p. 38). New worlds can be opened for these adolescents where they can chat with other homosexual adolescents, expand their knowledge, and reduce their feelings of isolation and loneliness.

Overall, a counsellor working with a gay or lesbian adolescent must remember to be supportive of the adolescent's autonomy and need for empowerment. However, the counsellor should not get caught up in parenting the adolescent. Davies (1996) provides some suggestions for counsellors working with gay and lesbian adolescents. The counsellor should be open and up front about the limits of confidentiality, respect the adolescents feelings, experiences, and integrity, and offer space and time to help the adolescent explore and reflect upon their feelings and experiences.

Working with the General School Population

Adolescents who self-identify as gay or lesbian are very few within most school populations. The neediest and the largest group of homosexual adolescents, however, may be those who are closeted, or those still unsure about their sexual orientation. In this case, any resources that offer anonymity may be an option in trying to reach this particular group of adolescents (Rust, 1996). Specialized programs targeted towards the general population that offer open lectures on sexuality may be a way to reach those students who are still unsure of their sexual orientation (Rust, 1996).

The most effective strategy for reducing the potential for mental health problems in homosexual adolescents emphasizes change in others' attitudes and reactions (Rust, 1996).

Shortall's (1998) research suggests that many adolescents, both heterosexual and homosexual, are involved in homophobic violence, either as the victims or as the perpetrators. Every adolescent is affected by this violence and as professionals in the school system, understanding this can help create services and programs to reduce the violence. Until heterosexism is identified as a prejudice similar to racism and sexism, homophobia will continue to permeate the school system and closeted adolescents will continue to live in fear of being discovered (Shortall, 1998).

Understanding homophobic attitudes.

The prejudice and discriminatory attitudes held by North Americans are believed to serve a particular function for each individual that allows him or her to cope with their own life. Understanding these functions is the key to developing effective attitude change strategies (Bohan, 1996). However, since heterosexual people may have different motivating factors for their heterosexism and homophobia, a variety of strategies will be required to reduce any particular individual's prejudice (Herek, 1996). Authors Bohan (1996) and Herek (1993;1996) describe anti-homosexual attitudes as providing value-expressive, social-expressive, and ego-defensive functions for the perpetrators.

Negative attitudes serve a value-expressive function whereby individuals reaffirm who they are by expressing personal values that are important to them (Bohan, 1996). For example, a fundamentalist Christian may express hostile attitudes towards homosexual people as a way of affirming his or her own Christianity. Opposition to homosexuality is integral to being a 'good' Christian and being a good Christian is central to feeling good about oneself. Thus, the person commits the homophobic acts to feel good about himself or herself.

Anti-homosexual attitudes may also serve a social-expressive function by helping individuals win approval from important others in their lives. As a result, self-esteem is improved by being accepted and liked within their group of peers, family, or community (Bohan, 1996). For example, adolescents may engage in homosexual bashing because it is the norm for their peer group. This act increases their amount of acceptance within the group and thus, increases their self-esteem.

Prejudice against homosexuals may also serve an ego-defensive function for many of the perpetrators. Holding negative attitudes about homosexuals and expressing those attitudes through violent acts may reduce the amount of anxiety the perpetrator feels from any unconscious psychological conflicts associated with his or her own sexuality (Herek, 1996). For example, adolescents may participate in homosexual bashing because they are attempting to deny insecurities about their own sexuality. It helps them to avoid recognition of unacceptable characteristics within themselves and proves that they are "normal" in one's sexual orientation (Bohan, 1996).

For many people, their own anti-homosexual violence defines who they are by identifying homosexual people as a symbol of what they are not. Males often use the fear of homosexuality, and expressions of hatred towards homosexuals, as proof of their masculinity and their place in the male peer group (Bohan, 1996). Greater gender role flexibility for all people could result in a reduction of homophobia (Bass & Kaufman, 1996). Working with adolescents to help them see that this flexibility is acceptable could be an effective means of reducing homophobia as it expands the boundaries of acceptable behaviour.

