LGBTQ Quick Points

1) Check your assumptions – If a student comes to you as a first responder, what assumptions are you making about the student’s gender identity, sexual identity, and/or primary partnership?

2) Use language that creates space and invites safety – Use gender neutral terminology when exploring the student’s situation initially (i.e. “partner” vs. “spouse/husband/wife/girlfriend/boyfriend”; “they” vs. “he/she/ze”) until the student has disclosed a label, pronoun, etc. for others involved.

3) Listen for and honor the student's language and self-identification – Remember that at different stages of identity development and within different cultures, how students perceive themselves may vary widely. Realize that how you perceive and label a relationship or journey from outside the experience often varies considerably from how the student self-identifies and conceptualizes her/his/hir experience.

4) Offer options and use exploratory questions to get a better sense of what information and referrals might be helpful – Again, check your assumptions. Be careful not to assume that just because someone identifies as LGBTQ that she/he/ze would automatically want to find comfort in working with an LGBTQ-identified therapist, police officer, advocate, doctor, etc.

5) Remember that you may be open and safe space-minded but you may represent a profession, department, or other organizational entity that may not feel safe for the student – Honor the student’s fear, hesitation, concern, etc. and continue to emphasize her/his/hir control over what, when, how, and to whom she/he/ze discloses. Remember that past experiences of marginalization within traditionally oppressive systems (i.e. medical, legal, police, mental health) may create additional barriers to getting and accessing further help and support. Validate these experiences and fears whenever possible and emphasize your commitment to work with the student within her/his/hir comfort zone.

6) Be cognizant of any interplay between relationship violence and HIV/AIDS status – There is often an increase in intimate partner violence with HIV partner notification. Keep this in mind when safety planning if possible or known HIV + status is present and, as yet, undisclosed to the partner. Remember that HIV status is protected health information and needs to be treated with the utmost respect and confidentiality whether or not you are a medical or mental health professional. If a student discloses her/his/hir HIV + status to you, it is not yours to share without the student’s specific permission to do so.

7) Be cognizant of myths regarding “mutual” violence, size, “roles,” and gender – Remember that while there may be violence exhibited by both partners in a relationship, there is almost always one partner who uses the violence to control and coerce the other. Gender expression, apparent “roles” in the relationship, and physical size do not automatically tell you who is doing the abusing and who is being abused.

8) Be aware of the impact of additional identity markers and how these affect a student’s ability to access resources and support – Lesbians and queer women of color often face multiple barriers due to feelings of isolation within the lesbian/queer community as a result of the relationship violence compounded by isolation within their cultural communities resulting from unrecognized and non-mainstream gender and/or sexual identities. Disabilities, poverty/SES, and other experiences of oppression, marginalization, and difference may also affect a student’s ability/willingness to access support from you and/or other resources.