Culture Shock: Creating a Protective Environment for Afro-Caribbean LGBTQIA Youth

Vanessa Mejia, MPH, CLC; Windy Jacques, MPAc (Diaspora Community Services), and Carla Massena, MPH, CHES (NYC Health + Hospitals)

Healthy Teen Network’s 38th Annual National Conference
Baltimore, MD | October 2-4, 2017
Overview

• Historical and Institutional Perspective
• Institutional Barriers and the Societal Impact
• Biases and Perceptions
• Protective Factors
• Integrating Protective Factors in Our Practices
Learning Objectives

At the completion of the workshop participants will be able to:

• Recognize cultural variations, perceptions and experiences in the Afro-caribbean culture among LGBT youth
• Identify societal and individual biases about LGBT
• Demonstrate familiarity with how LGBT issues impact various components of society in the Afro-caribbean community by drawing comparisons and avoiding stereotypes in classroom discussion
• Share experiences in a safe environment
Perceptions Worksheet

Directions: Write in the gender of the person who you perceive has participated or would participate in the statement below.

1. Changes their car oil.  
2. Been to a Broadway Play.  
3. Likes classical music.  
4. Has bungee jumped.  
5. Played a varsity sport in high school.  
6. Was a boy/girl scout.  
7. Is a good cook.  
8. Likes to do Yoga.  
9. Is an avid reader outside of class.  
10. Was considered very popular in high school.  
11. Has been in a mosh pit.  
12. Likes to bowl.  
13. Would like to have a large family. 
14. Likes to go to casinos.  
15. Enjoys art museums.  
16. Watches the Discovery or Learning channel.  
17. Can see singing in the rain.  
19. Could see joining a Greek organization.  
20. Goes to bible study.  
22. Is probably from a wealthy family.  
23. Has traveled internationally.  
24. Can play the piano.  
25. Likes to go hiking.  
26. Knows a lot about fishing.  
27. Follows horoscopes.  
28. Likes techno music.  
29. Could see being a politician.  
30. Likes to be in the limelight.  
31. Knows what a Bar/Bat Mitzvah is.  
32. Has seen a rated X movie.  
33. Recycles.  
34. Is in the Honors program.  

Social Norms & Culture
Honoring Experiences & Perspectives
Historical and Institutional Perspective

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Historical and Institutional Perspective

• Slavery and Colonialism
  • Criminalization
  • Anti-sodomy laws
• Religion
  • Christianity
Slavery and Colonialism

- **Slavery: 1600s to 1800s**
  - British
  - French
  - Spanish
  - Dutch
  - Portuguese
- **Colonialism**
  - Territories

Criminalization and Laws

Criminalization and Laws

Countries with Anti-Sodomy Laws

• Antigua and Barbuda
• Barbados
• Dominica
• Grenada
• Guyana
• Jamaica
• St. Kitts and Nevis
• St. Lucia
• St. Vincent and the Grenadines
• Trinidad and Tobago

https://76crimes.com/76-countries-where-homosexuality-is-illegal/

http://www.huffingtonpost.com/jessica-joseph/influential-caribbean-cou_b_5970584.html
Port-au-Prince, Aug 3, 2017 (AFP) A vote by the Haitian Senate to ban gay marriage as well as “public demonstration of support” for homosexuality reflects the will of the people, the chamber’s president has said.

Slavery and Religion

• Religion was an important part of slavery—obedience for the Slaveholders and freedom for Slaves.
• Variations in Protestant and Evangelical beliefs led to Slaves take a closer looks at the bible.
  • Protestant clergymen began to defend the institution, invoking a Christian hierarchy in which slaves were bound to obey their masters, where Evangelicals did not take this stance making it more palatable for converting slaves and establishing biracial churches for many slaveholders ¹
  • However, an "invisible institution," beyond the purview of whites or formal churches, some slaves reformulated their teachings, emphasizing themes of suffering and redemption¹