Counsellors and other helping professionals within the school system must tailor attitude-

change strategies to address the particular functions they may be serving for the perpetrator (Bohan, 1996). As long as homophobia serves a purpose for the homophobic person it will not be given up (Herek, 1993). Change has to occur at both the societal and individual levels. However, it is unlikely that change will occur unless people see an alternative way of reacting. This may occur by making competing values salient and by providing direct social support for those whose homophobia is being challenged (Herek, 1993). New norms must be created for these people so that they have an alternative way of acting and thinking. This change can not occur overnight but must be incremental in order for it to be accepted and effective (Herek, 1993).

Possibly the most difficult attitudes to change are those associated with ego-defensive functions because they are connected to one's identity (Bohan, 1996). Both Bohan (1996) and Herek (1993) agree that a homophobic person who holds beliefs grounded in ego-defensive functions will unlikely come in contact with a homosexual person. If he or she does come into contact with a homosexual person the amount of anxiety experienced may increase, he or she may become more defensive, incur disapproval from their peers, and his or her own sexuality may be called into question (Bohan, 1996). Broad cultural change is required where the rigid boundaries surrounding gender need to be dissolved and the link between gender and sexual orientation broken. A range of experiences need to be recognized as normal so that the homosexual adolescent does not devalue or demean his or her experiences because of fear (Bohan, 1996). Homophobia allows heterosexuals to be intolerant and violent towards those they may otherwise be close to as they may actively hurt and alienate their peers and family members (Bohan, 1996). Schools that do not discourage discrimination and prejudice provide poor lessons in citizenship for its students (Friend, 1993).

Assertiveness training and social skills training may be exceptionally useful techniques to use with all students regardless of sexual orientation (Moses & Hawkins, 1982). Students may learn how to stand up for their rights, be themselves, and voice their opinions without fear of ostracism. Improving these skills will help them develop into mentally healthy adults. In addition, incorporating lessons on tolerance and acceptance of diversity into the curriculum and as part of specialized programs will help all student to be more open minded and less discriminatory.

Working with Families

Healthy adolescent development depends upon family recognition and acceptance, both of which are directly related to the development of a positive self-image (Morrow, 1993). Many of the problems adolescent homosexuals experience are caused by a lack of family support, a critical component to normal adolescent development (D'Augelli, 1996). Disclosing one's sexual orientation to parents and family members is probably the most difficult task that a homosexual person will face (Bohan, 1996). Some professionals would recommend that homosexual adolescents should wait until later in life before taking this step, while others view early disclosure as being healthy for one's psychological adjustment (Bohan, 1996). The possible consequences of disclosing one's sexual orientation to one's family was discussed in paper two.

The reaction or response to a homosexual adolescent's disclosure is difficult to predict. Some families respond with support, while others may be reluctant to accept the adolescent's homosexual identity (Rhoads, 1994). Whatever the reaction, the counsellor must be prepared to assist the adolescent in helping him or her to decide if this is in fact the right decision, to weigh

the pros and cons, and to predict, as best as possible, what the outcome may be (Rhoads, 1994). Given time and space most family members improve their methods of coping with the adolescent's homosexuality (Morrow, 1993).

The counsellor's role during this time is to be an advocate for the adolescent and support him or her in the decision-making process and potential family conflicts (Morrow, 1993). Parents may need support from counsellors in working through their feelings surrounding the stigma, blame, and loss they may be experiencing because of their child's homosexuality (Davies, 1996). The counsellor may wish to see the parents alone or with the homosexual adolescent to provide the necessary resources, accurate information, and to facilitate open positive relationships (Morrow, 1993). As a professional, the counsellor's opinions and attitudes may carry a great deal of weight with the family and this should be considered when discussing the issues affecting all concerned (Moses & Hawkins, 1982).

