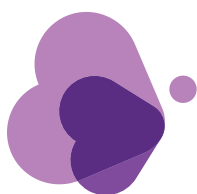# HELPING
LGBTQI+
YOUTH WITH CARING

INTERVENTION GUIDE

**Jasmin Roy
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RBC®

CREDITS

HELPING
LGBTQI+
YOUTH WITH CARING

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INTRODUCTION [by Michel Dorais]

It is surprising that there has never been an intervention guide for LGBTQI+ youth — until now. There is a significant need and many issues still need to be addressed, whether we work in schools, youth protection, community organizations or in the health and social services sector.

This guide was developed based on the content of the École d'été sur les jeunes LGBTQI+ (LGBTQI+ Summer School), held virtually in May 2021. This event brought together 15 specialists working in research and intervention with these youth and 700+ participants from 20 countries (based on the information collected).

The main partners of this event were the Centre de recherche universitaire sur les jeunes et les familles (CRUJeF) of the CIUSSS de la Capitale-Nationale, the Jasmin Roy Sophie Desmarais Foundation, Université Laval/Laval University and GRIS-Québec. The event took place under the patronage of the Canadian Commission for UNESCO (CCUNESCO).

To the best of our knowledge, this school, which reached more than 700 people, was a first, as it was free and accessible throughout the French-speaking world to anyone with an internet connection. Held on May 17, 2021, the International Day Against Homophobia and Transphobia, the title of the event was "Relational Skills to Prevent Bullying."

It had two main objectives: to better understand and address the stigma experienced by LGBTQI+ youth; and to promote the well-being of these youth through intervention, in particular, the development of healthy social and emotional lifestyles in various living environments.

The guiding theme of this document is caring and proactive support for LGBTQI+ youth and their environments. To achieve this, we will explain how to develop knowledge, soft skills and know-how that are relevant to the realities experienced by LGBTQI+ youth today.

The content of this guide is divided into three sections: essential knowledge in order to understand the problems that LGBTQI+ youth may face and which require intervention; soft skills to be developed in order to carry out this intervention with empathy, openness and caring; lastly, know-how to be put into practice, i.e. skills to be developed in order to intervene with these youth and their environments and to foster respect for their individuality and rights as well as their resilience and ability to improve their own lives. The main aim throughout this guide is to promote an inclusive society for LGBTQI+ youth.

LGBTQI+ VOCABULARY [by Michel Dorais]

In order to address sexual and gender diversity in a respectful and inclusive manner, we need to use appropriate, accurate and non-judgmental vocabulary. For this reason, it is important to begin with some explanations about this topic.

The acronym **LGBTQI+** (which stands for lesbian, gay, bisexual, trans, questioning or queer, intersex person) may suggest that these people or communities are a unified whole, which is not the case. There is a great deal of diversity within the LGBTQI+ community. For example, most people who have homosexual desires or behaviours do not identify as homosexual or bisexual. In addition, younger generations tend to define their identities and locate their attractions outside the binary categories of heterosexual versus homosexual or transgender versus cisgender, giving rise to new words and concepts, which are important to understand. This glossary does not claim to cover all the ways of referring to these realities, which are constantly changing. For educational purposes, it focuses on the most common usages in the English-speaking world.

SEXUAL AND GENDER DIVERSITY GLOSSARY[2]

COMING IN: Self-disclosure regarding whom one is in terms of sex or gender, or who one desires (sexual orientation).

COMING OUT: Disclosure to others regarding whom one is in terms of sex or gender, or who one desires (sexual orientation).

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1 - The Social Organization of Sexuality, E.O. Laumann, J. Gagnon, R.T. Michael & S. Michaels, Chicago Un. Press, 1994, pages 298 and onwards.

2 - These definitions are mainly taken from *Nouvel éloge de la diversité sexuelle*, M. Dorais, with the contribution of S. Breton, VLB éditeur, 2019, pages 215-223.

SEXUAL AND GENDER DIVERSITY GLOSSARY[2]

SEX: Sex refers to a person's anatomical and physiological characteristics or attributes (but the person may not recognize these characteristics or attributes as their own).

– **ANATOMICAL SEX**: Anatomical, biological and physiological characteristics of a person who is identified or physically identifiable as male, female, intersex or transsexual.

– **SEX ASSIGNED AT BIRTH**: Sex shown on the birth certificate, usually based on the appearance of the newborn's external or internal sexual organs. Possibilities: male (human male) or female (human female) and, in a small but growing number of countries, other or undetermined sex.

– **SEXUAL IDENTITY**: This refers to sex belonging, in other words, the awareness and deep conviction of belonging to a sex category, whether or not it is consistent with the sex assigned at birth or the anatomical sex. Due to the fact that "gender" is sometimes misunderstood as "sex" in English, "gender identity" is often confused with "sexual identity."

– **INTERSEX PERSON**: Person born with male and female physiological characteristics. For example, there may be a mismatch between external genitalia, internal genitalia, secondary sexual characteristics, hormones and chromosomes. This term replaces the term "hermaphrodite," used in the past, and the more recent term "intersexual." There are also infants born with an "undetermined" or "ambiguous" sex; this ambiguity will generally decrease at puberty. In both cases, it is now recommended to let these children develop naturally, without invasive interventions, unless their health is at stake.

– **TRANSSEXUAL PERSON**: A person who has changed or wishes to change their anatomy through hormonal or surgical procedures so that their body better aligns with their sexual identity. This term is preferred to "transgender person," since "transsexual" actually refers to sexuation and not sexuality.