Modern Day Religion

• Cultural variations in the Caribbean are deeply intertwined with religious beliefs
• Many religious practices in the Caribbean stems from the time of the Europe colonization (syncretism)
• Most religious leaders in Caribbean communities express their aversion to LGBTQ behaviors, tend to view them as sinful
• Some congregations member have no issues renouncing their memberships if a church leader is openly supporting tolerance towards LGBTQ events
• Religious leaders could make a big impact if they stood for LGBTQ rights but often time they remain quiet and do not go against violence towards LGBTQ communities
• The role of Voodoo in Haiti
Institutional Barriers and the Societal Impact

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Institutional Barriers

• Healthcare and Mental Health
• Financial stability
• Housing
• Education
Healthcare

Caribbean (2013)

- 250,000 people living with HIV
- 1.1% adult HIV prevalence
- 12,000 new HIV infections
- 11,000 AIDS-related deaths
- 42% adults on antiretroviral treatment

Source: UNAIDS Gap Report 2014
Mental Health

Minority stress, the unique or increased life demands on one’s coping resources due to disadvantaged social status, has been strongly implicated in the poor psychological and overall well-being observed among various minority groups. Sexual orientation is one of the factors that could give people such a disadvantaged position. —White, Y. R., Barnaby, L., Swaby, A., & Sandfort, T. (2010)
Mental Health

LGBT individuals have 1.5x HIGHER RISK of depression and anxiety disorders than heterosexual individuals.

General Population Suicide Attempt Rate 1.6%
Heterosexual Teen Suicide Attempt Rate 4%
LBG Teen Suicide Attempt Rate 20%
Trans* Suicide Attempt Rate 41%

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Housing

https://www.1800runaway.org/2017/04/end-lgbtq-youth-homelessness-40-to-none-day/
Education

Gender Identity and Dropping Out

Race/Ethnicity and Dropping Out

Why?

• Bullying
• No Safe Space
• Biases
• Misconceptions
• Lack of understanding
Implications

- Low wage job opportunities
- No healthcare benefits
- Criminal and Juvenile Justice System
- Government assistance
- Low self esteem
- High risk behaviors
  - Substance use
  - Sexual activity

http://www.huffingtonpost.com/2014/06/13/homophobia-economy-india_n_5488662.html
Biases and Perceptions

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Cultural Identity Worksheet

1. Name three cultural identifiers that you identify with most:

   1) 
   2) 
   3) 

2. From the list of identifiers above, select the one you identify with most:

   

3. What you like most about the cultural that you listed?

   
   
   

4. List some stereotypes about your culture that do not apply to you

   
   
   

SOCIETY NORMS & CULTURE
HONORING EXPERIENCES & PERSPECTIVES
Biases and Perception

LGBT youth face gross amount of hardships growing up in a society where heterosexuality is viewed as the only acceptable norm

- Personal choice
- Heteronormative
- It should only be “man and woman”, not “man and man” or “woman and woman”
- Peer pressure
- The hell/heaven argument
  - “This is not of God”
  - “somehow being gay is the only sin, the biggest sin, I didn’t know any sin was big, but it's like the only sin, but it's true, I didn’t know sin was big, so it’s like the biggest sin to black people” - (Marlon, 11 August 16 Focus Group)
- Haitian persecution after the earthquake
### Unconscious Bias and Stereotyping

<table>
<thead>
<tr>
<th>Stereotyping:</th>
<th>Bias:</th>
<th>Unconscious Bias:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generalization of a group/assuming excessive similarity about a group of people</td>
<td>Unreasoned preconceived tendencies</td>
<td>Refers to unquestioned or automatic assumption about an individual or group</td>
</tr>
</tbody>
</table>
The Issue with Stereotyping

• “Self-Fulfilling Prophecy”

• “In stereotyping of one group of individual we tend to look for what we believe to be true. The idea of the feminine gay man or fashionable gay man.”