Davies (1996) makes a number of suggestions for counsellors working with families of homosexual adolescents: the counsellor must ensure that the family supports the adolescent by keeping the sexual orientation confidential. With the adolescent's permission, the counsellor can act as an advocate by helping the family understand homosexuality, usually by providing them with information and materials. The counsellor can help the family work through their own homophobia, if any, gender stereotyping, and expectations, making sure they realize that homosexuality is not a reflection of their parenting skills. Sexuality is not a result of something the parents did or did not do. The family requires accurate, non-technical information along with access to parent support groups, such as Parents and Friends of Lesbians and Gays (PFLAG). This type of group allows others to learn more about gay and lesbian youth and to understand

their unique difficulties (O'Connor, 1994). Access to their web site, chapters in Canada, and further description of the organization are provided in appendices B and C.

Working with Other Professionals

The staff within the school environment can help determine the atmosphere regarding homophobic biases. They have the power to reduce the derogatory remarks, anti-homosexual acts, and violence within the school (Anderson, 1994). However, many school professionals are afraid to take a stand on homosexual issues because of fear of administration and parent disapproval. As well, there is a common concern among school professionals and other adults that if they talk about homosexuality they may be encouraging adolescents to become homosexual (Friend, 1993). Disinhibiting professionals from speaking out against homophobia is a crucial first step in breaking the cycle of invisibility for gay and lesbian adolescents (Rust, 1996)

School staff and policies that trivialize adolescents homoerotic feelings or view these feelings as a phase of normal development that will eventually pass are likely to do damage to the homosexual adolescent's self-concept (Anderson, 1994). Thus, school policies addressing intolerance and harassment must include sexual orientation. Teachers and other staff need to be trained in issues related to sexual orientation and they need to be aware of the special role that they play in creating a social climate where anti-homosexual views are unacceptable (Rust, 1996).

School counsellors can act as consultants for teachers, principals, and other administrators in helping to ensure the school environment can become a safer, more affirming

place where all young people can develop and integrate their sexuality without fear of harm (Davies, 1996). To do this, counsellors must be knowledgeable about the issues affecting homosexual adolescents and any resources or contact people that may be of assistance. Counsellors can also offer workshops and training for colleagues to provide opportunities to discuss and challenge the myths and stereotypes about homosexuality which would help develop a more homosexual friendly environment where heterosexism is reduced (Davies, 1996; Gonsiorek, 1993).

Having contacts within the homosexual community or other resources can be invaluable. Refusing to tolerate name-calling, homosexual bashing, and other manifestations of homophobia and by recognizing gay and lesbian adolescents as an "at risk" population teachers, administrators, and others working with adolescents can break the silence and overcome the fear and ignorance experienced within the school system (O'Connor, 1994).

Conclusion

According to Rust (1996) the prevention of mental health problems in gay and lesbian adolescents calls for four stages- development of services, creation of a safe environment, curriculum integration, and policy review. Counsellors can play a large role in this by helping to provide services, a safe environment, and by educating administration and other personnel who may be in a position to encourage curriculum integration and policy change.

In February 1997 Calgary's Board of Education approved an "Action Plan on Gay/Lesbian/Bisexual Youth and Youth Safety". This plan requires all counsellor's to provide comprehensive information to students regarding sexual orientation (Shortall, 1998). This

appears to be a step in the right direction for schools to become the learning environments they should be. All students can be provided with access to accurate information about sexual orientation which will hopefully increase everyone's knowledge and decrease homophobia. This may be too much to hope for so quickly, as change is slow and rarely without opposition, but it is well worth working towards.

General competence, specific knowledge of gay and lesbian issues, sensitivity and freedom from biases are qualities desired in counsellors or anyone working with gay and lesbian adolescents (Gonsiorek, 1993). Adolescents struggling with forming their sexual identity benefit from accurate and complete information about sexuality. It is crucial for counsellors to have an understanding of the process of forming a sexual identity and to be knowledgeable about resources in the area that may be drawn upon for help. In the case where there are no outside resources available, the counsellor can make use of resources via the internet. These resources may be more appropriate for isolated adolescents, as they can remain anonymous. In addition, it would be beneficial for counsellors to possess some reading materials for both the homosexual adolescent and his or her family.