SEXUAL AND GENDER DIVERSITY GLOSSARY[2]

GENDER: Gender refers to the characteristics other than anatomical and physiological characteristics of a person, specifically, their ways of being, depending on whether they are considered masculine, feminine, neutral (a bit of masculine and a bit of feminine) or androgynous (both masculine and feminine).

– **GENDER EXPRESSION**: Display or self-expression of a person's gender or gender identity, including their appearance, clothing, behaviour, gestures and attitudes. In short, it is the gender presented to others.

– **GENDER IDENTITY**: A person's internal and deeply felt sense of their gender. This perceived gender may be feminine, masculine, neutral, androgynous, non-binary or queer (challenging and transgressing gender norms), trans* (crossing genders), fluid (inclined to go from one gender to another, shift or alternate between more than one gender), neutrois (not identifying with any gender), demi-gender (partly one gender), agender (not within gender binarity), bigender (expressing two genders) or even outlaw (a third gender, not within the male or female continuum).

– **SOCIAL GENDER**: Gender presumed by others based on a person's assigned sex or anatomical sex.

– **MISGENDER**: To refer to an individual using a gender that does not correctly reflect the gender with which they identify.

– **CISGENDER PERSON**: An individual whose gender and sex identity aligns respectively with their sex assigned at birth and with the gender traditionally expected for individuals of this sex (for example, a masculine man, a feminine woman). It is used as an antonym of transgender.

– **CISSEXISM OR CISGENDERISM**: Prejudice that every person is, or should be, cisgender (see above definition of "cisgender") and that being cisgender is superior or preferable to being transgender.

– **GENDER CREATIVE PERSON**: A person who breaks cultural or social norms and standards regarding the expected expression of their gender, which should "align with their anatomical sex." Preferable term, rather than "gender non-conformity" or "gender non-conforming," which may be perceived as pejorative insofar as they imply that people "are not"…

SEXUAL AND GENDER DIVERSITY GLOSSARY[2]

- **TWO-SPIRIT PERSON OR TWO-SPIRIT BEINGS** : Since 1990, translation of the terms used by North America's Indigenous peoples to refer to the presence of both male and female spirits in the same body. Today, two-spirit people may sometimes call themselves gay, lesbian, bisexual, trans* or adopt plural identities.

- **NON-BINARY OR GENDER-FLUID PERSON**: A person who challenges or transgresses binary norms and gender stereotypes, whether for the purpose of personal liberation or artistic, social or political protest.

- **TRANSGENDER PERSON**: A person whose perceived gender or gender identity does not align with the sex assigned to them at birth based on the masculine/feminine and male/female binary system, or who shifts or has shifted from one gender to another (permanently or not).

- **TRANS PERSON***: A generic term that can include transsexual, transgender, two-spirit, intersex, non-binary or gender-fluid people.

- **TRANSGENDERISM**: Transition from one gender to another, irrespective of these genders and the departure and arrival point.

- **TRANSPHOBIA**: A set of attitudes that are harmful to trans* people.

- **TRANSITION**: A complex, usually multi-phase process that involves harmonizing a person's anatomy and appearance with their gender identity. The transition may be social (their identity for others), legal (name or sex designation on official documents) and physical (hormonal therapy or surgeries). These different steps are independent of each other: for example, a person may make a social transition without having undergone medical procedures.
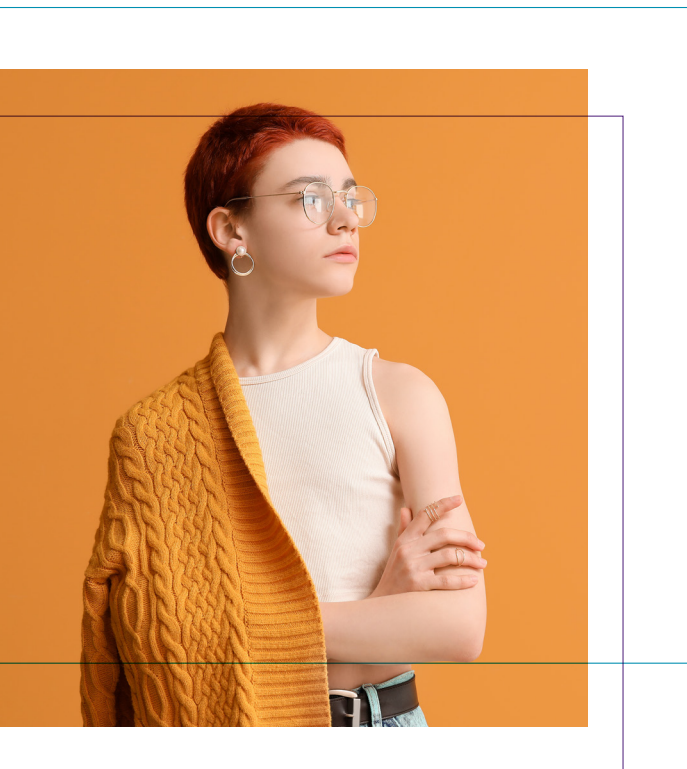
SEXUAL AND GENDER DIVERSITY GLOSSARY[2]

SEXUALITY (OR SEXUAL ORIENTATION): In human beings, sexuality is expressed through sexual desires or fantasies, sexual conduct or behaviour, and sometimes by identification with those who share them.

