Welcoming and Celebrating Sexual Orientation and Gender Diversity in Families

From Preconception to Preschool

Acknowledgements

Table of Contents

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Citation

I Introduction

This resource attempts to address two questions:
1) What does it mean to be an LGBTQ-positive service provider?
2) How do you create an LGBTQ-positive space?

On page 11 you will find helpful definitions. At the end of this resource you will find links to other documents and resources that may be of interest.

Welcoming LGBTQ people and families into programs and services is both simple and complicated.

You can make a difference through concrete things like re-designing intake forms to be more inclusive, putting up posters that reflect an array of family structures, and purchasing and incorporating books that reflect gender, sexual and family diversity. These things are relatively simple.

This resource also encourages you to deepen your understanding of the impact of exclusions and inclusions on people's lives. This will help you to see how assumptions about gender, sexuality and family composition shape your everyday practice, and to more consciously work towards embedding awareness of these things in the work you do every day.

It can be helpful to approach this resource with a sense of fun and adventure. Use it as an opportunity to get creative, to think about new things and to broaden the dimensions of your work. It is important to remember that we all benefit from inclusive spaces.

Welcoming Diversity

This resource is about the diversity that exists amongst people and how, as service providers, we can make our programs into spaces that honour and celebrate this diversity.

The focus of this resource is on issues of sexual orientation and gender identity. It asks you to think about and take action to better serve families that are led by people who identify as lesbian, gay, bisexual, trans and/or queer (LGBTQ). It also asks you to consider the needs of children who are sometimes called gender variant – children whose dress, behaviour or identity does not match traditional gender norms. See page 11 for definitions of terms.

A welcoming environment is one that recognizes the enormous diversity that exists amongst people, as well as their unique experiences and needs. We differ in terms of race, class, ability, age, lived experience, and family structure. Some of us grew up in large families. Some were raised by one, two or three parents. Some were raised by grandparents and some by caregivers other than parents. Some of us were conceived within heterosexual relationships, some of us in the context of LGBTQ relationships, and some by people planning to parent on their own. Building a warm, welcoming environment for people across these ranges of diversity requires ongoing thought, insight and consideration.

The Boy in the Dress

In developing this resource, interviews were held with people who work in programs that serve families, from preconception through to preschool. Interview participants were service providers involved in programs related to family planning, prenatal health, and child and family resources. Service providers frequently shared an anecdote about a boy in a dress, as an example of a challenging situation: the boy in the house centre or dress-up area who finds a dress and wants to wear it. The stories vary. In some cases, his parents were not okay with this and ask the workers to intervene. Sometimes workers in the centre themselves felt uncomfortable. On rare occasions, everyone involved supported the boy's choices.

The discomfort people sometimes feel about LGBTQ issues, is often about *gender* – about how "girls" and "boys" are supposed to look and behave. Lesbians are sometimes seen as women who are not behaving like "women" and vice versa for gay men. People can be confused by bisexuality or think it does not really exist. Trans people are sometimes feared because their existence could mean that gender is not as fixed as we have been taught to believe.

LGBTQ people can unsettle commonly-held understandings about gender and sexuality, and are sometimes met with reactions that include hesitation and/or fear. These fears are often bolstered by ideas we are taught in our families and communities, and by the media.

This resource asks you to think about gender and sexuality and the norms that you were raised with, and perhaps, to question them. This kind of questioning can be challenging. At times it can feel like you are going against your upbringing, against your family, or even against your moral beliefs, religion or culture. You may be more open or less open to this kind of self-reflection. But the fact that you are reading this means that you are interested in providing services that are truly inclusive. Even within LGBTQ communities there is a need to be open to the experiences of others and to learn more about creating inclusive spaces. We can all benefit from opening ourselves to understanding the enormous diversity that exists in the world, both within and outside of our own communities.

Reflection: *Think about a time you were told you should behave or dress a certain way because you were a girl/boy. How did you feel? If this never happened to you, why not?*

Valuing the People Who Work With Families

Working in preconception care, prenatal care, early childhood education and family support can be very demanding. Assisting people with family creation, supporting parents, and/or having responsibility for the well-being of large numbers of children over extended periods of time, can be exhausting, physically and emotionally. For the most part, workers in these fields work extremely hard and are not always compensated well for their work. In the context of busy and demanding work, it can be hard to find the time, energy and emotional space to think about and address issues of equity and inclusion.

It can be helpful to remember that you don't have to know everything. What is most important is being open to learning and having a desire to know about the people and families you are working with.

"There is a fear of not knowing, of saying I don't know. But you do not have to know everything. It's good to be aware when you don't know something and to be open to different kinds of people and families. I sometimes say, 'I don't know and why don't we find out?'"

– Trish Hunt, family support practitioner

Creating more inclusive spaces can provide opportunities to learn and to grow, to try new things and to consider new ideas, activities and ways of thinking.

Reflection: What are some simple things you can do to make your program more welcoming of LGBTQ families?

Understanding Difference

There is a story about a woman who is black and a woman who is white who are considering becoming friends. The woman who is black says to the woman who is white, "There are two things you have to do if you want to be my friend. First, you have to forget that I am black. Second, you have to never forget that I am black."

There is wisdom in this story. Understanding difference means holding two things at the same time:

- ◆ The ways that we share a common humanity.
- ◆ The fact that we live in an inequitable world that provides different groups of people with varying degrees of access to power, autonomy, and privilege.

When we think about parenting and families, there are many things that all parents of young children have in common. The particular intensity of early parenthood creates a connection amongst parents/caregivers of young children. While LGBTQ parents are similar in many ways to other parents, there are some aspects of their experience that differ.

For example, for many LGBTQ people the process of bringing children into their lives can be a long and thoughtful process, sometimes involving a heavy financial burden, complex negotiations, and false starts. While of course this is also true for some heterosexual people who face challenges in the process of becoming parents, it can be a common experience for LGBTQ people. LGBTQ families can also face particular challenges because of lack of acceptance from family members, work, and in the community at large.

"Similar to newcomers, LGBTQ people can't always assume that their family of origin is going to be there to swoop in and help. It's important to broaden your understanding of what constitutes FAMILY. Ask people what kinds of supports they have. The isolation that LGBTQ people sometimes feel is similar to what newcomers can feel – that there's nobody there except them."

– Stacia Stewart, project coordinator

LGBTQ people and families may run into health care and other service providers who are not familiar with their lives or experiences, and who may, as a result, treat them in demeaning or disrespectful ways. They may simply feel invisible as they walk through the doors of institutions or programs that do not recognize them on their intake forms, in the posters on the walls, the books on the shelves, or in the language or programming. Sometimes LGBTQ people encounter service providers who do not recognize the partners or co-parents or even their right to have a family. And non-biological LGBTQ parents can face particular challenges related to visibility and recognition.

"No matter how strong her presence and involvement in the family… it is she who disappears, it is she (the non-biological parent) who is disenfranchised – by the school, by both families of origin, by the outside world, sometimes (even more painfully) by the children or by friends in the lesbian network who do not see her as a parent nor understand the unique pressures of her position in the family."

– Crawford, 1987

This resource asks you to think about these kinds of differences, and to reflect on how you might acknowledge and address them in your daily work.

II Moving Towards Inclusion

When asked about the barriers that exist in their programs when it comes to LGBTQ inclusion, people spoke about three important barriers: invisibility, lack of information and negative beliefs.

Invisibility: Nobody Talks About It…

Although people referred to the equity and inclusiveness policies that exist in their organizations, most people noted a silence when it comes to LGBTQ issues. They were hard pressed to think about initiatives to address these issues. Many people said that very little (or nothing) was being done. Of course there were exceptions to this – some organizations have tackled these issues with energy and enthusiasm. However, in most programs the silence remains.

"There is a philosophy of inclusion but we need to take the statements of policy and philosophy and bring them to life"

– Donalda McCabe, program director

Some people said they had never encountered an LGBTQ person or family in their work and so had not felt pushed to adjust or expand programs to incorporate the possibility that there were LGBTQ people present.

"Sometimes people say, 'How many people are we talking about? We're in a northern town. 1 person? 15 people? Why should I change something for one person?' But it's not about numbers. The idea is that anyone could move there and you cannot make the assumption that everyone is straight. You have to provide an inclusive space for everyone."

– Stacia Stewart, project coordinator

Estimates of numbers of LGBTQ people in the Canadian population vary from 5% to 15%. A recent Toronto District School Board (TDSB) document estimates that approximately 1 person in 10 is LGBTQ (TDSB, 2011). In reality most programs are serving people who are LGBTQ but people may not feel safe to identify themselves. Some people choose to not disclose their identities, and others are not necessarily visible, for example, the single queer mom, the bisexual man and woman who are partnered, the lesbian with a partner who is a trans man. You cannot make assumptions about people's gender or sexual identity, just by looking at them.

"Generally I feel invisible as queer. Because I'm with a man, I am presumed to be straight. And then how do you come out to your kid as bi? There are no story books, nobody to share that experience with."

– Bisexual mom

Making your programs more inclusive allows everyone in the program, straight and queer, to let you know who they are, if they choose. Making your program explicitly LGBTQ positive also sends a strong signal to people who are hesitating about approaching your service, wondering if they will be welcome. You cannot postpone dealing with these issues until you have an LGBTQ person in the space. Programs need to be inclusive from the start.

"I was working for a transition house and talked about having a trans workshop. They said, 'Why don't we wait until a trans woman comes along?' But then it's too late, we're not prepared. Then they got a call from a trans woman and they said, 'No, cause we're not ready.'"

– Klaudia Meier, family support practitioner

Reflection: *Why do you think it is important to think about LGBTQ issues regardless of who appears to be coming to your program?*

Lack of Information and Negative Beliefs

Service providers who lack relevant knowledge about LGBTQ issues can be provided with information that will assist them in reflecting on and developing their practice.

Some people do not believe that spaces *should* be open to LGBTQ people. This kind of resistance can be addressed by reminding people that, regardless of personal beliefs, most services are publicly-funded and staff must abide by the laws and policies of municipal, provincial and federal governments, and by the policies and procedures of individual organizations. The Ontario Human Rights Commission (www.ohrc.on.ca) clarifies that service provides must provide services regardless of race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status or disability. For relevant legislation and policies, see page 50.