• “Unconscious bias might hinder self exploration.”
Internalized Homophobia Activity
Sentence Completion: Myths and Stereotypes
Purpose: This exercise allows spontaneous expression of feelings about homosexuality. Even lesbian and gay participants may be surprised by the intensity of their associations. Thus, it’s a good exercise for addressing internalized homophobia. Read the following sentences:

• As a parent, if I found out my child were taught by a gay teacher, I would...
• If a close friend of mine who I assumed was straight told me (s)he was gay, I would feel...
• When I think of two people of the same sex making love to each other I feel...
• As a parent, if I learned my child was lesbian or gay, I would...
• If someone of my own sex made a sexual advance to me, I would...
• If I were attending a weekend conference and I found out my roommate was gay or lesbian, I would...
• When I think about children who are being raised by lesbian or gay couples, I feel...
• What I admire about gay people is...
• What I don’t like about gay people is...
• Lesbian or gay people make me uncomfortable when...
Protective Factors

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Risk Factors

Risk factors refer to the stressful conditions, events, or circumstances (e.g., maternal depression, substance abuse, family violence, persistent poverty) that increase a family’s chances for poor outcomes, including child abuse and neglect.

Protective Factors

Protective factors are conditions or attributes in individuals, families, communities, or the larger society that, when present, mitigate or eliminate risk in families and communities that, when present, increase the health and well-being of children and families.

https://www.childwelfare.gov/topics/preventing/promoting/protectfactors/
Protective Factors for LGBT Youth

• Family Support
• Positive Peer Groups
• Engagement in School and within the Community
• A Strong sense of self
• Inclusive Policies
<table>
<thead>
<tr>
<th>Individual</th>
<th>Relational</th>
<th>Community</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fixed</strong></td>
<td><strong>Fixed Family</strong></td>
<td><strong>School</strong></td>
</tr>
<tr>
<td>• Age</td>
<td>• High level of parental education</td>
<td>• Opportunities for prosocial school involvement</td>
</tr>
<tr>
<td>• Race/ethnicity</td>
<td>• Living with two parents</td>
<td>• Commitment to school</td>
</tr>
<tr>
<td>• Intelligence/IQ</td>
<td></td>
<td>• School Connectedness</td>
</tr>
<tr>
<td>• Biological Sex</td>
<td></td>
<td>• Clear expectations for behavior</td>
</tr>
<tr>
<td><strong>Personality</strong></td>
<td><strong>Family</strong></td>
<td></td>
</tr>
<tr>
<td>• Temperament</td>
<td>• Bonding to family</td>
<td></td>
</tr>
<tr>
<td>• Tendency to seek meaning</td>
<td>• Attachment to family</td>
<td></td>
</tr>
<tr>
<td>• Extraversion</td>
<td>• Opportunities for prosocial family</td>
<td></td>
</tr>
<tr>
<td>• Adaptability</td>
<td>• Quality parent-child relationship</td>
<td></td>
</tr>
<tr>
<td>• Emotional regulation</td>
<td>• Family connectedness</td>
<td></td>
</tr>
<tr>
<td><strong>Religious/ Beliefs</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Belief in moral order</td>
<td></td>
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</tbody>
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Integrating Protective Factors in Our Practices

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Creating a Welcoming and Protective Environment
Creating a Protective Community

- **Positive youth development.** Positive youth development (PYD) involves strengthening protective factors, including skills, competencies and supportive relationships. PYD programs have improved sexual health and should be open and welcoming to LGBT youth.
- **Inclusive sexual health education.** Sex education that is relevant to LGBT youth can increase their ability to use condoms and talk with their partner about safer sex. The Office of Adolescent Health provides information on sex education that speaks to LGBT youth.
- **Gay-straight alliances.** Gay-straight alliances (GSAs) have been found to help LGBT youth as well as heterosexual youth.
- **Parent engagement.** Family acceptance has been linked to positive health outcomes for sexual and gender minority youth. The Family Acceptance Project offers resources to strengthen family support of LGBT youth.

https://www.cdc.gov/healthyyouth/disparities/lgbtprotectivefactors.htm
Case: Jimmy Peterson