– **ASEXUALITY**: Lack of sexual attraction in a person.

– **BISEXUALITY**: Sexual attraction, to varying degrees, to both males and females.

– **HETEROSEXISM**: Attitude assuming that any person is or should be heterosexual (until proven otherwise) and assertion that heterosexuality is superior or preferable to other sexual orientations.

– **HETEROSEXUALITY**: Sexual attraction, to varying degrees, to people of a different sex from their own.

– **HOMOPHOBIA**: A set of prejudicial attitudes towards gays (gayphobia), lesbians (lesbophobia) or bisexual people (biphobia) and more generally towards anything that suggests or expresses homosexuality.

– **INTERNALIZED HOMOPHOBIA**: Socially induced feelings of guilt, shame or low self-esteem related to same-sex attraction.

– **HOMOSEXUALITY**: Sexual attraction, to varying degrees, to people of the same sex.

– **LESBIANISM**: In women, sexual attraction, to varying degrees, to people of the same sex.

– **NON-BINARY/FLUID SEXUAL ORIENTATION (OR ABROSEXUALITY)**: Multiple attractions, possibly fluctuating in their intensity, to people of various sexes. Concept also used by people who consider their sexuality to be unclassifiable.

– **SEXUAL ORIENTATION**: Preferred or exclusive erotic attraction. May be determined by a person's desires, sexual conduct or sense of identity. These aspects may or may not be combined in the same person (for example, homosexual desires and heterosexual practices may be combined).

SEXUAL AND GENDER DIVERSITY GLOSSARY[2]

– **PANSEXUALITY**: Sexual attraction to people of all sexes and genders.

– **SEXUAL PREFERENCES**: Sexual tastes and practices that specify sexual orientation, including appearance, morphology, age and physical, psychological or identity characteristics of preferred sexual partners and according to the sexual activities practiced.

– **QUEER**: A term sometimes used as a unifying synonym for LGBTQI+. It more specifically means the refusal to match binary and categorical labels with regard to sex, gender and especially sexual orientation.

Since there are many ways to determine sex, gender and sexuality (within the meaning of sexual orientation), every individual may also identify themselves in different and even changing ways during their lifetimes, so it is best not to assume anything in this regard. For example, transsexual or transgender people may identify as such or prefer to be referred to by the sex or gender they are now. The proliferation of alternative identities among younger generations should encourage the general practice of asking the question: "**How would you like me to refer to you?**" The best solution is to always ask young people what their preferred first names or pronouns are; in short, those that should be used to respectfully address them.

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KNOWLEDGE PRIOR TO INTERVENTIONS WITH LGBTQI+ YOUTH AND THEIR LIVING ENVIRONMENTS
[by Michel Dorais]

Knowledge about LGBTQI+ youth is drawn from research as well as testimonies. They are not mutually exclusive, on the contrary. Much of the research is based on the collection of experiences or life stories. Knowledge about LGBTQI+ realities is not intangible. In recent years, research on the status of LGBTQI+ people has brought together the populations being studied: in Canada, it is an essential condition for conducting research, benefiting from the trust and support of the groups concerned.

The principle of caring, which has long been recognized in helping relationships, has been adopted by the field of social research, whose stated goal is now to help improve the living conditions of the populations studied. In this sense, hearing and especially listening to the voice of LGBTQI+ people is essential. This is more possible than ever, since groups, associations and organizations that bring together or support LGBTQI+ people have increased in recent decades.

The size of the LGBTQI+ youth population is not insignificant: according to the most recent research in Canada, up to one in four young people under the age of 35 identify themselves under the vast LGBTQI+ umbrella.[3] These figures overlap with those of other countries, such as the United Kingdom, where the number of young people who identify as LGBTQI+ has risen sharply in recent years.[4] The percentages of the LGBTQI+ population vary greatly (up to threefold), depending on how the questions are asked, the context in which they are asked, and whether they relate to sexual desires, sexual conduct or identity based on these desires or behaviours. This aspect has been highlighted by the research *The Social Organization of Sexuality*, by E.O. Laumann, J. H Gagnon and others.[5]

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3 - See the Jasmin Roy Sophie Desmarais Foundation 2017 survey, The values, needs and realities of LGBT people in Canada (sheet 33):
   LGBT+ Realities Survey - Fondation Jasmin Roy

4 - https://yougov.co.uk/topics/relationships/articles-reports/2019/07/03/one-five-young-people-identify-gay-lesbian-or-bise

5 - Chicago University Press, 1994.

Of course, there is also knowledge derived from our own personal or professional experiences. This is called experiential knowledge. Nobody really starts from scratch on any subject. That said, we may have acquired knowledge but may also be aware of our shortcomings or even our prejudices. Our life experiences may in fact support both valid knowledge and falsehoods. Whether they are unconsciously or consciously developed does not change much. So it is important to compare what we know or think we know with factual information, particularly field research. Fair, quality information enables us to dispel — or at least reduce — myths and prejudices.

The following section briefly summarizes what we currently know about the realities of LGBTQI+ youth. To make the content easier to understand, we have avoided using an overly academic writing style. Our sources and references are mainly derived from lectures and their background documents (which we strongly encourage you to consult) given at the Summer School on LGBTQ+ Youth.