As OCASI's (Ontario Council of Agencies Serving Immigrants) Positive Space literature explains:

"Sexual orientation and gender identity are challenging topics for some people. Some of you may experience discomfort. Regardless of your personal beliefs, all service providers have a commitment to provide respectful, relevant, and effective service to clients and create an atmosphere that respects human rights, and is positive for clients, staff, and volunteers. This is not about changing your beliefs – it's about becoming more aware so that you can do a better job and create a better work environment for everyone."

<div align="right">– www.positivespaces.ca</div>

For tips on dealing with resistance to change, see the Safe At Schools website: www.safeatschool.ca.

III Understanding The Terms

Below are definitions for some commonly-used terms in LGBTQ communities. It is important to remember that language and terms change over time and are used differently amongst individuals and communities. The best one can do is to try and keep up with current terminology, and remember that it is always okay to respectfully ask which terms or pronouns people prefer.

LGBTQ Terms

Words to Describe Sex

◆ **Biological Sex:** The category (usually male or female) assigned at birth, based on what body parts you have and other physical characteristics. Some people say: Sex is between your legs; gender is between your ears.

◆ **Intersex:** Someone who is born with both or ambiguous female and male genetics, and/or physical characteristics.

Words to Describe Sexual Orientation

◆ **Sexual orientation:** A term for emotional, physical, romantic, sexual, and spiritual attraction to another person. Examples: gay, straight, bisexual, lesbian, pansexual.

◆ **Lesbian:** A woman whose primary sexual/romantic attractions are to other women.

◆ **Gay:** A man whose primary sexual/romantic attractions are to other men. Is sometimes used by lesbians (i.e. gay woman), but many lesbians and bisexual people do not feel included by this term.

◆ **Bisexual:** A person whose sexual/romantic attractions are directed towards individuals of more than one sex or gender, though not necessarily at the same time.

◆ **Heterosexual:** A person who is primarily attracted to people of the "opposite" sex.

◆ **Pansexual:** Someone who is attracted to other people regardless of their gender or sexual orientation.

◆ **Queer:** A term that has traditionally been used as a derogatory and offensive word for LGBTQ people. Many have reclaimed this word and use it proudly to describe their identity and/or as an umbrella term for LGBTQ people or communities. It is not accepted by all LGBTQ people.

◆ **Questioning:** Someone unsure of or exploring their sexual orientation and/or gender identity.

Words to Describe Gender

◆ **Gender Binary:** The idea that there are only two, opposite, genders: man or woman, and that people can only be one or the other and stay that way all their life.

◆ **Gender Expression:** The public expression of gender identity: manner, clothing, hairstyles, voice or body characteristics, etc.

◆ **Gender Identity:** A person's identification as being masculine, feminine, androgynous, trans, or something else entirely. Gender identity is distinct from sexual orientation – everyone has a sexual orientation and a gender identity and one does not predict the other.

◆ **Trans:** In this manual, trans is used as an umbrella term to include transgender and transsexual people.

  – **Transgender:** An umbrella term referring to people who do not embrace traditional binary gender norms of masculine and feminine and/or whose gender identity or expression does not fit with the one they were assigned based on their sex at birth. Can include androgynous, genderqueer, gender non-conforming and some transsexual and Two-Spirit people.

  – **Transsexual:** Someone who feels their gender identity does not match the sex they were assigned at birth. Many transsexual people choose to transition so that their sex and gender identity match.

◆ **Transition:** The process of changing from the sex one was assigned at birth to the gender one identifies with. May involve dressing in the manner of the self-perceived gender, changing one's name and identification, and pursuing hormone therapy, and/or sex reassignment surgeries.

◆ **FTM:** Trans man; a female to male trans person; someone who was assigned as female at birth and identifies as male.

◆ **MTF:** Trans woman; a male to female trans person; someone who was assigned as male at birth and identifies as female.

◆ **Two-Spirit:** An English language term used to represent the traditional words used by some First Nations people to describe people perceived to embody both masculine and feminine spirits or to describe their sexual, gender and/or spiritual identity.

◆ **Cisgender:** A term to describe a person whose gender identity matches the sex they were assigned at birth; someone who is not trans. Cis means "on the same side," and trans means "across."

◆ **Cissexual/Cisgender Privilege:** The privilege that cisgender people, and those assumed to be cisgender, experience as a result of having their femaleness or maleness deemed authentic, natural, and unquestionable by society at large. This privilege allows cisgender people to take their sex and gender for granted in ways that trans people cannot. In contrast, trans people are often punished for the ways their gender identity does not match the social expectations of the sex they were assigned at birth.

◆ **Genderqueer:** Used to describe individuals whose gender identity does not fit within the gender binary.

◆ **Gender Variant/Gender Non-conforming/Gender Independent:** Used to refer to individuals whose expressions of gender do not conform to the dominant gender norms of masculinity and femininity.

Words to Describe Discrimination

◆ **Homophobia:** Discriminatory assumptions, beliefs, practices, and policies directed against people on the basis of actual or perceived same-sex sexual orientation.

◆ **Biphobia:** Discriminatory assumptions, beliefs, practices, and policies directed against people who are bisexual or perceived to be bisexual.

◆ **Transphobia:** Discriminatory assumptions, beliefs, practices, and policies directed at trans people, or those perceived to be trans.

◆ **Heterosexism/Heteronormativity:** The assumption that everyone is and should be heterosexual, and that heterosexuality is the only normal form of sexual expression for mature, responsible human beings.

◆ **Cisgenderism/Cisnormativity:** The assumption that everyone is and should be cisgender (non trans) and that cisgender is the only normal gender identity for mature, responsible human beings.

◆ **Monosexism:** The belief that a person can only be attracted to one sex or the other, not both. It does not give people the space to identify as bisexual or pansexual.

It is important to remember that biological sex, gender identity, gender expression and sexual orientation do not flow one from the other. When you first meet someone you cannot assume that you know any of these things… it is up to you to create openings so that people can let you know about themselves, if they choose.

Terms that are Important to LGBTQ Families

(Note: these terms are not restricted to LGBTQ families)

◆ **Donor insemination:** A process through which donated sperm is used to create pregnancy.

◆ **Sperm donor/egg donor:** Someone who is donating their sperm or eggs with no intention to parent the child though they may have varying degrees of involvement in the child's life.

◆ **Domestic Adoption:** Any adoption of an Ontario child by a family in Ontario. Includes public, private, and relative adoptions. Distinct from international adoption.

◆ **Second Parent Adoption:** A legal process (sometimes also known as "step-parent adoption") in which a non-biological parent formally adopts a child in order to be fully legally recognized as the child's parent. Note that families who have done second parent adoption typically do not think of themselves as families created through adoption – these adoptions are typically only about legal recognition of people who are already parenting.

◆ **Co-parenting:** Parenting with a person or people with whom you are not romantically involved.

◆ **Surrogacy:** Carrying a child as a way to provide others with the opportunity to become parents.

◆ **Chosen Family:** "families of choice" composed of friends, partners, companions, and ex-partners, who provide support, validation, and a sense of belonging.

Reflection: *Heterosexism is the belief that all people are, or should be, heterosexual. How might heterosexism manifest itself in the day to day operations of your program or work place?*

IV Social/Historical Context Of LGBTQ Families

Working effectively with LGBTQ people involves having some knowledge and understanding of the social and historical context within which LGBTQ people live and parent. While LGBTQ families in Canada currently enjoy unprecedented social and legal recognition, it is only relatively recently that they have been officially "allowed" to become parents.

Close to 50% of the Canadian population continues to believe that gay and lesbian people should be denied the right to parent (Rayside, 2008).

Think about what this means. It means that when someone walks into your program or service, they do not know if you are one of the people who believe this. They do not know how they will be treated. They may be fearful to disclose their sexual orientation, gender identity or family structure, in case they will be met with ignorance, fear or discrimination.

Some Canadian history

Below is a brief summary of key developments in Canadian LGBTQ family history:

The 1970s

◆ LGBTQ parents were mostly invisible. Media stories began to appear about lesbians who were fighting legal battles with their ex-partners or husbands for custody of their children.

◆ Small, grassroots, unfunded organizations such as the Lesbian Mother's Defense Fund struggled to defend the rights of women who were losing their children.

◆ 88% of lesbians who went to court to fight for custody of their children, lost custody (Chesler, 1986).

The 1980s

◆ This was the beginning of the "lesbian baby boom," in the context of the women's health movement.

◆ Lesbians seeking access to Assisted Human Reproduction (AHR) services in Ontario were sometimes denied service and sometimes required to:
   – Take a psychiatric assessment
   – Write a "letter to the doctor" convincing him/her to grant access to services

- There were no resources, programs, supports for LGBTQ parents or prospective parents.

- Non-biological parents had no legal right to their children.

- Gay fathers struggled with disclosing sexual orientation to children and spouses, with the consequences of a homophobic legal system, and with their own identities.

- Bisexual parents were not visible.

- Trans parents were virtually invisible – and subject to excruciating discrimination.

The 1990s

- 19 of 33 assisted insemination programs surveyed by the Royal Commission on New Reproductive Technologies stated that lesbians would be refused treatment at their clinic (Baird, 1993).

- Access to fertility services increased.

- Gay/bi/queer dads were becoming more visible.

- Second Parent Adoption became available (1995).

The 2000's

- The Assisted Human Reproduction Act came into effect in 2004, but much of the Act was successfully challenged in 2010. What remains in effect are prohibitions on the sale of sperm, eggs, embryos and commercial surrogacy.

- LGBTQ communities increased their use of Assisted Human Reproduction services.

- Courts made it possible for two women to put their names on a birth registration. A single man won the right to be listed as the only parent. A lesbian couple and the man they are parenting with were recognized as three parents.

- A landmark case in Ontario awarded a trans woman custody of her child with a judicial statement that being transgender would not be considered a negative factor in the determination of custody (Forrester vs. Saliba, 2000).

- Increased access to adoption within Canada.

- Lesbians and gay men adopting internationally face increased discrimination from some countries.