Helping adolescents to grow into healthy, well-adjusted adults is the primary goal of people working with this age group. It is important to be aware and sensitive to the unique environmental stressors which impact on gay and lesbian adolescents. Counsellors and other professionals should take advantage of any special training focused on the issues common to many gay and lesbian adolescents. If no training is available it is left to the counsellors to broaden their awareness about issues effecting homosexual adolescents with whom they may find as their clients.

APPENDIX A

Reading materials helpful to gay and lesbian adolescents, their parents, teachers, and counsellors.

homosexual adolescent

Bauer, Marion (1995). Am I blue? Coming out from the silence. New York: HarperTrophy.

Bass, Ellen, & Kaufman, Kate (1996). Free your mind: The book for gay, lesbian, and bisexual youth - and their allies. New York: Harpers Collins Publishers.

Brown, Rita Mae (1983). Rubyfruit jungle. New York: Bantam.

Chambers, Aidan (1995). Dance on my grave. New York: HarperTrophy.

Donovan, Stacey (1994). Dive. New York: Dutton.

Fox, John (1994). The boys on the rock. New York: St. Martin's Press.

Futcher, Jane (1995). Crush. Boston, Ma.: Alyson Publications.

Fricke, Aaron (1995). Reflections of a rock lobster: A story of growing up gay. Boston, Ma.: Alyson Publications.

Garden, Nancy (1992). Annie on my mind. New York: Farrar, Straus and Giroux.

Grima, T. (Ed.) (1994). Not the only one: Lesbian and gay fiction for teens. Boston, Ma.: Alyson Publications.

Jennings, Kevin (1994). Becoming visible: A reading in gay and lesbian history for high school and college students. Boston, Ma.: Alyson Publications.

Johnson, Anthony Godby (1993). A rock and a hard place: One boy's triumphant story. New York: Crown.

Mullins, Hilary (1993). The cat came back. Tallahassee: Naiad.

Pollack, Rachel, & Schwartz, Cheryl (1995). The journey out: A guide for and about lesbian, gay, and bisexual teens. New York: Puffin Books.

Rench, J. (1990). Understanding sexual identity: A book for gay teens and their friends. Minneapolis: Lerner Publications.

Scopettone, Sandra (1991). Happy endings are all alike. Boston, Ma.: Alyson Publications.

family and friends

My child is gay! Now what do I do? Available from: Web address

<http://www.pe.net/~bidstrup/parents.htm>.

Bass, Ellen, and Kaufman, Kate (1996). Free your mind. The book for gay, lesbian, and bisexual youth- and their allies. New York: Harper Collins Publications.

Kerr, M.E. (1994). Deliver us from Evie. New York: HarperTrophy.

Lovell, A. (1995). When your child comes out. London: Sheldon Press.

Rench, J. (1990). Understanding sexual identity: A book for gay teens and their friends. Minneapolis: Lerner Publications.

Scopettone, Sandra (1991). Trying hard to hear you. Boston, Ma.: Alyson Publications.

counsellors

Davies, Dominic, and Neal, Charles, (Eds.) (1996). Pink therapy. A guide for counsellors and therapists working with lesbian, gay, and bisexual clients. Buckingham: Open University Press.

Woodman, N.J.(Ed.) (1992). Lesbian and gay lifestyles-A guide for counseling and education. New York: Irvington Publishers.

APPENDIX B

Internet sites available to gay and lesbian youth, their parents, teachers, and counsellors.

www.pflag.org

www.100acre.com/~buznog/Counsel.htm

www.gaycanada.com

www.gaycanada.com/categories/youth.htm

www.critpath.org/pflag-talk

www.geocities.com/WestHollywood/4291

APPENDIX C

Organizations for gay and lesbian youth and their families and friends.