SELF-DISCOVERY AND DISCLOSURE TO OTHERS

Although LGBTQ+ youth generally face the same problems as most other children and adolescents, they experience unique situations. First, they belong to a social minority, sometimes even a minority within a minority, for example, if they are trans or non-binary. Secondly, unlike young people who belong to other minority groups, they cannot readily count on their loved ones' support. Youth who are marginalized due to their skin colour or religion can generally find comfort in their parents or loved ones. However, this is rarely the case for young people who discover their same-sex attraction or who recognize in themselves a gender that does not align with their sex assigned at birth. Many parents are ill-prepared to deal with this disclosure; the same is true for many of the peers and adults who socialize or interact with these youth. In addition, before others are able to accept their differences, these youth must first discover and then assert their differences.

For some parents of LGBTQI+ youth, their child's coming out can be a shock, at least at first. The parents may fear misunderstanding or stigmatization in the extended family, neighbourhood or at school. Or they may feel concerned about various issues: their view of their child, their expectations regarding their future or even their beliefs.

Parents of trans or non-binary youth have additional concerns, which may be very anxiety-provoking: the child's first name change or gender change in the civil register or their permanent change in clothes, in order to align with the gender socially assumed by the child. The same applies to decisions about hormone blockers at puberty so that the child does not develop secondary sexual characteristics that they may reject. Some parents may experience grief over someone who used to be their child (whereas from the child or teen's perspective, finally being able to affirm their sexual or gender identity is more of a relief or even a rebirth).

Not being able to receive support can affect the well-being of LGBTQI+ youth. In particular, their development involves steps that other youth do not experience: discovering that they are "different" in terms of their sex, gender or sexuality (called "coming in"), having to reveal it to others ("coming out"), whether to parents and siblings, friends, extended family or other youth at school, or in sports or leisure activities, for example. Coming out is a repetitive process: there will be a great number of them during their youth and later in adulthood (unlike international stars, their first coming out did not make the headlines). Given the taboos and prejudices that still persist in some circles, each time they make a disclosure, they hope it will not lead to rejection or cause a crisis.

The discovery of sexual attraction and sexual or gender identity usually happens during childhood or early adolescence. According to Martin Blais, UQAM Research Chair on Homophobia, over the past 60 years, the average age people come out to loved ones has gone down from 28 to 14 years of age. However, adolescence is a period of life when young people are very emotionally and financially dependent on their families and highly unlikely to survive on their own. They have considerable anxiety about their parents' reactions.

Guilt, shame, stigma and rejection are often among the reactions reported by youth regarding the reaction of relatives, especially parents. Since living with their biological family has become hell, many young people consequently find themselves on the street or thrown out of their homes altogether. Even worse, many young people are subjected to psychological, physical or sexual abuse (for example, through so-called conversion therapy) by the very people who should protect them.

Many LGBTQI+ youth say that after they disclosed their sexual orientation or gender to their parents, their parents' attitudes completely changed. That said, between rejection and complete acceptance (ideally), there is a wide range of possible reactions: denial or willful ignorance, resentment or even violence. Fortunately, parents who were initially closed may eventually move towards a better understanding and acceptance of their children over time. However, this process can be long or even painful. Many parents need more help than their children at this time.

This rejection means that many street youth and young prostitutes are LGBTQI+ youth. According to Professor Martin Blais, 18% of LGBTQI+ youth have experienced homelessness at some point in their lives. They consider the street and survival prostitution as the only solution, at least during this period of their lives — especially since school (the second living environment after the family) is often a place where bullying and violence against LGBTQI+ youth (or suspected of being LGBTQI+) occur. Most LGBTQI+ youth have experienced harassment, bullying and even violence at school. In extracurricular activities, sports, travel in public places and on social networks, bullying is still very prevalent.

Many LGBTQI+ youth never disclose this personal information at school, for fear that it will cause them problems. Being openly LGBTQI+ may not be welcomed, especially since some circles do not make any effort to include LGBTQI+ people. The love and sex lives of LGBTQI+ people are still the subject of taboos and even morbid curiosity in the midst of quality education. The belief that certain practices are exclusive to gay men (e.g., anal sex) or lesbian women (e.g., use of sex toys) is unfounded prejudice, as these practices are widespread among opposite sex couples.

REALITIES SPECIFIC TO LGBTQI+ YOUTH

Even in places such as Quebec, where there are policies to combat homophobia and transphobia in schools, the results are not always convincing. According to Christophe Cornu, head of health and education programs at UNESCO, LGBTQI+ youth are 2 to 7 times more likely to be bullied at school. If young people do not find support in their family for messages of openness conveyed at school, it is likely that these messages will fall on deaf ears. Is it any wonder that many LGBTQI+ youth would rather drop out of school or flee the family home than go through hell every day? Unfortunately, what appears to be a solution for these young people usually turns into a new problem: surviving on the street and by means of temporary fixes, drugs or prostitution will not improve their lot, on the contrary.

Based on their traditions or beliefs, parents sometimes object to addressing sexual and gender diversity in schools. The question is whether the reaction would be the same if racist or white supremacist parents demanded that children of a different colour not be given equal treatment. Schools should promote equality and respect for all students. As the writer Amin Maalouf wrote, "Respecting discriminatory traditions or laws shows contempt for their victims."[6] Discussing homophobia and transphobia in schools helps young people who experience these realities to better understand what is happening to them. It also allows their peers to develop respect and empathy. LGBTQI+ youth do not require special treatment — only the recognition and support needed for their well-being. They are entitled to it.