- Gay/bisexual/queer men are increasingly bringing children into their lives through adoption, co-parenting and egg donation/surrogacy.

- Trans people are becoming more organized and visible and are advocating for their rights, including the right to parent.

- Trans-masculine people (people born with female anatomy, but whose gender identity is masculine) are becoming more public about creating their families through pregnancy. Thomas Beattie made news in 2008 as a very public pregnant man.

- "Queer spawn" (children of LGBTQ parents) are becoming more vocal and visible.

Reflection: *What impact do you think the history shared above might have on the expectations of LGBTQ people walking into a service or program?*

Myths of the Nuclear Family

Opposition to LGBTQ families tends to assume the superiority of a particular model of the family – a family consisting of a heterosexual married couple with one or more children who are biologically related to the parents.

Although most institutional structures and social policy makers continue to assume the nuclear model of the family, many families in Canada do not look like this. There are countless groups of people whose families do not fit this model – single parents, divorced or separated parents, extended families, blended families, children being raised by grandparents or other relatives or community members. Many are parenting outside of couples and many have parenting relationships with children to whom they are not biologically related – adoptive parents, step-parents, other mothers, and anyone who makes use of donor eggs or sperm to create families. We all suffer from a rigid definition of what makes a family.

Myths about LGBTQ Families and the Impact on Children

There is a set of ideas about how unsuitable, inappropriate and dangerous it is for children to have LGBTQ parents.

Some common myths about LGBTQ parents/families include:

◆ LGBTQ sexuality is immoral. LGBTQ people are promiscuous, sexually maladjusted and likely to harm children sexually and/or emotionally.

◆ Children raised in LGBTQ homes will develop inappropriate gender identities and behaviours, and may develop a homosexual orientation.

◆ Children will be damaged by knowing their parent's sexual orientation or gender identity. LGBTQ parents must resolve all their own issues before "coming out" to their children.

◆ Healthy child development requires the presence of biological fathers as male role models and biological mothers as female role models.

◆ Children raised in LGBTQ homes will be socially stigmatized and subjected to ridicule, teasing, and hostility from their peers.

Responding to these ideas

LGBTQ people have spent decades responding to these ideas, as have their children.

Not only do LGBTQ parents know that their children turn out just fine, but numerous professional associations that work with children have issued official statements in support of LGBTQ parenting.

The Canadian Psychological Association statement (2003) reads, in part:

"…there are essentially no differences in the psychosocial development, gender identity or sexual orientation between the children of gay or lesbian parents and the children of heterosexual parents."

The Child Welfare League of America issued the following statement in 1988:

"…families with LGBTQ members deserve the same levels of support afforded other families. Any attempt to preclude or prevent gay, lesbian, and bisexual individuals or couples from parenting, based solely on their sexual orientation, is not in the best interest of children."

Some things to think about:

◆ In most cases, sexual abuse of children is perpetrated by heterosexual men (Badgley et al, 1984).

◆ Children raised in LGBTQ families are not "confused" about gender (Patterson, 2005). It is virtually impossible to grow up in North America and not understand traditional notions of what it means to be a "girl" and what it means to be a "boy." Of course many parents, heterosexual, cisgender and LGBTQ, offer their children expanded understandings of gender. See page 23 for a fuller discussion of the importance of supporting a broad range of gender expression in children.

◆ Sexual orientation is not passed from parent to child (Patterson, 2005). Most lesbian, gay and bisexual people were raised by straight (heterosexual) parents.

◆ Being a LGBTQ parent means being prepared to "be out" in most places. Attempting to be closeted can instill a sense of shame or secrecy in children, increasing their vulnerability to bullying or harassment.

Thinking About "Role Models"

◆ "Role model" arguments have the underlying assumption that men and women, due to their biology, provide substantially different things to children.

◆ Some children might want to bring men or women into their lives, for a variety of reasons. Parents or caregivers can help them do this, if it is important. For other children, it is not an issue.

◆ Assumptions regarding the argument about male and female "role models" are often used against LGBTQ parents, and as a reason to not support them as parents.

◆ LGBTQ families can help expand understandings of gender and sexuality. Discussions about male/female "role models" can help challenge assumptions about gender and parenting.

Reflection: *Think about all the things that children need and what makes a good parent. Is our ability to provide for these needs based in our biological sex?*

Benefits of Having LGBTQ Parents

Most of the early research put lesbian (and by extension GBTQ) parents on the defensive. They were put in the position of having to prove that their children turn out all right, and "the same as" children from heterosexual families. Researchers have started to explore what unique possibilities might exist for children growing up in LGBTQ families. What might be different? And might these differences actually be positive?

Stacey & Biblarz (2001) found that children with LGB parents, when compared to children brought up in heterosexual families:

◆ Exhibit increased awareness and empathy towards social difference.

◆ Exhibit higher self-esteem and better mental health.

◆ Are less gender-stereotyped, i.e. the boys are less aggressive and the girls more likely to aspire to non-traditional jobs.

◆ Live in households with more egalitarian, compatible, shared parenting and time spent with children.

While research on trans parenting is still emerging, existing research (Brown & Rounsley, 1996; Garner, 2004; Hines, 2006; Canfield-Lenfest, 2008) has found that children of trans parents describe the following benefits:

◆ An increase in their parent's happiness and well-being, leading to better parenting and improved parent-child relationships.

◆ Increased open-mindedness; an understanding of oppression; pride; stronger relationships with parents; knowing a whole and healthy parent.

Reflection: *How does the information provided above help you to understand the experiences of LGBTQ families? What can your organization do to discuss and address these issues, and to actively support LGBTQ families?*

Ⓥ Addressing Our Practice: An Ongoing Conversation

"Every time I'm in a health situation, they'll always ask, would you like your husband to come in, and I'll just say no, my "friend" is here… I think it's because I'm hesitant to create a situation where I think there's going to be discomfort because it makes me uncomfortable when they get uncomfortable and I don't want that…"

– Mothering on the Margins, research participant (Ross et al, 2006)

The biggest challenge in working towards LGBTQ inclusivity is the need to get *comfortable*, to confront any negative early belief we may have been taught, and to develop an ease in approaching the topics of gender, sexuality and family structure. We need to take advantage of teachable moments and to talk about all kinds of families.

Being an LGBTQ positive professional means being willing to spend some time reflecting on your earliest beliefs about LGBTQ people and, often, a willingness to challenge these beliefs. Our ideas about people who are different from us come from many places, such as family, religion, school, peers, and the media.

"People are afraid of the unknown. I taught diversity classes at Seneca and sent the students to spend some time in a heavily cultured neighbourhood. Some went to the gay village and they found that, 'Wow, people are really nice. They're just like us!'"

– Terry Kelly, registered early childhood educator

Reflection: **Think back to your childhood. What were some of the first things you ever learned about LGBTQ people (positive, negative, neutral)? Which of those early ideas do you still believe and/or act upon? How might your early beliefs impact both yourself and others?**

– (Adapted from GLSEN, 2002)

Many people only remember a BIG silence in relation to LGBTQ people. Others recall learning very negative things about LGBTQ people. A few might have received more positive messages.

Challenging these early beliefs is an ongoing process and a necessary one if you are to work effectively with LGBTQ people.

"It's important to identify our fears, to look at them and see that they don't have power over us. Then let them go lightly, gently."

– Patrick Mahoney, public health nurse

Gender: Rethinking Some Old Ideas

Below is an excerpt from a brochure developed by Rebecca Raby, Associate Professor, Child & Youth Studies, Brock University, 2012. (Included with permission)

How much do we emphasize gender when working with children? Studies have shown that it is much more than we might first think!

Even the tendency to refer to children as "boys and girls" (usually in that order) draws attention to gender, dividing children into two categories. Gender is further reinforced as we attribute a wide range of children's behaviours to gender (e.g. she is good with words because she is a girl, he is energetic because he is a boy).

In fact, while there may tend to be gendered patterns of behaviour in boys and girls, a strong emphasis on gender can have some quite negative impacts.

Why be concerned about emphasizing gender?

Inequality: Boys tend to be framed as active, independent people, engaged in making things happen in the world. We often praise boys as strong, energetic, brave "little men." Girls are less likely to be framed in this way, or are contrasted to such active boys. We are more likely to praise girls for what they look like, and for being nice and obedient. Even in children's storybooks, the active protagonist, whether a cow, frog, train, squirrel or person, is most commonly presented as male and masculine. These inequalities have been linked to later problems such as sexual harassment of girls, body image issues for girls, rejection of school, and boys' risk-taking.

Limiting Options: When we emphasize that children occupy two categories, boys and girls, it reinforces the idea that these are separate categories and that they must be kept distinct. This separation limits the possibilities for what girls and boys can do together. This separation also comes to limit what boys and girls feel they can do; boys learn that to do things "like a girl" is a problem. Boys may learn to deny their emotions and be tough and detached. Girls may learn to doubt themselves and to please others.

Those Who Don't Fit: There are children who are neither boy-ish nor girl-ish. There are also children who experience themselves as more like the opposite sex than the one they were born into. For these children, the relentless emphasis on distinguishing girls and boys can be particularly difficult.

Bullying: Those who challenge traditional gender norms are vulnerable to bullying. Gender harassment is directed at children who are not seen to be "proper" girls or boys and is much more often directed at boys in the form of homophobic harassment. Homophobic harassment can be devastatingly harsh and it is well-known that it has led some to suicide. For these reasons, we need to reconsider how we talk about gender in relation to children.

Here are some suggestions:

◆ Mix comments to children so that they do not always reinforce gender stereotypes: e.g. compliment boys on their outfits and girls on their strength.

◆ Avoid dividing children on the basis of sex, e.g. girls' and boys' lines.

◆ Avoid assuming that children's skills will be, or are, developed solely on the basis of sex (e.g. girls will learn to read before boys, or that boys will learn math better than girls), or that only certain skills need to be fostered in either girls or boys.

◆ Encourage boys and girls to play together.

◆ Encourage/support all children in a diverse range of activities and ways of being.

◆ Read stories that include (or change them to include): strong female characters, nurturing boys, a diversity of young people involved in a wide range of activities, and adults in a range of professions that are not always gender stereotypes.