The International Lesbian and gay Youth Organization (IGLYO: America)

Washington, DC, 202-362-9624

Member organization associations are located throughout Europe. Annual conferences held the first week in August in different European cities to give teens and young adults an opportunity to meet other gay youth from around the world.

Parents, families and Friends of Lesbian and Gays (PFLAG)

Washington, DC, 202-995-8585

Founded in 1981, this grassroots support, education, and advocacy organization represents more than 27,000 families. Members promote legislation and public policies through local, regional, national, and international coalitions and conferences, and discussion groups. Quarterly newsletters, publications, fact sheets, reading lists, audiotapes, conferences, and seminars are available. Canadian chapters are available from the web site listed in Appendix B.

Newfoundland and Labrador Organizations.

**Lesbian, Bisexual, Gay, and Transgendered- Memorial University of Newfoundland
(LBGT-MUN)**

Support group organized and run by students at Memorial University of Newfoundland. Contact person is Ramona at 754-5896 or the organization can be reached by email at lbgtmun@plato.ucs.ca.

Lesbian/ Gay/ Bisexual/ Questioning Youth Group

This group membership is confidential and the contact site for this particular group or others that may have begun since the writing of this paper is through the St. John's Status of Women Council, Women's Centre, 83 Military Rd., A1C-2C8, ph. # 709-753-0220. The centre can be reached by email at sjswc@nfld.com.

Youth for Social Justice (YSJ)

This group works from Oxfam Canada and may be contacted at 709-753-2202.

Newfoundland Gays and Lesbians for Equality (NGALE)

This group is dedicated to promoting equality for all Newfoundlanders. It holds meetings on the first and third Wednesday of each month. It publishes a newsletter, *outlook*, runs a phone line, and holds a variety of community social events. This organization can be reached at 709-753-4297, by mail at NGALE, P.O. Box 6221, St. John's, Nfld. A1C-6J9, or by email at ngalse@geocities.com. The organization's website is <http://www.geocities.com/WestHollywood/4291>.

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Anderson, Dennis A. (1994). Lesbian and gay adolescents, social and developmental considerations. The High School Journal 77(1 & 2) pp.13-19.

Bass, Ellen, & Kaufman, Kate (1996). Free your mind: The book for gay, lesbian, and bisexual youth - and their allies. New York: Harpers Collins Publishers.

Bohan, Janis S. (1996). Psychology and sexual orientation. Coming to terms. New York: Routledge.

Chan, Connie S. (1996). Combating heterosexism in educational institutions: Structural changes and strategies. In E. D. Rothblum & L. A. Bond (Eds.) Preventing Heterosexism and Homophobia (pp.20-35). Thousand Oaks, Ca.: SAGE Publications.

D'Augelli, Anthony R. (1996). Enhancing the development of lesbian, gay, and bisexual youths. In E.D. Rothblum & L.A.Bond (Eds.), Preventing heterosexism and homophobia. (pp. 124-150). Thousand Oaks, Ca.: SAGE Publications.

D'Augelli, Anthony R. (1996). Lesbian, gay, and bisexual development during adolescence and young adulthood. In R.P.Cabaj & T.S.Stein (Eds.), Textbook of homosexuality and mental health. (pp.267-288). Washington, DC: American Psychiatric Press.

Davies, Dominic (1996). Working with young people. In D.Davies & C.Neal (Eds.), Pink therapy. A guide for counsellors and therapists working with lesbian, gay, and bisexual clients. (pp.131-148). Buckingham: Open University Press.

Friend, Richard (1993). Choices not closets: Heterosexism and homophobia in schools. In M. Fine & L. Weis (Eds.), Beyond silenced voices. Class, race, and gender in U.S. schools. (pp. 209-235). New York: State University of New York Press.

Garnets, Linda, Herek, Gregory M., and Levy, Barrie (1993). Violence and victimization of lesbian and gay men: Mental health consequences. In L. D. Garnets & D.C. Kimmel (Eds.), Psychological perspectives on lesbian and gay male experiences. (pp. 579-597). New York: Columbia University Press.