According to Christophe Cornu of UNESCO, LGBTQI+ teens are two to five times at higher risk of suicide attempts and even completed suicides than other teens. In North America, LGBTQI+ youth are on average five times more likely to have committed at least one suicide attempt than their heterosexual peers.[7] In Canada, one in three trans* youth have thought about suicide in the past year alone.[8] As a result, child protection services are finally beginning to address the impact of homophobia and transphobia. This sometimes faces resistance from religious or political groups that believe LGBTQI+ people of all ages do not deserve social recognition or protection. Some of these groups even advocate so-called "conversion therapies" and convince parents of their necessity, although these activities are unanimously condemned by professional orders as harmful and deadly (and they are even forbidden by Canadian law).

6 - *Murderous Identities*, A. Maalouf, Paris, Grasset, 1998.

7 - Center for Disease Control and Prevention, 2016

8 - Mental Health Commission of Canada, 2015.

The so-called conversion therapies are not only useless but downright harmful, causing extreme distress and anguish in youth who are subjected to them. Neither a person's perceived or expressed gender nor their sexual orientation can be forcibly changed. Any attempt to do so is at best a waste of time and money, at worst a dangerous descent into hell for youth who are then instilled with self-hatred. Internalized homophobia and transphobia that these so-called therapies promote are a tragedy for LGBTQI+ youth: it undermines or destroys their self-esteem. The consequences range from drug and alcohol abuse to anorexia, bulimia or scarification to punish the body and its desires, not to mention risky physical or sexual behavior, depression, suicidal thoughts and behaviours, or even completed suicides.

Religious beliefs or texts considered to be sacred are often cited to justify the parents' rejection of their children's sexual and gender diversity. Without going into detailed debate on this matter, moral and religious principles can also promote acceptance of diversity. Most religions promote respect for human dignity and encourage compassion, social justice and love for one's neighbour. Similarly, they encourage us to treat others as we would like to be treated — not to promote hatred and violence against others (or towards oneself).

Today, most of the texts considered to be sacred are the subject of re-readings and interpretations that put them in the context of the time and circumstances in which they were written. Trying to apply them literally to our era can be risky. For example, legal equality between men and women is given in many countries and slavery is no longer legal in most countries. Furthermore, the corollary of freedom of religion is not to impose one's own beliefs on others. Believers of all religions can contribute in the name of their faith to building a better world. Many religions explicitly encourage them to do so.

Some situations are of particular concern among LGBTQI+ youth. For example, male children or adolescents accused of being "feminine" (the term "effeminate" is an insult to both the feminine, which the expression discredits, and against the individual being belittled) pose significant risks for depression and suicide attempts. They are often the most isolated of all due to the fear of other boys being associated with them. Homophobia and transphobia stem from a sexist and macho ideology.

Young trans* people are still often wrongly assumed to have a mental health condition, although professional and scientific authorities have declared that transidentity is not a mental health condition. Due to their suffering, which may result from what is now called gender dysphoria or incongruence (related to sex), they may require psychological, cosmetic or surgical interventions for their well-being, in order to align with the body they strongly believe to be their own.

We must recognize once and for all that transidentity is by no means a problem in itself, let alone a disease. As Professor Denise Medico points out, in order to develop a positive relationship with who they are and establish themselves in community life, young trans people need the support of their loved ones and environments. A so-called trans-affirmative approach helps these young people flourish in an environment that allows them to live their identity, whatever it may be, through possible changes that this identity may undergo over time and in different situations. Young people who are non-binary in their identity are also likely to encounter misunderstandings that call for greater public awareness and attention to their needs.

Discussing the situation of young trans* people requires some initial nuances. There is a nearly infinite range of possible transitions. Not all young trans* people are at the same stage of their transition. During the process of asserting their gender (depending on where they live and what is available), individuals in the process of transition will have access to a variety of aesthetic, clothes, biomedical and civil procedures. To understand their specificity, it is important to distinguish between them.

The change in their first name, the use of this first name on a daily basis and the permanent adoption of clothing associated with the gender they feel are all examples of social transition. The anatomical transition for people who want a sex change includes hormonal or surgical procedures. These changes may involve modifications of the genitals, face, chest, etc. That said, it is always best not to systematically discuss their hormone intake and body modifications with young trans people, except when absolutely necessary in their follow-up, at their invitation and with their prior agreement. This may indeed be very intrusive and violate respect for their privacy.

Gender identity generally develops around 3 to 4 years of age and many young trans* people are aware of their aspiration from childhood; for others, the age of disclosure is during puberty or adolescence, although they may already have hunches. The desire to be considered a sex other than the one assigned at birth or a gender that does not match their sex (at least by cultural standards) may cause turmoil for these youth and loved ones, especially parents. There is a great lack of knowledge of trans realities, which are just beginning to be more visible culturally, socially and in the media. Due to prevailing prejudices, disclosing an identity involving a transition process (gender, sex or both) is often an agonizing time for trans* youth who wonder how their loved ones will react. They need support at this time.

The situation of young intersex people also needs to receive greater attention, as it is largely unknown. There are a wide variety of situations in which a child is considered intersex. For a long time and even today in many places, intersex was or still is wrongly perceived as an anomaly of nature. Doctors thus suggest or parents request operations or surgical interventions, which do not address any health problems. All these aims to respond to the binary model that a human being is anatomically male or female. Associations of intersex people and their allies are protesting with growing success against these unnecessary mutilations when the health of the individual is not at stake. They rightly demand that their self-determination be respected and that the individual concerned should be old enough to give their consent to what will or will not be done to their body. That is the least we can do.