◆ Address and discuss sexist jokes, stereotyping comments etc. as they arise.

"One of the reasons we chose the day care our child attends was how they deal with gender. On an early visit, in the infant room there were two male children, both of who were tugging on a purse. The staff person intervened and said, 'Derek, Andrew has the purse right now, you can have it when he's finished his turn.' There was no judging, no shaming, no concern about who should play with a purse, the concern was on sharing and taking turns. It really helped me feel like we were choosing the right place."

j wallace, educator

Supporting a Broad Range of Gender Expression in Children

There is a growing awareness of the need to support children as they develop gender. Understanding and supporting a broad range of gender expression in children creates space for children to explore gender without judgment or fear.

Some people have started using terms like gender variant, gender non-conforming or gender independent to describe children whose gender expressions do not match traditional norms – the boy who likes to wear dresses or play with dolls; the girl who likes to play with trucks or walks "like a boy."

Children need to be affirmed for whatever gender choices they make. The gender behaviours of young children may or may not be indicative of a transgender identity or of a lesbian/bisexual/trans identity.

"There was a dad in the daycare who was a cop, a hockey player, a macho kind of guy. His son had a thing about Snow White. He would always find something to make a skirt from. The dad never blinked an eye, he would say, 'Oh, you're dressed up like Snow White today.' He was just loving."

Terry Kelly, early childhood educator

We need to create an environment where children can express their gender as they like, and where we do not make assumptions about the meaning of children's behaviours or choices.

At a training session involving Early Childhood Educators and Home Child Care Providers, the following situation was shared:

"In one home day care a parent came and said, 'Our son has decided that his favourite colour is pink. I don't want him to turn out gay and my husband is concerned that this is a red flag. The pink cup is his favourite and we don't want him using it.' The home child care provider asked, 'How do I honour these parent's request but help them to think differently? When a little boy is truly effeminate, isn't that okay? Why are children not allowed to be who they are?'

The participants of the training session suggested the caregiver do an ethical review of this situation. What or who is affected by the outcome of this? The group then brainstormed the possibilities. Do we remove the pink cup? But we can't remove all things pink. We can still allow dress up clothes that are pink. We suggested it might be helpful to explain to the parents that children try on all kinds of roles, and that choosing pink is not necessarily about sexual identity. Kids appreciate all colours, pink is a bright colour, and therefore it may appeal to him."

– Lois Saunders, registered early childhood educator

There is often a tendency to "blame" parents when children do not conform to gender norms, and when the children of LGBTQ parents are gender non-conforming it is often seen as a direct consequence of who their parents are. For example, the son of two gay men came to school in a dress and some other parents called authorities to report the "two gay men who are forcing their son to dress as a girl." LGBTQ parents and their children are watched with regard to gender in a way that heterosexual parents are not.

Gender Independent Children: Some Tips to Caregivers and Teachers

Based on an interview with Kimberley White, parent of a gender independent child, Associate Professor of Law and Society, Dept. of Social Science, York University, 2012:

◆ Gender independent children, like mine, need our support. They need to be able to express themselves freely, to be allowed to be who they are. They don't need to be labeled, or identified as having "special needs." They have the same needs as every other child. Gender independent children are not "confused" about who they are… only about why it seems so upsetting to everybody else. Any child will become troubled, however, if they are punished for expressing themselves, or are told they can't be themselves.

◆ Bathrooms are a big issue. Often at age 7 or earlier children are told they have to use "gender appropriate" bathrooms. Our child doesn't always know what to do when she must choose between a girls or boys bathroom and we often can't find a comfortable option. She is so much more comfortable in places where there are all-gender bathrooms.

◆ There needs to be someone in each school and daycare who is responsible for gender safety, for ensuring that there is content that reflects a broad range of gender expressions in the curriculum, and that books for children are shared in the classrooms. If parents get upset, talk to them. The response cannot be to remove the books.

◆ Schools need a language to talk to parents, and parents need a language to talk to their children about gender and gender independence. Sometimes there is a big silence around it. "Is she/he a boy or a girl?" "Shhh…" as if it is shameful or something that shouldn't be talked about.

◆ There are a lot of children who are gender independent who are not allowed to be themselves, who aren't given the freedom to self-express. This creates inner stress and anxiety. Space needs to be opened up to allow for flexibility and a range of supports. Let the children be. They are okay. There is nothing scary or unnatural about who or how they are.

◆ Teachers and day care workers need education. They need tools and language. We need to teach people that gender independence is not a problem, that gender is fluid, and point people to resources that are not medical or pathologizing. It's been really important for our child to meet other children she recognizes as being like her. It has given her confidence and a sense of community. She is not alone.

◆ Teachers need to talk to children and not to be dismissive. Sometimes the school or daycare is the only safe place. Sometimes the child's home is not a safe place. Caregivers and teachers can play an enormously important role. Talk to them, help them, and create a truly inclusive and safe environment for our children.

◆ We are trying to remove the constant stress of having to choose between boy or girl. There are other choices. Understanding gender independence is good for all children… it opens up the possibility for children to be free to express themselves in all kinds of ways.

Inclusive Language

"If I walk into a class and I'm not comfortable coming out, I'm going to be more uncomfortable if they talk to me about my 'husband.' If they say 'partner,' it lets me know they are open to the idea and it puts me more at ease."

– Lisa Farun, homeopath and doula

It is important to pay attention to the words and language we use. Words can empower people and they can also wound. Remember:

◆ People identify the words that work best for them to talk about their sexual orientation or gender identity.

◆ It is okay to respectfully ask someone what term or pronoun they prefer and whether or not a specific term works for them.

◆ Words and language are changing all the time. Words are used differently and mean different things in various cultures and communities. In some languagess there are no terms for lesbian, bisexual, gay or trans. Some people may find it difficult or confusing to use the terms that are commonly used in Canada.

◆ It is hard to learn all the right language. We will make mistakes – everyone does. All we can do is apologize and keep learning.

◆ Your attitude and comfort level are more important that the specific language you use.

(Adapted from Safe At School: www.safeatschool.ca)

Saying you're sorry…

"We called the only midwives in town, and our initial intake involved an argument about what name should go on the file – that they had to have a female name for the file. One of them called back and said they were really sorry, that shouldn't have happened, we'd like to work with you, please help us. To have a health care provider say 'I'm sorry, we made a mistake.' was perhaps the most comforting thing they could have said."

– Queer and trans dad

Tone and Non-Verbal Communication

Regardless of the words we choose, non-verbal communication and tone of voice express emotions, opinions, and attitudes. We need to think about how we speak to each other and ensure that our professional tone is one of respect and interest (Halton District School Board, 2007).

"At one appointment with our midwife, the midwife didn't look at me the whole time. I think this impacted me in a trans-specific way. I felt doubly invisible."

– Trans parent

Gendered Language

Most of us use very gendered language without even realizing it. The language of parenting tends to be gendered, with the assumption often made that primary parents are women. Programs that focus on "moms" leave out all men – straight, bisexual, gay and transgender.

"There's the 'Mom and Tot' sing along; the 'Mommy and Me' program. All of these programs that only seem to expect moms. They could offer these programs to 'Parents and Kids.' Even straight dads feel left out."

– Queer and trans dad

Now that trans men are becoming more public about becoming parents through pregnancy, the traditional language of midwifery and child birth, i.e. pregnant woman, women-centred care, etc. does not fit. Some people have instead started to say "the pregnant person." Changing language that has been used to widely for so long can be challenging, but not as difficult as one might think. Practice moving away from the term "mom" to use less gendered terms like "parents" and "pregnant person."

"Change the words to songs. Instead of the Mommies on the Bus, make it the Parents on the Bus."

– Klaudia Meier, family support practitioner

Intake Forms / Questions

The intake form is often the first thing people are given when they walk into your program or service. If they do not "fit" on the form, if there is no way to represent themselves or their family, they might feel that you are not expecting somebody like them to be coming through your door. They may wonder if you are adequately prepared to serve or work with them.

"I encounter forms that talk about mothers and fathers, and, like there's a sign at the ultrasound office saying, 'Fathers-to-be: If this is a pregnancy ultrasound fathers must wait in the waiting room.' You know, it's exclusionary, it's not necessary, it's just a question of somebody thinking to put the language the right way, it doesn't have to exclude different kinds of families."

– Mothering on the Margins, research participant, (Ross et al, 2006)

Design your forms in a way that is inclusive of all kinds of people and families. You want to use forms that explicitly make room for family configurations that do not assume male/female relationships, or a 2-parent model.

An inclusive intake form can also create the opportunity to have a conversation with all the families who are using your service. It is helpful for LGBTQ families and also lets others know that you serve all kinds of families. It is important that they have this information and can then decide if this is the place for them.

One of the barriers to inclusive intake forms is the ways they are sometimes tied to other processes or data bases. For example, sometimes forms have required fields for a municipal, provincial or federal data base. It may take some creative problem solving with your colleagues and managers to figure out how to both meet the reporting requirements of your organization and to present a welcoming inclusive form to incoming clients.

"Forms are an important beginning place. The more someone is explicit that they expect difference, the more comfortable I feel."

– Queer & trans dad

Asking the Right Questions

Similarly, the questions you ask when someone comes through your door, signal to them your openness to all kinds of people and families, and will help them decide if it is safe to disclose their sexual orientation and/or gender identity. Use of non-biased, inclusive language and open-ended questions will help to create an environment that allows people to tell you about themselves and their families, if they choose.

The Centre for Addiction and Mental Health has published a resource called *Asking the Right Questions 2: Talking with Clients about Sexual Orientation and Gender Identity*. It provides detailed examples of appropriate questions to ask about sexual orientation and gender identity. See page 48.

Visual Images

LGBTQ parents and their children talk about the lack of visibility of LGBTQ families on the walls and bulletin boards of most perinatal and early childhood spaces.

"Our pre-school is a wonderful, nurturing, supportive space and it's full of queer families. But there is nothing on the walls. I brought in posters and nothing was put up. There's no books, no classroom activities, no integration of queer life. Most people don't understand the significance of a poster. We want to see ourselves reflected, to get cues that this is a safe space for me and my family."

– Bisexual mom

Visual representations signal to people walking into your space that you are aware of, and that you welcome diversity amongst individuals and families.