Gonsiorek, John C. (1993). Mental health issues of gay and lesbian adolescents. In L. D. Garnets & D. C. Kimmel (Eds.), Psychological perspectives on lesbian and gay male experiences. (pp. 469-485). New York: Columbia University Press.

Greeley, Greg (1994). Service organizations for gay and lesbian youth. In T. DeCresenzo (Ed.), Helping gay and lesbian youth: New policies, new programs, new practices. (pp. 111-130). New York: Haworth Press.

Harbeck, Karen (1991). Coming out of the classroom closet: Gay and lesbian students, teachers, and curricula. Journal of Homosexuality, 22 (3/4) p.3

Herek, Gregory M. (1993). The content of anti-gay violence: Notes on cultural and psychological heterosexism. In L. D. Garnets & D. C. Kimmel (Eds.), Psychological perspectives on lesbian and gay male experiences. (pp. 89-107). New York: Columbia University Press.

Herek, Gregory M. (1993). On heterosexual masculinity: Some physical consequences of the social construction of gender and sexuality. In L.D. Garnets & D.C. Kimmel (Eds.), Psychological perspectives on lesbian and gay male experiences. (pp. 316-330). New York: Columbia University Press.

Herek, Gregory M. (1996). Heterosexism and homophobia. In R.P.Cabaj & T.S.Stein (Eds.), Textbook of homosexuality and mental health. (pp.101-113). Washington, DC: American Psychiatric Press.

Jackson, Darryl & Sullivan, Richard (1994). Developmental implications of homophobia for lesbian and gay adolescents: Issues in policy and practice. In T. DeCrescenzo (Ed.), Helping gay and lesbian youth: New policies, new programs, new practices. (pp. 93-109). New York: Haworth Press.

Mallon, Gerald P. (1994). Counseling Strategies with gay and lesbian youth. In T. DeCrescenzo (Ed.), Helping gay and lesbian youth: New policies, new programs, new practices. (pp.75-91). New York: Haworth Press.

Mirken, Bruce (1993). School programs should stress acceptance of homosexuality. In D.Bender & B.Leone (Eds.), Homosexuality, opposing viewpoints. (pp.106-112). San Diego, Ca.: Greenhaven Press, Inc.

Morrow, Deana F. (1993). Social work with gay and lesbian adolescents. Social Work 38 (6) pp.655-660.

Moses, Elfin A., & Hawkins, Robert O. Jr. (1982). Counseling lesbian women and gay men. A life issues approach. St. Louis: The C.V. Mosby Company.

O'Connor, Andi (1994). Who gets called queer in school? Lesbian, gay and bisexual teenagers, homophobia and high school. The High School Journal. 77(1 & 2) pp. 7-12.

Rhoads, Robert A., (1994). Coming out in college. The struggle for a queer identity. Connecticut: Bergin & Garvey.

Rotheram-Borus, Mary Jane & Fernandez, M. Isabel (1995). Sexual orientation and developmental challenges experienced by gay and lesbian youths. Suicide and Life-Threatening Behavior 25 (Supp) pp. 26-34.

Rust, Paula C. (1996). Finding a sexual identity and community: Therapeutic implications and cultural assumptions in scientific models of coming out. In E.D.Rothblum & L.A.Bond (Eds.), Preventing heterosexism and homophobia. (pp.87-123). Thousand Oaks, Ca.: SAGE Publications.

Savin-Williams, Ritch C. (1990). Gay and lesbian youth. Expressions of identity. New York: Hemisphere Publishing Corporation.

Sears, James T. (1991). Educators, homosexuality, and homosexual students: Are personal feelings related to personal beliefs? Journal of Homosexuality 22 (3/4) p.29-79.

Shortall, Ann (1998). The social construction of homophobia and heterosexism in the Newfoundland education system. Unpublished master's thesis, Memorial University of Newfoundland, St. John's, Newfoundland, Canada.