Although the Internet and social networks sometimes help them overcome loneliness, LGBTQI+ youth often experience moral and physical isolation, especially outside large urban centers. As this isolation tends to reinforce the shame instilled in them, they keep their desires or identities secret. Shame is sometimes instilled very early in childhood when, for example, a little boy learns that being attracted to an individual of the same sex would not be manly, that the masculine prevails over the feminine, that being compared to a girl is insulting, and that no parent would like to have such a child.

Not all youth who discover their same-sex attraction, gender fluidity or creativity fare badly. Some parents are very supportive; some youth seem to be more resilient than others to the difficulties encountered due to their difference. Resilience is the ability to cope with adversity and prevent harmful consequences. This concept was popularized by a Holocaust survivor, Boris Cyrulnik, who strived to understand how Holocaust survivors found a certain balance despite the atrocities.

It is essential to encourage and support this resilience among LGBTQI+ youth, as it will be seen in another section of this document. Resilience may be individual but also collective. The sense of belonging to a supportive community may indeed be decisive for LGBTQI+ youth who feel alone in the world. Being able to join together and unite provides a sense of security that can compensate for rejection or ostracism encountered elsewhere.

There is a lack of awareness about the history of LGBTQI+ realities and identities. Sexual and gender diversity is certainly not a new reality: its display and expression, as well as the reactions it has provoked, have evolved over time. For example, in our culture, debate has been ongoing for more than 150 years about whether homosexuality, lesbianism or transidentity are innate or learned. In particular, the brains and bodies of gay men and events in their family history have been scrutinized to try to determine where their attraction came from — to no avail. As biology professor Sophie Breton has shown, sexual and gender diversity has always been part of nature across animal and plant species. There is no reason to view it as an anomaly, since it is commonplace.

Too much research in the past (and even today) erroneously postulates that homosexual and heterosexual behaviours are mutually exclusive, which is contrary to reality, as bisexuality is more common than exclusive homosexuality. Nevertheless, only a minority of people who have homosexual relationships make their sexual attraction a component of their identity. According to researcher Barry Adam and his team, the main indicator of gay, lesbian and bisexual identity is not having sex with a person of the same sex but having a romantic relationship with them.

9 - See the works by this author in *Nouvel éloge de la diversité sexuelle*, Michel Dorais, with the contribution of Sophie Breton, VLB éditeur, 2018.

10 - *The Social Organization of Sexuality*, op. cit.

11 - B. D. Adam, A. Sears & E. G. Schellenberg, "Accounting for unsafe sex", *Journal of Sex Research* 37 (1), 2000, p. 259-271.

The search for the presumed causes of sexual and gender diversity has long been justified by the desire to prevent it, which is now considered unethical. However, some researchers believe that if LGBT realities were proven to be innate, they would be more socially acceptable. This assumption is contradicted by the facts: it has long been known that skin colour is genetically transmitted without having any impact on racism. The recognition of a human trait as genetic (or not) does not prevent discrimination. Prejudice is at the root of intolerance, ostracism and discrimination.

Recognizing that sexual desires and behaviours can be developed or learned in one way or another would not mean that the individual voluntarily contributes to the attraction they feel. Nobody chooses their identity; only the affirmation of their identity is a decision. For example, many unconscious learnings contribute to culinary, clothing and musical tastes. The same may be true for erotic tastes, which of course may be cultivated — but never chosen consciously or rationally.

Young people may choose whether or not to update their desires and identity (and not to feel them). Sexual orientation is not a voluntary choice; we only choose partners with whom to make it happen, among the possible options. This is just as true for heterosexuality as it is for homosexuality: it is not chosen, but the partners may choose each other. The same is true for gender identity. You feel it internally at first without choosing it in the slightest. However, its display in front of others, whether in our appearance or in the clothes we wear, involves certain decisions.

Various factors have made sexual and gender diversity increasingly visible today. The Internet and social networks that connect people and groups with common interests certainly play a role. Infatuated with authenticity, younger generations are particularly open to disclosing their LGBTQI+ identity. As youth are often better informed about sexual and gender diversity than their elders, they better identify with it. Young trans, non-binary and intersex people, whose existence has long been ignored, are no longer invisible, as was the case until recently. Proportionally, there are no more LGBTQI+ people today; young generations only have less fear or more courage to come out.

The digital world and social networks facilitate the dissemination of speech that promotes intolerance. Relative anonymity and physical or geographic distance protect perpetrators of denigrating or hateful speech. The fight against heterosexist, homophobic and transphobic language is more legitimate but also more arduous than ever, as it is difficult to find and prosecute those who are behind it. Despite laws and charters prohibiting hate speech, there are still few effective tools to address intolerant or violent speech in cyberspace.

That said, there are even more disadvantaged and stigmatized minorities under the vast LGBTQI+ umbrella. LGBTQI+ immigrants may sometimes identify with three distinct communities: their community of origin, their host society and the LGBTQI+ community, which may cause tension. In fact, these different communities do not necessarily offer the same role models or same values and do not allow individuals to express their sexuality, culture or identity in the same way. In a survey of Afro-Caribbean men who live in Montreal and have sex with other men, participants not only reported living in a homophobic family context, but also criticized a form of condescension, even fetishization, in the gay male community, which is predominantly white.[12]

Sexual orientation and gender identity are only two facets of an individual's identity. Ethnicity, nationality, religion or spirituality, physical and intellectual skills and abilities, socio-economic status and level of education are just a few of the characteristics that distinguish any individual. Each of these dimensions may be subjected to stigma or discrimination. Whatever its form, homophobia and transphobia are a reminder that the violence suffered by some serves as a threat to others: it is a warning. For all LGBTQI+ people, what happened to their peers could also happen to them. Through its reign of terror, homophobia and transphobia claim an extremely high number of direct and indirect victims.