A picture is worth a thousand words. You can create your own posters and visual images with colleagues or with children you work with, and/or you can find visuals created by others. For some examples of posters, refer to the resource section.

Outreach

Outreach is about getting the word out to people, so they will come join a specific program. This can be done by contacting local LGBTQ organizations and programs, using the internet and social media, putting up posters in appropriate places, and generally circulating information about a program.

The most effective strategy to bring people to your program is ensuring that your program and your space are welcoming. That means reflecting on your policies and practices and taking the steps you need to take to create an inclusive space. It could also mean engaging in dialogue with LGBTQ people in your community about what they need and how your program might change or develop to meet these needs.

Perhaps you could run a focus group for LGBTQ families in the neighbourhood. Find out what people would like. A queer and trans drop in? A drop-in that is LGBTQ-focused but that also welcomes straight people? Support groups for adoptive queer parents? Ask if any local LGBTQ people, families, organizations would like to come speak in your classroom, drop-in or organization. Find out about the programs that already exist and make this information available to people who use your services. Make sure to keep the list current.

"At the fertility clinic there was no information about gay and lesbian couples, although the physician was quite open."

– Mothering on the Margins, research participant, (Ross et al, 2006)

VI LGBTQ Family Planning & Prenatal Care

The process of planning LGBTQ families can be a long and thoughtful process, sometimes involving a heavy financial burden, complex negotiations, and false starts.

How LGBTQ people bring children into their lives:

◆ Donor insemination (use of a known or an anonymous sperm donor)

◆ Adoption (private, public, international)

◆ Fostering

◆ Co-parenting (parenting with a person or people with whom you are not romantically involved)

◆ Surrogacy: Carrying a child as a way to provide others with the opportunity to become parents. (Traditional: the same person provides the egg and carries the baby. Gestational: one person donates the egg, another carries the baby.)

◆ Step parenting

◆ Heterosexual sex

LGBTQ Family Structures

Like other families, LGBTQ families are structured in many different ways. Some LGBTQ people parent alone, many parent in couples. Sometimes three or four people come together to co-parent, creating families larger than the traditional two-parent unit. Sometimes families are made up of a primary couple and a sperm donor, who may have more or less involvement with the child. Sometimes the sperm donor is more actively involved as a parent.

"Our midwives really pushed us to write a detailed birth plan, to describe who everybody is in relation to each other. It was valuable to think who needs to know what and when and to give people the appropriate language."

– Queer and trans dad

"In sign language there is a sign for pregnancy, but no signs for the ways that queer people make families. We need a bigger vocabulary and more specific signs."

– Klaudia Meier, family support practitioner

Popular media often portrays LGBTQ families as white, middle class couples, similar to the common depictions of heterosexual families. It is important to remember, again, that there is enormous diversity in the people who make up LGBTQ, and other families. One group that is often particularly forgotten are young parents who also identify as LGBTQ, many of whom find themselves alienated even from LGBTQ parenting groups.

Reflection: *Given the diversity in LGBTQ family structures, what are some possible configurations of LGBTQ families you might encounter in your program?*

Infertility and Miscarriage

Like others who are attempting to create families, LGBTQ people also deal with infertility, pregnancy loss and other unforeseen barriers. The journey to parenthood often requires much thought, planning and, sometimes, expense. When things do not go according to plan, it can be quite devastating. LGBTQ people share the anguish experienced by many who struggle with infertility and pregnancy loss. In addition they face some particular challenges, for example, the invisibility of partners or co-parents in the process and the negative attitudes of some health care practitioners towards LGBTQ people as parents.

"Desperation takes you to terrible places. Here's what I remember: the doctor who was having a bad day or hated women or dykes or all of the above who did an insemination procedure on me so roughly and with such silent hostility that I bled afterward and hoped it wouldn't work because I felt raped. I remember how I said nothing to anyone about it. I remember the well-respected midwife who told me I was miscarrying on the phone and then when I asked what emotional support existed for me she said there was none, anywhere, of any kind. Which wasn't true!

I remember the tight-lipped silence of every grim ultrasound technician whose face could not be read in the dark. I remember the gynecologist with the 'best reputation,' at the 'best hospital,' who suggested that my at-home inseminations were a possible cause of my unexplained infertility because they were not 'natural.'"

Of course I also remember the kindnesses: the nurse at the fertility clinic who offered assistance when the nasty receptionist would not, every doctor who spoke to my partner Rebecca and I with respect and compassion, the friends who kept asking, who'd been through it too, who called every day,..."

– Shira Spector (2009)

Promising Practices: LGBTQ Family Planning

Some issues for LGBTQ people considering parenthood:

◆ Decisions regarding the route to parenthood: adoption, co-parenting, donor insemination, fostering, heterosexual sex, surrogacy.

◆ If using donor insemination, complex issues regarding the use of a known donor, anonymous donor, identity release donor (when the child turns 18).

◆ Potential negotiations with known egg/sperm donors/co-parents/surrogates.

◆ Family configurations: Who has biological connection to child? Who is legally related to the child? Who is involved in parenting the child? What are related social, legal, emotional issues?

◆ Issues of entitlement to parent and internalized shame.

◆ Dealing with individual and systemic discrimination.

◆ Dealing with religious/cultural values that view LGBTQ parenting as unnatural.

◆ Supports available to LGBTQ parents – families of origin, chosen family, friends, community, services.

◆ Legal information – how to protect all parents and children.

The LGBTQ Parenting Network (Sherbourne Health Centre) and Queer Parenting Programs (The 519 Community Centre) offer four Queer and Trans Family Planning Courses. These are:

◆ Dykes Planning Tykes: A course for lesbian/bisexual/queer women considering parenthood.

◆ Daddies & Papas 2B: A course for gay/bisexual/queer men considering parenthood.

◆ Transmasculine People Considering Pregnancy: A course for transmen, trans-masculine people and others on the FTM spectrum who are considering becoming parents through pregnancy and birth.

◆ Queer and Trans Family Planning(s): A course for people of diverse family structures and identities who are considering parenthood.

Participants in these courses explore relevant practical, emotional, social, medical and legal issues. They meet experts in the fields of adoption, assisted reproduction services, and family law. They learn about options, self-advocacy strategies and resources to help make informed choices and build community. Often participants in these courses continue to meet and provide support to each other as they continue on their parenting journeys.

For further information about these courses, go to www.lgbtqparentingconnection.ca

"People sometimes assume that all queer people are rich and we all use IVF (in vitro fertilization) to get pregnant. In fact, we make families in all kinds of ways. Some of us use fertility clinics, some of us use known donors or friends. You know, a scenario for example of 'I didn't have money for a more costly method, so I asked my friend Joe and he said yes.' There is a big range of ways that people have families."

– Stacia Stewart, project coordinator

Promising Practices: Queer Positive Prenatal Class

Based on information provided by Lisa Farun, course facilitator, and Chris Veldhoven, Coordinator, Queer Parenting Programs, The 519 Church Street Community Centre, 2012.

The 519's Queer-Positive Pre-Natal Class provides an empowering space for people of diverse family identities, structures and creation stories to plan for the arrival of a newborn. This unique prenatal program helps lesbian, gay, bisexual, queer, transgender, transsexual, heterosexual and cisgender expectant parents, co-parents and their family creation partners come together for perinatal educational support. They may be expecting a newborn through giving birth themselves, a partner giving birth, adoption or surrogacy. Participants learn about the stages of labour, the process of birth, creating a birth plan, comfort measures, life after giving birth, caring for newborns, self-advocacy strategies, community resources, and much more.

The program is designed to:

◆ Provide perinatal information in a context where participants identities, histories and choices are affirmed, including their sexual orientations, gender identities, family configuration, and family creation stories.

◆ Create a learning environment where participants can share their story and preferred language. The program recognizes that participants come from diverse perspectives and communities where stories are often invisible and language is constantly evolving.

◆ Build participants' confidence in advocating for their perinatal choices and their families.

◆ Decrease social isolation by creating an environment where participants have a chance to meet peers and build support networks.

Program staff members make no assumptions about how a baby is coming into one's life, the number of parents in a family, how people define different roles in that family, the language people use, or the sex and gender of who gives birth. Staff members use inclusive language such as parent, person giving birth, and family creation partners. They bring in peer guest speakers – course graduates and family lawyers – who share their experience and knowledge and work within an anti-oppression framework, solicit detailed participant feedback, and continually reflect on how to do better. Offered in January, May and September, this weekend intensive course allows people from different geographic distances to find affirming service and build community. For more information about this course visit www.the519.org.

VII Early Childhood Education And Care

Early childhood education and care works best when it is linked to the real issues of people's lives. Curriculum that recognizes gender and sexual diversity is very much related to the realities of the lives of children and families. It makes sense that we would be talking about these things as they are so much a part of our everyday lives. We need to open up all of these conversations. Gender and sexual diversity needs to be part of all curricula.

Recognizing and Acknowledging Family Diversity

Sometimes staff members have a hard time answering questions about where babies come from and about the realities of various family configurations. How do you explain donor insemination? Egg donation? Adoption? Surrogacy? Why does one child not have a daddy? Or another has two daddies and a mommy? Get comfortable talking about different kinds of families and different ways of making a family. Use books to help you. Ask the families you work with how they tell their family creation story (Silverberg & Smyth, 2012).

Children's questions need to be answered with open-minded and thoughtful responses. This may require some thought beforehand. Think about the families you may be working with. Anticipate the questions and how you might answer them.

"I would say, 'Every family is different, not every family has a father. Some families have two dads, two moms, two moms and a dad…' Tell a story, (your program may not have money for books) so tell a story about Joey who has two mommies and a daddy and an uncle who's always there... Role play with puppets to make all kinds of families normal."

– Klaudia Meier, family support practitioner

Create opportunities for children to explore lots of ways of being and to see and know all kinds of families.