At the Wrightsville Health Department Clinic, receptionist Mary Kelly is having a typical afternoon. The normal number of patients are in the waiting room, all the providers are on time; everything is under control. She hears the familiar ring of the elevator bell, the door slides open, and a teenage boy walks toward the front desk. He’s obviously very uncomfortable. Mary recognizes him as Jimmy Peterson, a classmate of her own son. Jimmy approaches the front desk, and also recognizes Mary. In a quiet voice, he says, “Mrs. Kelly, I’m here for my appointment with Dr. Reed.” Mary, who is known for her well-developed maternal instincts, immediately springs into action. “Why, Jimmy, of course the doctor will see you. Let’s take care of you right away. First, I’ll help you fill out some paperwork for our files. It’ll only take a minute. Here now, we’ll do it together.”
As Mary goes through the clinic’s standard form, she gets to the part 4 about Jimmy’s parents. “So Jimmy, what are your mama’s and daddy’s names?” she asks. Jimmy winces, looks around, and says, as quietly as he can, “I have two daddies, Mrs. Kelly. Their names are Frederick Jones, J-O-N-E-S, and Samuel Peterson, P-E-T-E-R-S-O-N.” Before she can catch herself, Mary becomes flustered, and blurts out, “Oh! I didn’t know you don’t have a mama. Well, why don’t I just write down Samuel Peterson then.” Noticing that other people in the waiting room are now looking at him, Jimmy blushes and turns back toward the door. Luckily, Mary apologizes and convinces Jimmy not to leave the clinic. He eventually receives the care he needs, but his experience at the clinic has not felt safe or welcoming.

Question: What could Mary have done better to prevent this situation?
Creating a Welcoming and Protective Environment

First Impressions

Forms and Intake Process

Staff Members Characteristics

Linkages to LGBT Resources in The Community
First Impressions

• Do your promotional materials show that you are welcoming and inclusive?

• Is there anything that indicate your agency is welcoming and inclusive space for LGBT youth, such as posters, brochures, etc?
Scan Your Environment Activity

- What central values guide the mission, programs and daily work of your organization?
Scan Your Environment

- What does it look like to your clients when they walk through the door?
- What does your waiting area look like?
- Do you have relevant and appropriate health information and brochures?
  - Cancer
  - HIV/AIDS
  - Safe Sex
  - Screenings
- Signs and posters
- Advertisement of services
Signage

SAFE ZONE
I am an Ally.
LGBT Community

Safe Zone
sexual orientation
gender expression
gender identity

Diaspora

SAFE PLACE

Rainbow Flag
Publications

Save the Date

* June is LGBT Pride Month!

LGBTQ Health Training Opportunity

The LGBTQ community experiences higher rates of exposure to HIV and STIs, depression, anxiety, substance use and suicidality compared to their heterosexual counterparts, particularly adolescents. They are also low utilizers of primary care. NYC H+H has made a concerted effort to ensure that our LGBTQ patients feel comfortable and are getting the care they need.

As Leaders In LGBTQ Healthcare Equality, one of NYC H+H’s responsibilities is to provide staff training in LGBTQ Patient-
Staff Members Characteristics

• Knows how to take sexual history and is comfortable talking about sexuality with all clients
• Treats all clients unique
• Participates in continuing education
• Committed to equal access to treatment for all LGBT youth
• Utilize appropriate language that is welcoming to all people
Do your forms allow clients to:

• Indicate the name they would prefer to use rather than the one assigned at birth?

• Indicate their relationship(s)?

• Disclose sexual/gender identities if they want to?

• Keep information confidential if they choose to?
### Intake Form

**Legal Name:** .................................................  
**D.O.B.:** ....................................................