12 - Corneau, S., Després, L., Caruso, J. & Idibouo, C. (2016). Les hommes noirs de Montréal qui ont des relations sexuelles avec d'autres hommes et le racisme sexuel : défis, mécanismes de résilience et pistes d'intervention. Nouvelles pratiques sociales, 28 (1), 125–140. https://doi.org/10.7202/1039177ar

A young lesbian, trans* and racialized woman will eventually experience discrimination based on the colour of her skin, gender identity and sexual orientation. Discrimination does not add up but instead combines by intersecting. This is called intersectionality. For example, a man is discriminated against due to his ethnicity in the LGBTQI+ community and, at the same time, is confronted with homophobia in his family of origin. This concept of intersectionality sheds light on multiple discrimination that some youth may experience within LGBTQI+ communities. Although these communities have historically been built around values of openness and solidarity, there is also prejudice and discrimination, particularly in terms of skin colour and gender expression.

There are still many stereotypes about bisexual and pansexual people: due to prejudice, their sexuality is considered transient, unrestrained or unstable. However, someone who is attracted to more than one sex does not mean that they are not selective. Bisexuality and pansexual cover a broad range of experiences. Polyamory, when this is the case, may be practiced by people of all sexual orientations; automatically associating it with bisexuality or pansexuality is incorrect. It is mistaken to believe that people who desire or love more than one person behave irresponsibly or immorally. Each person develops their ethical criteria; whatever their tastes or appearances, they are never self-evident.

Although varying from country to country, the prevalence of sexually transmitted and blood-borne infections (STBBIs) and HIV is generally higher in North America among young men who have sex with men and among trans* people. There are many factors that lead to this discrepancy: an epidemiological history, higher injection drug use among certain segments of the LGBTQ+ population, and sometimes a greater number of sexual partners on average. That said, the increasingly diverse range of prevention tools such as rapid screening, post-exposure treatment and preventive treatment (PreP) is increasing the effectiveness of prevention programs, resulting in fewer deaths from AIDS than ever before, including among LGBTQI+ people. As no vaccine or cure has yet been found, it is important to remain vigilant in the face of this threat. Without falling into panic, LGBTQI+ youth need to learn the basics of prevention like all other young people.

Due to ostracism and discrimination that LGBTQI+ youth face, for all the reasons previously cited, they are more likely to experience psychological distress, depression and post-traumatic stress disorder than the general population. In recent years, various stressors specific to LGBTQI+ youth have been studied and need to be addressed.

The stress of self-disclosure is the most well-known: it is explained by the fact that a positive reaction from others, particularly loved ones and relatives, is never guaranteed and therefore causes anxiety. Less well-known but just as serious may be minority stress. It is a state of inner tension and low self-esteem that minority youth often experience due to pressures to conform, stigma and victimization they encounter. This particular stress may disrupt the cognitive, adaptive and relational faculties of youth (and thus have a negative impact on their entire lives afterwards, even as adults).

Symbolic violence and microaggressions are also a reality that is not new, but not well-known. Symbolic violence refers to a form of violence that is generally not very visible, as it is expressed through norms and social structures that belittle people because of their status, for example, their gender, sexual orientation or peer group. It easily goes unnoticed, as it trivializes unequal treatment simply because it has always existed. So-called microaggressions are related to this. They consist of daily, trivialized, intentional or unintentional affronts, either verbally (insults), behaviourally (violence) or environmentally (discriminatory prohibitions), towards a person or community. Understandably, victims of microaggressions may experience anger, frustration, depression or moral exhaustion. The cumulative effects of these microaggressions may be heavy.

Some LGBTQI+ youth have post-traumatic stress disorder, a reactive disorder that appears as a result of one or more psychologically, physically or socially traumatic events. An event may be traumatic when an individual is faced with death, fear of being seriously injured or dying, or when their physical, psychological or sexual integrity or that of a relative may have been threatened. An individual who has developed post-traumatic stress disorder usually has several types of symptoms, including: depression, suicide attempt, drug and alcohol abuse, anxiety, isolation and withdrawal, panic, hypervigilance, etc.

In short, being personally stigmatized or being part of a group that may be stigmatized has concrete consequences, which may be severe. Threats to one's physical or mental health or safety, particularly self-directed violence, may have consequences, especially among young people whose resources to address or respond to these threats are limited.

Not surprisingly, the prevalence of suicidal ideation and suicide attempts is significantly higher among homosexual and bisexual people and even higher among trans* people. Exclusion from the family environment, bullying at school and in the workplace, psychological, physical and sexual violence — in short, homophobic acts produce very concrete consequences.

Rejection of one's own sexual orientation or gender identity (internalized homophobia and transphobia) may be self-destructive, especially among young people. A recent survey conducted in France found that at least one quarter of homophobic attacks in the past year were committed by LGBT people themselves.