Special Days

There are some special days that can be particularly challenging for children from LGBTQ families and children who are gender independent. These special days, which include Mother's Day and Father's Day, Valentine's Day and the Family Tree exercises that are so common in schools and daycares, can also be difficult for other children, including those living in foster care, children who have a parent who is deceased or not living with them, children living with a single parent or with relatives or other caregivers who are not their parents.
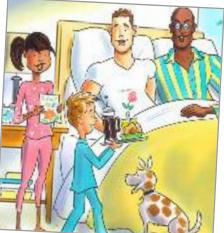
"My teacher was really great except my mom told me that when I was in senior kindergarten, we were making pots for Mother's Day, and they didn't buy me two, but just because they forgot… like, the teacher was really supportive and it wasn't because she didn't want me to have two pots… I guess they just weren't aware [of having to] buy the second one. It wasn't anything against me; it was just like they weren't thinking about it."

– Daughter of lesbian moms, age 17, (Epstein et al, 2009)

There are other days that provide teachers and early childhood educators with the opportunity to acknowledge and celebrate family diversity. These include Family Day, the Ontario-wide statutory holiday in February, Pride Day, which usually happens in late June or early July, and recently, LGBTQ families internationally declared the first Sunday in May as International Family Equality Day, celebrated in Canada as International Family *Visibility* Day.

Mother's/Father's Day. Mother's Day and Father's Day are often difficult days for children whose families do not match traditional norms. This can include LGBTQ families, and others. Some people choose not to celebrate these days, or to transform them into something else – perhaps a celebration of the people who take care of us.

Think carefully about the activities you plan for these days. Imagine a whole range of family configurations and how the children who live in these families will relate to your plans. Try and use the terms mom and dad less and parents or caregivers more. Also have materials available if children want to make more than one card or craft, or to celebrate a caring adult of their choice (or more than one), who may not be a mother or father.

In 2010, the LGBTQ Parenting Network released a series of cards created for children in LGBTQ families, to recognize and celebrate the uniqueness and diversity of families. "I ♥ " cards were designed to be used as practical tools for talking about LGBTQ family issues in early childhood settings.

Valentine's Day. Valentine's Day is often celebrated in a highly gendered way, with lots of emphasis on boys and girls and heterosexuality. Think about how you might celebrate this day in a less gendered, less heteronormative way. For some examples of LGBTQ-positive Valentines, see www.lgbtqparentingconnecion.ca

Family Tree Exercises. The Family Tree exercise is another common classroom activity that can become difficult for children with families that do not match traditional norms. Typically these exercises assume that all children live in conventional nuclear families. The fill-in-the-blank format with spaces for a "mom," "dad," "grandparents," and so on, often exclude children of LGBTQ-led families.

"In my daughter's class they were doing family tree exercises and the kid of a lesbian put up her hand and said, 'What if you don't have a dad?' and the teacher said, 'Of course you have a dad, everyone has a dad.' and the kid said, 'Well, what if you don't have a dad?' and the teacher said, 'What, were you born in a jar?"'
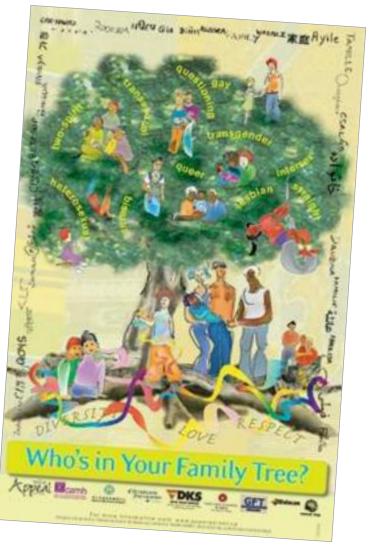
– Queer mom

The Queering the Family Tree Poster was designed to celebrate the diversity of families within which children live and thrive. This bilingual (English/French) poster was designed to represent and celebrate the diversity of families, to bring visibility to LGBTQ-led families and to generate discussion about homophobia and discriminatory attitudes towards LGBTQ-led families in schools and daycares.

The poster's border translates the word family into 35 languages. To date, more than 30,000 copies of the poster have been printed and are on display in schools, community centres, health centres and hospitals, daycares, libraries and homes across Canada, the United States, and as far as Australia.

In 2011, as part of Family Day celebrations, the LGBTQ Parenting Network invited parents and teachers to re-design the traditional family tree exercise, to create ways of talking about family that include a broader range of family structures.

International Family Visibility Day. In 2012, LGBTQ organizations around the world declared the first Sunday in May as an international day to celebrate family diversity. In Canada, International Family Visibility Day was celebrated with creation of a colourful poster and development of some lesson plans for K – 6 children. The materials are suitable for use in K – 6 classrooms, as well as child care centres, home daycares and drop-ins.

For information about the posters, valentines and curriculum materials mentioned above, go to: www.lgbtqparentingconnection.ca

The Importance of Books

"There may be one book, or two books with queer families in them, and then all these other books with heterosexual families."

– Klaudia Meier, family support practitioner

Books that are inclusive of LGBTQ people and families, like visuals, go a long way in creating an environment that is welcoming. Go to: www.lgbtqparentingconnection.ca/socialchange/ ChildrensBookList.cfm for a list of books that honour and celebrate sexual and gender diversity and a wide range of family configurations. Make these books an integral part of your library. Use them in everyday activities. Read them aloud and encourage children to look at them.

Tip Sheet: Sharing LGBTQ-Inclusive Books with Young Children

Developed by Macaulay Child Development Centre Early Literacy Specialists and LGBTQ Work Group (Included with permission)

Early Literacy Tips: Sharing Books

◆ Choose a book that you like, and that you think your group will enjoy.

◆ Choose a story that is developmentally appropriate in terms of vocabulary level, interest, story length, etc.

◆ As with any children's book, be prepared to change the story to respond to the needs of the group. For example, you may need to shorten the story.

◆ Play! Involving children in story-telling is a great way to share books. When sharing a toddler book such as "Daddy, Papa and Me", try bringing a pillowcase or a bag of props to build anticipation and interest as you tell the story. When you read the page in the story about the paper airplane, for example, you can pull a paper airplane out of the bag. The page where they are playing ball, pull out a ball, etc. Children might guess what item you are about to pull out, or might take turns holding up an item for the group to see.

◆ Talk with your group about the parts of the story that they find the most interesting. For example, when reading "Who's In a Family?", many three year olds are most interested in the animal families.

◆ Use best practice in early literacy techniques, including using dialogic reading, modulating your voice and intonation for younger children to catch their attention, etc.

◆ Extend book reading to early literacy activities. Ask what their favourite activity is. Invite children to participate in painting or drawing things that they or their friends like. Even young children can benefit from regular opportunities to "scribble draw."

◆ Follow-up stories with child-led play opportunities.

◆ Create an inclusive family mural where children can paint and draw pictures of their family or express other art-based responses to the story. For younger children, adults can scribe (write the words the child attributes to their drawing).

"It's an easy place to start. Having a few resources says we are committed and comfortable and we know you are here… It's important to have books with visible LGBTQ families in them, whether or not you have LGBTQ families using the space already. You are not only doing a favour to those people, but it is useful for everyone to see a broader diversity. It enriches the library as a whole."

– j wallace, educator

Just because a book has LGBTQ content, does not mean that it is inclusive in other ways. Learn to be critical of children's literature.
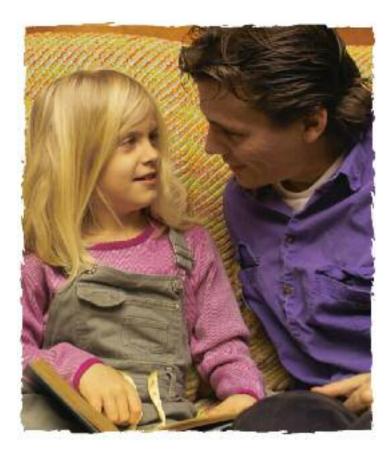
"The first wave of published LGBTQ children's books challenged the notion that all parents were heterosexual and that was a very positive step forward. As with many children's books, these books often lacked diversity in other areas. Many of the books featured exclusively middle class, white families. It is important to have a collection of children's books in our programs that address many areas of diversity. We try to challenge underlying stereotypes in children's literature through discussions with the children when reading books. For example, 'This family is living in a house. Where else do families live? What is a townhouse/apartment/shelter?' It's important to consider and reflect the reality of all children living in our communities."

– Jo-Anne Robertson, program manager

You won't always find everything you want in one book. Be creative and make changes as you read them to reflect the message you want to send.

"Our daughter's absolute favourite books are not specifically queer and so I've changed the content on the pages to reflect her reality. It's not really a sin to write (or use a label maker in books, says this writer!) For example, in The Cat in the Hat by Dr. Seuss, Sally and Nick (now) have two mothers. In Mercer Mayer's books, the protagonist (with some editing) is sometimes a girl creature and sometimes a boy creature and some-times both."

– Elizabeth Ruth, a Toronto-based writer and queer parent

VIII Being An Ally: Becoming An Advocate

As an LGBTQ positive service provider you are in the position to advocate on behalf of LGBTQ families with other parents or children, co-workers, management, and with other service providers. This is known as being an ally – being willing to stand up for the rights of LGBTQ people when necessary.

"One time two kids wanted to play at being two daddies. My co-worker said, 'No, it should be a daddy or a mommy.' I told her she couldn't say that, whether she likes it or not, it's in the law. I reminded her that we don't complain when two kids both want to be the baby."

– Early childhood educator

"We had a good experience in the hospital. I give the midwives credit for that. They found an article about transgender men giving birth and had the nurse read it in advance. They had everyone on the floor participate in positive space training before we got there. They had signs put on our door: "STOP. READ THIS". The whole time we were there I only heard one reference to mom. It was remarkable. The midwives did amazing advocacy work."

– Queer and trans dad

Macaulay Child Development Centre Early Literacy Specialists and LGBTQ Work Group offer some tips on acting as an advocate in an early childhood education setting: (Included with permission)

Question: How do I respond to a parent who is offended by LGBTQ-inclusive books?
Answer: Including same-sex families might be a new idea for some families. You can ask a family what they are concerned about, or ask what they mean when they say they are offended.

For example, a family might worry that something as simple as a picture of two moms might encourage their daughter to be a lesbian. You can reassure parents that we cannot influence sexual orientation with picture books, but picture books can help families and children feel respected and included if we read stories which reflect the lives of all families in our communities.