**Name I prefer to be called:** ................................

**Preferred Pronoun:**
- [ ] She
- [ ] He
- [ ] Other (please specify): ................................

**Gender:**
- [ ] Female
- [ ] Male
- [ ] Other (please specify): ................................

**Age Range:**
- [ ] 12-17
- [ ] 18-24
- [ ] 25-34
- [ ] 35-44
- [ ] 45-54
- [ ] 55-64
- [ ] 65+

### Sexual Orientation

- [ ] Gay
- [ ] Lesbian
- [ ] Bisexual
- [ ] Queer
- [ ] Straight
- [ ] Something Else
- [ ] Decline to Answer

### Gender Identity

- [ ] Male/Man
- [ ] Female/Woman
- [ ] TransMale/Transman
- [ ] TransFemale/Transwoman
- [ ] Genderqueer/Nonconforming
- [ ] Something Else
- [ ] Decline to Answer
Steps You Can Take Today

• Examine your knowledge and skills Examine your own attitudes and beliefs

• Review the policies of your agency

• Review the written forms

• Examine your use of terminology/language in taking a clients history
Ask Yourself…

1. Is staff representative of the target population in regard to race/ethnicity, sexual orientation, and gender identity?

2. Who conducts community outreach and how?

3. Has each staff member assessed his/her attitudes towards adolescents and adolescent relationships, particularly with regard to sexual orientation and gender identity/gender expression?

4. Where does the climate in this organization ignore or suppress the realities that face LGBT youth?

5. Where does the climate in this organization ignore or suppress the realities that face LGBT youth?

6. Does staff have biases or hold stereotypes?

7. In what subtle or blatant ways might staff be communicating these biases to young people?
Beliefs and Attitudes

Am I aware of and sensitive to my own cultural heritage and respect and value different cultural heritages?

Am I aware of my own values and biases and how they may affect my perceptions of other cultures?

Am I comfortable with the fact that there are differences between my culture and other cultures' values and beliefs?

Am I sensitive to your own personal biases, racial/ethnic identity, and other cultural factors that might require you to seek the help of someone from a different culture when you interact with another person of that culture?

Adapted from: Creating Safe Space for GLBTQ Youth: A Toolkit.
Ask yourself…

• What sexuality-related issues (here specifically, sexual orientation, gender identity, gender expression, and sexual relationships) make me feel uncomfortable?

• What sexuality-related issues are difficult for me to talk about?

• In what sexuality-related issues does my discomfort show up as hostility or as negativity?

• What do I need to do in order to be able to deal comfortably and respectfully with sexuality-related issues?
Case: Jimmy Peterson

Mary Kelly felt terrible about the hurt she caused young Jimmy when all she was trying to do was help. As impartial observers, we can see that she in fact was trying to help, making sure Jimmy felt welcome, and offering to “go the extra mile” in filling out his paperwork for him before seeing the clinician. However, her assumption that Jimmy had a mother and a father, and her surprise when she learned he had two fathers, are good examples of mistakes in communication.
Mary meant no harm, and would certainly deny holding any prejudice against LGBT people. Besides, Jimmy wasn’t LGBT himself, so Mary could say she was unaware of the need to apply the lessons in this learning guide. But every patient is unique, and no one knows for sure when a patient, or someone who is related to a patient, may be LGBT. Mary needed to learn two things: first, it would have been better if she asked: “Jimmy, may I have your parents’ names?” And second, she needed to be ready for the answer. Expressing surprise about people who are different may seem like difficult behavior to “unlearn,” but treating everyone with respect requires exactly this sort of behavioral change. The lesson for front-line staff, therefore, is to always practice good customer service, and to never assume that any particular patient interaction is “safe” from issues like the one that surprised Mary Kelly.
Protective Factors for LGBT Youth

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- Inclusive Policies
References

76 Countries where homosexuality is illegal. (Updated 2017). https://76crimes.com/76-countries-where-homosexuality-is-illegal/.


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   3) ____________________________________________

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   ____________________________________________
   ____________________________________________

4. List some stereotypes about your culture that do not apply to you

   ____________________________________________
   ____________________________________________
   ____________________________________________

Source: Adapted from Diversity Training Workshop - Janet and Milton Benn