Some families who express concerns about LGBTQ-inclusive books might be asking questions because they are already concerned about their child's behaviour when it comes to the parent's expectations of gender norms. For example, a parent might worry if their son plays with dolls, or if their daughter shows an interest in vehicles. This can be an opportunity to help parents understand that it's ok for children to play with a variety of toys, in a variety of imaginary play roles.

Question: A parent has explained that their child cannot be in the same room as a book which shows same-sex parents because same-sex relationships are against the parents' religion. How should I respond?
Answer: First, acknowledge the parent's comment. For example, "I hear your concern; however, our organization is inclusive of all children and families. We honour human rights, and welcome all families to our programs. Our Race Relations and Equity Policy and Procedures guide our practices." You can add that the Ontario Human Rights Code prohibits discrimination based on sexual orientation.

Question: We don't have any LGBTQ families in our program. Do we still need to include these books in our program?
Answer: Although it might appear at first glance that there are no LGBTQ families in a particular program, this assumption is often wrong. Not all LGBTQ parents will feel safe to come out in their communities, or they may worry that sharing this information with others could create problems for their child. This can be even more difficult for individuals who already experience discrimination. Including LGBTQ books in your program helps families know that all parents and children are accepted, which can help families feel safer.

Question: When it comes to being inclusive of LGBTQ families, what does the Ontario Human Rights Code actually say?
Answer: The Ontario Human Rights Code requires all staff to be inclusive of all families, regardless of race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status or disability. You can tell parents that program procedures are based on these policies and offer to show them the policy. Respectful dialogue is essential. If a parent becomes angry or disrespectful, you can gently but firmly let them know that you would like to continue the discussion with them when they are feeling calmer. Report the situation to your supervisor, who should offer their support, and help with next steps.

Reflection: You are a staff member at a child care centre. The parents of an infant, tell you that they do not want your gay male colleague to change the diapers of their infant. What do you do?

IX Building Organizational Commitment

The Importance of Leadership

Leadership can come from anywhere. It may be a staff person who decides that issues of LGBTQ inclusion are important and initiates organizational change. It may come from service users who demand change or from management who understand the importance of these issues. Real change can only occur when changes take place in the whole organization or institution, involving all members of the community (children, parents, program staff, support staff, administrators, and management).

"When people in leadership waver, if they don't know what to do if Johnny wears a dress, if they don't know if it's okay or not, that's a problem."

– Trans parent

Promising Practices:
Macaulay Child Development Centre LGBTQ Work Group

The Macaulay Child Development Centre has consistently strived to be an inclusive organization. In 2011, following staff training that identified the need for further attention to LGBTQ inclusion, a small group of frontline staff formed the LGBTQ Work Group. The group wanted to respond to discomfort amongst staff members, both those who were not comfortable dealing with the issues, and those who were LGBTQ-identified themselves.

The Work Group met with individual teams and had some really good, and sometimes hard, conversations. They had open discussions where people could be honest about how they felt, as well as challenge each other. They also reinforced the values and standards of the organization – that regardless of personal values, all families are welcome. Staff members were reassured that if a family became upset about LGBTQ information in the agency, management would support them.

In one case a parent ripped a poster down from the wall. This incident was addressed by a staff member and supervisor. The message to the parent was, "Tearing down the poster is not okay. At Macaulay we value inclusion. These images are important because we want to reflect all families. We're sorry you feel uncomfortable, but we need to keep this poster up." It was a difficult message for the parent to hear, but the family chose to stay at the centre.

The Work Group is a coming together of many different people with different experiences. Some are gay, some have gay children, and some just feel strongly that it is an important area of inclusion. There are different perspectives but everyone wants to make it better for staff and for children and families. Management supports the committee by freeing up time, by providing resources, by agreeing to offer more training. It has been amazing to see people shift. One staff member started out very resistant and now she is insistent that we be inclusive at Macaulay, there are no excuses. She is passionately expressing the kind of attitude and behaviour that the organization values. Some staff members have come out to their teams. The existence of the Work Group reduces the fear and stigma – it demystifies and de-stigmatizes. "We have always had gay and lesbian staff, but now more people are out in the workplace."

The group organized staff training on identifying and addressing homophobia. One of their latest initiatives has been to purchase and distribute new children's books featuring LGBTQ families with more engaging and age-appropriate narratives. Frontline staff members are visiting every team site and doing training about how to use the books in programs, including how to handle
a wide range of responses from children and families. Thanks to the efforts of the LGBTQ Work Group, Macaulay has made big changes in a short period of time. With the ongoing support and responsiveness of the LGBTQ Work Group, we expect to continue to improve LGBTQ inclusion at Macaulay.

Policy Statements, Practice Guidelines and Vision Statements

Policy statements, practice guidelines and vision statements can be key to developing an inclusive environment in an organization. It is extremely important that board members and management actively participate in developing and implementing policies and procedures that support LGBTQ inclusion.

Policies with regards to hiring and training are also essential. On-going training, staff development, and support for a culture of learning, are necessary to ensure that board, management and staff continues to expand their understandings and practices.

Below are some examples of inclusive policy statements:

Queer Parenting Programs at The 519

Our Mandate:

Queer Parenting Programs at The 519 honor and celebrate sexual orientation and gender diversity in families. We promote and foster the health and well-being of: lesbian, gay, bisexual, transgender, transsexual and queer parents, prospective and expectant parents, grandparents, caregivers, our children and extended families. We also promote and foster the health and well-being of families with young gender independent children. We do this by providing a variety of family planning, prenatal and family support programming and events, as well as personal support and community education.

Our Vision:

Our Queer Parenting Programs strive to create communities where all families are celebrated and have what they need to flourish.

Beliefs and Values

◆ We believe in and support the healthy lifecycle of all of our children, parents, grandparents, caregivers and extended families.

◆ Our programs work to create healthy supportive spaces in our queer communities and in communities at large for our families and our children.

◆ We provide community and capacity-building opportunities within a social justice framework and understand the complexities of different oppressions negatively affecting the social determinants of health for our families.

◆ In the face of this our programs celebrate the many identities, family configurations and family origin stories in our communities, and operate from the principle that families define themselves

Association of Ontario Midwives (AOM)

Statement on Diversity, Equity and Inclusion.

The purpose of this statement is to express the AOM's values regarding equity and diversity within the Association and to guide the AOM's work with and on behalf of midwives.

The AOM recognizes the dignity and worth of every person and is committed to creating an environment that is safe, accessible, inclusive and respectful of members, Board members, staff, and the Ontario public.

The AOM recognizes that inequality is maintained by discrimination against and systemic marginalization of people based on, but not exclusive to, ability, age, class, socioeconomic status, educational background, ethnicity, gender, geographic location, language, race, religion, reproductive and parenting decisions and sexual orientation.

We are committed to harness our strength in diversity by fostering equity and inclusion through:

◆ Developing policies, protocols, programs and services that seek to eliminate systemic barriers and promote inclusion in every facet of our work

◆ Understanding, accepting and increasing diversity within the Association, staff, and clients of midwifery care

◆ Creating opportunities for dialogue and self-reflection and supporting a continued commitment to social justice and anti-oppression principles

◆ Seeking out and applying the perspective of those who are marginalized in recognition that they are integral to the processes of assessment and development of equity strategies

◆ Respecting and valuing everyone for their contribution, celebrating peoples' differences and providing equality of opportunities for all. In pursuit of these goals, the AOM adheres to the Ontario Human Rights Code.

Approved by the AOM Board: November, 2001

The Importance of "Out" Staff

The visibility of "out" LGBTQ staff members goes a long way in increasing the comfort of LGBTQ people to engage with a program. The comfort level of staff to "come out" is a good indicator of the climate of an organization. If staff members are afraid to disclose their sexual orientation and/or gender identity at work, it can mean there is internal organizational work to be done.

"Lots of trans and genderqueer people fear they wouldn't be hired in a setting that serves children. You are not the person who is being imagined. What does a labour and delivery nurse look like? What does a child care worker look like? What does an elementary school teacher look like? What does a midwife look like?"

– Jake Pyne, community-based researcher

Reflection: *Review your organization's hiring policies. Do you ask questions in hiring interviews about people's familiarity and ability to work with LGBTQ communities? Do you recognize this as a required area of competency?*

Training

Most training programs in early childhood education lack content related to gender, sexuality and family structure. These subjects are rarely included as part of compulsory curriculum.

Discussion of these issues needs to begin in pre-service training, and continue on the job. Everyone in an organization needs training related to LGBTQ inclusivity. This includes all management and all staff.

"All the players in the system need to be trained. Not just managers or just midwives. The ultrasound person, the person who makes you pee on the stick, everyone."

– Lori Ross, LGBT parenting researcher

It is important that training be mandatory, even though this can cause resistance.

"When training is mandated, you risk making people uncomfortable… discomfort is a necessary part of change. Doesn't mean you assume it, but you should expect and anticipate it. Change does not happen without people being challenged in new ways."

– Jim Howes, program manager

It is critical that workshops offer participants the opportunity to honestly express their thoughts and feelings. People need to be able to work through their feelings on these issues, and cannot be expected to transform deeply-held beliefs in one workshop.

"When training gets done, it's important to be able to hash it out, to disagree, and to be able to say the things that should never be said in front of clients. In a training setting people have to be able to say, 'I think it's wrong that Johnny's wearing a dress.' and then to have a discussion with their co-workers."

– Jake Pyne, community-based researcher

Becoming an LGBTQ inclusive organization/staff member is an ongoing process.

"You don't have to be an expert, training means starting a conversation – it doesn't have an end… Even though you did an anti-bias workshop then, there's always a new opportunity. You're not done. You're just starting. Learning is lifelong."

– Trish Hunt, family support practitioner

Sometimes collaboration on training with other organizations or programs makes both practical and economic sense, particularly in more isolated geographic regions.

"Collaboration creates learning. People become aware of others in their community. One person brought up issues of international adoption, another was a queer single dad, another woman identified as bisexual and had a partner who was transitioning. I looked around and realized how many LGBTQ parents there are."

– Trish Hunt, family support practitioner

Organizational Checklist for LGBTQ Inclusivity

◯ Does your mission or values statement explicitly welcome LGBTQ individuals and families?

◯ Does your organization's non-discrimination statement clearly ban discrimination on the basis of sexual orientation and gender identity for staff and clients?

◯ Are you aware of board, management or staff members who are openly LGBTQ-identified?

◯ Are LGBTQ clients and families treated with respect and fairness by your organization?

◯ During job interviews do you ask candidates any questions about their experiences or comfort working with LGBTQ clients or families?

◯ How much LGBTQ-specific content is in your organization's orientation for new staff?

◯ Does your organization offer training to its employees on working more effectively with LGBTQ communities?

◯ Are staff trained to use inclusive and affirming language in all interactions with clients and each other?

◯ Are the people who are the first point of contact (front line staff, receptionists, outreach workers) trained to use inclusive language?

◯ Do you have posters, art, magazines, or handouts in your organization that represent and welcome LGBTQ people?

◯ Do your organization's forms use inclusive language and allow room for a diversity of family structures?

◯ Does your organization's website, brochures and other written materials explicitly identify your organization's commitment to working with LGBTQ individuals and families? Do they include representations of LGBTQ individuals and families?

◯ To what extent is your organization proactive in working with other related agencies to prevent discrimination against LGBTQ individuals and families?

◯ What initiatives is your organization proud of in its service to LGBTQ individuals and/or families?

X Conclusion

A key idea addressed in this resource is about not making assumptions about the people you work with. With openness you create space for people to tell you about themselves, to tell you about their identities and their experiences and what is important to them as they make use of your programs or services.

As professionals we need to face the fear of doing something new, trying on new language or attempting a new activity, procedure or approach. We encourage you to confront the fear of change and explore new territory.

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Resources

Please visit the LGBTQ Parenting Network's website to view more resources, including:

◆ Posters

◆ Brochures, Fact Sheets, Guidebooks

◆ Curriculum ideas

◆ A list of LGBTQ positive children's books

◆ A list of LGBTQ parenting films

◆ Cards for Valentine's Day, Mother's & Fathers's Day

◆ A list of LGBTQ positive service providers

◆ Journal article, books, and relevant websites

www.lgbtqparentingconnection.ca/socialchange/PreconceptionToPreschool.cfm

Key Websites

COLAGE (Children of Lesbians & Gays Everywhere)
Resources for children of lesbian, gay, bisexual and trans parents.
www.colage.org

GLSEN (Gay, Lesbian & Straight Education Network)
The leading U.S. education organization focused on ensuring safe schools for all students.
www.glsen.org/cgi-bin/iowa/all/home/index.html

LGBTQ Parenting Network, Sherbourne Health Centre
Promotes the rights and well-being of lesbian, gay, bisexual, trans and queer parents and caregivers, prospective parents and their families through education, advocacy, research, social networking and community organizing. A network of several thousand families and individuals in and around Toronto. The Parenting Network works with local, provincial, federal and international organizations and communities.
www.lgbtqparentingconnection.ca

PFLAG Canada (Parents, Families and Friends of Lesbians and Gays)
Provides support and education to LGBTQ people, their friends and families. Find your local chapter and view extensive resources. www.pflagcanada.ca

Positive Spaces Initiative of OCASI (Ontario Council of Agencies Serving Immigrants)
Aims to share resources and increase organizational capacity to more effectively serve LGBTQ newcomers.
www.positivespaces.ca

Queer Parenting Programs, The 519 Church St. Community Centre
Promote and fosters the health and well-being of lesbian, gay, bisexual, trangender, transsexual and queer parents, prospective parents and expectant parents, grandparents, caregivers, their children and extended families. Provide a variety of family planning, pre-natal and family support programming and events, as well as psychosocial support and community education. www.the519.org

Rainbow Health Ontario
A province-wide program designed to improve access to services and to promote the health of Ontario's Lesbian, Gay, Bisexual, and Trans (LGBT) communities. This site includes searchable databases of trainers, resources, and research. www.rainbowhealthontario.ca/home.cfm

Re:searching for LGBTQ Health Team, CAMH (Centre for Addition and Mental Health)
A research team headed by Dr. Lori Ross. The team has partnered with the LGBTQ Parenting Network to carry out several research projects related to LGBTQ parenting. www.lgbtqhealth.ca

Safe@School
Launched in 2007 to foster positive systemic change for teachers, students, and the education system overall. A multi-faceted provincial initiative designed for Ontario teachers to foster safe, strong and free schools and communities. Funded by the Ontario Ministry of Education. www.safeatschool.ca

The Center for Adoption Support and Education
Produces resources, including activity books, for adopted children and their families. www.adoptionsupport.org

The Out and Proud Program, CAS (Children's Aid Society of Toronto)
Works to ensure that CAS services are open, inclusive, safe, affirming and positive for lesbian, gay, bisexual, transsexual, transgender, two-spirit, intersex, gender non-conforming, queer and questioning (LGBTQ) children and youth, as well as LGBTQ families, employees, volunteers and care providers.
www.torontocas.ca/main.php/?cat=40

Useful Resources related to LGBTQ families

Donor Insemination Guide. (COLAGE) Children of Lesbians and Gays Everywhere.
This groundbreaking publication captures the perspectives of donor-conceived youth and young adults who were raised by lesbian, gay, bisexual, transgender or queer (LGBTQ) parent. The DI Guide offers testimonials in order to answer the questions and address the concerns of current and future generations of donor-conceived children. It is also an invaluable handbook for current and future LGBTQ parents, as well as teachers and medical professionals.
www.colage.org/resources/for-lgbtq-parents/donor-insemination-guide/

It's Elementary: Talking about gay issues in schools. GroundSpark.
A guide to community organizing, professional development and k-8 curriculum. www.groundspark.org

Kids of Trans Resource Guide. (COLAGE) Children of Lesbians and Gays Everywhere. Downloadable PDF resource guide for the children of trans parents. Includes discussion of terms; challenges of parents transitioning; dealing with transphobia; the benefits of having a trans parent; and resources. www.colage.org/resources/kot/

Promising practices in adoption and foster care: A Comprehensive Guide to Policies and Practices that Welcome, Affirm and Support Lesbian, Gay, Bisexual and Transgender Foster and Adoptive Parents.
Human Rights Coalition (U.S.-based)
A guidebook for adoption/fostering workers and agencies that offers concrete and practical suggestions for working effectively with LGBT foster and adoptive parents. Includes sample policies and tips from leaders of welcoming agencies, researchers in the field and LGBT adoptive and foster parents. www.hrc.org/files/assets/resources/HRC_Foundation_Promising_Practices_Guide_3rd_Edition_Color.pdf

Questions & Answers: Gender Identity in Schools.
Public Health Agency of Canada.
Addresses the most commonly asked questions regarding the gender identity of youth in school settings. Aims to assist educators, curriculum and program planners, school administrators, policy-makers and health professionals in the creation of supportive and healthy school environments for youth struggling with issues of gender identity. www.safeschoolscoalitionvictoria.org.au/resource/questions-answers-gender-identity-schools-public-health-agency-canada

Respect and Self-Esteem: Talking About Sexual Orientation and Gender Identity with Our Kids.
Coalition des Familles Homoparentales, Montreal, Quebec. A guide for lesbian, gay, bisexual and transsexual parents seeking advice on how best to talk about their sexual orientation and/or gender identity with their children. Booklet available for free on-line: www.rainbowhealthontario.ca/resources/searchResults.cfm?mode=3&resourceID=1724e0ee-3048-8bc6-e894-5cedef39592d

What Does Gay Mean? National Mental Health Association.
How to talk with kids about sexual orientation and prejudice. www.nmha.org/whatdoesgaymean

W.I.S.E. UP Power Book. The Centre for Adoption Support and Education.
A handbook designed for foster and adopted children to manage their feelings and answer the questions, comments, and curiosities of others about being adopted. www.adoptionsupport.org

Family Planning and Prenatal Care

The LGBTQ Parenting Network at the Sherbourne Health Centre and Queer Parenting Programs at the 519 Community Centre offer a variety of **family planning courses** for LGBTQ people. www.lgbtqparenting connection.ca/programs.cfm

Tip Sheet for Midwives - Providing Care to Lesbian, Bisexual and Queer (LBQ) Women. Tip Sheet for Midwives – Providing Care to Trans Men and All "Trans Masculine Spectrum" Clients. Association of Ontario Midwives, in collaboration with community members. http://lgbtqparentingconnection.ca/resources.cfm?targetGroupID=&keywords=&subjectID=51%20%20%20%20%20%20%20&mode=2

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Supporting a Broad Range of Gender Expression in Children

RHO Fact Sheet: Supporting Gender Independent Children and Their Families www.rainbowhealthontario.ca/admin/contentEngine/contentDocuments/Gender_Independent_Children_final.pdf

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Relevant Legislation and Policies

Early Learning for Every Child Today: A framework for Ontario early childhood settings
Best Start Expert Panel on Early Learning, January, 2007.
www.children.gov.on.ca/htdocs/English/documents/topics/earlychildhood/early_learning_for_every_child_today.pdf

Ontario Human Rights Code
Part 1: Freedom from Discrimination
www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_90h19_e.htm

UN Convention on the Rights of the Child – Article 2
www2.ohchr.org/english/law/pdf/crc.pdf

The Guiding Principles of Family Support (FRP Canada)
www.toronto.ca/firstduty/guide/frp_guiding-e.pdf

Challenging Homophobia and Heterosexism: A K-12 Curriculum Resource Guide, Toronto District School Board, Equitable and Inclusive Schools Team, 2011. www.tdsb.on.ca/_site/ViewItem.asp?pageid=6350

Resources and information for people who identify as Aboriginal and LGBTQ

Two-Spirited People of the 1st Nations
http://www.2spirits.com/

Article: Gay Aboriginal Parents Off-Reserve: Strangers in Toronto! http://www.examiner.com/article/gay-aboriginal-parents-off-reserve-strangers-toronto

The Spectrum Center
http://spectrumcenter.umich.edu/article/resources-and-information-native-american-lgbtq

Parents, Families and Friends of Lesbians and Gays (PFLAG)
http://community.pflag.org/page.aspx?pid=470