Lastly, confinement (a health measure in the event of a pandemic) significantly increases the social isolation of LGBTQI+ youth, particularly those who are not in close relationships, whether friends or lovers. In addition, LGBTQI+ youth confined in openly homophobic and transphobic families or environments are at greater risk of domestic violence and ending up on the street to survive.

LGBTQI+ people are also more affected by epidemics and pandemics because they depend on their own socialization environments. For example, when community organizations and commercial establishments dedicated to this clientele are closed (or have very limited access), this can lead to isolation that is difficult to endure. Obviously, there are social networks, but your mobile phone or computer cannot open their arms...

13 - Jasmin Roy Sophie Desmarais Foundation & Fondation Jean-Jaurès, 2019.

In closing, the lack of visible role models for LGBTQI+ youth has long been and still is a problem today. Fortunately, things are beginning to change, with more and more public figures known to be or recognized as LGBTQI+. This finally makes LGBTQI+ realities visible and acceptable for all youth.

In conclusion, LGBTQI+ youth go through the same problems as other children, adolescents or young adults, in addition to the risks related to coming in and then coming out. Fortunately, sometimes their fears in this regard turn out to be unfounded, but sometimes they are not. Having to suffer bullying, stigma, rejection or violence is never easy, especially when they do not yet have the means or support from caregivers, allies or mentors to help deal with it. People working with LGBTQI+ youth should be their allies. How to achieve this, through soft skills and know-how, will be the subject of two other sections in this document.

2

SOFT SKILLS [by Jasmin Roy]

By soft skills, we mean the attitudes to be developed among facilitators in the exercise of their duties or professional practice with LGBTQI+ youth. It might be thought of as a mental attitude. First, we must ensure the well-being, safety and protection of young people, regardless of their sexual orientation, gender identity or expression, with an empathetic neutrality that implies being aware of and able to ignore our prejudices, our personal opinions or religious convictions. We need to have a certain objectivity, based on professional, scientific and community knowledge. It is essential to allow all young people to express their emotions and needs in a safe and caring environment.

WHAT MAKES HUMAN BEINGS HAPPY?

In order to properly support LGBTQI+ youth, we must first ask ourselves a simple question: **What makes human beings happy?** In 1938, Harvard University launched research that is still considered one of the longest studies on quality of life. For 79 years, researchers assessed 724 men from disadvantaged and privileged backgrounds to understand what made them happy. Each year, these individuals underwent numerous biopsychosocial assessments: in addition to measuring their well-being, their physical and mental health was assessed. The results of this longitudinal study were made public in 2015 by Dr. Robert Waldinger, psychiatrist and director of the Harvard Study of Adult Development. The extraordinary findings of this research resonated around the world and quickly went viral. One of the major findings is that **our happiness and overall health largely depend on the quality of our social relationships**: people with quality relationships with their family, friends and community have a greater life expectancy, fewer physical and mental health problems, and maintain a greater and more satisfying sense of happiness over time. The more individuals develop from an early age in an environment where relationships are healthy, positive and caring, the more their hope and quality of life increase.

Healthy friendships and social and emotional relationships protect our brain, maintain or even improve our memory and help to better manage our stress on a daily basis. Conversely, harmful, conflictual interactions greatly affect the quality of our brain and cognitive functions, since they increase our cortisol (stress hormone) levels and impair our memory and concentration. Therefore, in order to achieve well-being for LGBTQI+ youth, we need to implement strategies that allow these youth to develop their emotional and social skills and quality relationships. From the outset, we need to acknowledge that there is a certain proportion of young people who belong to LGBTQI+ communities. They should be provided with role models and tools to thrive as individuals in minority situations, as they may experience exclusion, discrimination, rejection, etc. The relationships of LGBTQI+ youth have an even more decisive impact on who they are and their level of development, as these relationships can fully recognize who they are.

THE FACILITATOR'S APPROACH

Since meaningful, positive relationships contribute to happiness and mental health, facilitators should provide empathetic support to LGBTQI+ youth. Feeling supported helps young people to integrate essential social and emotional learning, including:

- self-awareness and awareness of their uniqueness;

- self-regulation of emotions or self-control;

- social awareness;

- relational skills or relationship management skills;

- the ability to make decisions for themselves, by themselves (self-determination), with respect for others.

Facilitators should be proficient at these five components in order to act as role models and, in so doing, teach them formally and informally. Adults who provide support to youth should at least have good self-awareness and be able to appropriately control their emotions during their interventions. Moreover, they should have sufficient social awareness in order to understand how social problems such as homophobia or transphobia, for example, may have a direct impact on youth who are victims of it. In other words, it is important to always recognize that the problem is not LGBTQI+ youth, but rather the harmful living conditions in a culture that is still marked by conscious or unconscious bias and LGBTQIphobic prejudice.

A POSITIVE, CARING APPROACH

Support for LGBTQI+ youth should be based on a positive, caring approach. Caring involves being able to take care of yourself in order to properly take care of the people with whom you develop a helping relationship. Taking care of others primarily consists in supporting them but avoiding the trap of thinking or taking action for them. On the contrary, young people's self-determination and capacity to take action benefit from being encouraged and developed.

In this sense, it is essential to show that other's well-being and respect take precedence from our perspective. This means: communicating with sensitivity, being sensitive to the needs of others, being welcoming, listening with an open mind, supporting, showing empathy and compassion. The more empathetic and meaningful connections you develop with the youth being helped, the more you will foster their resilience.
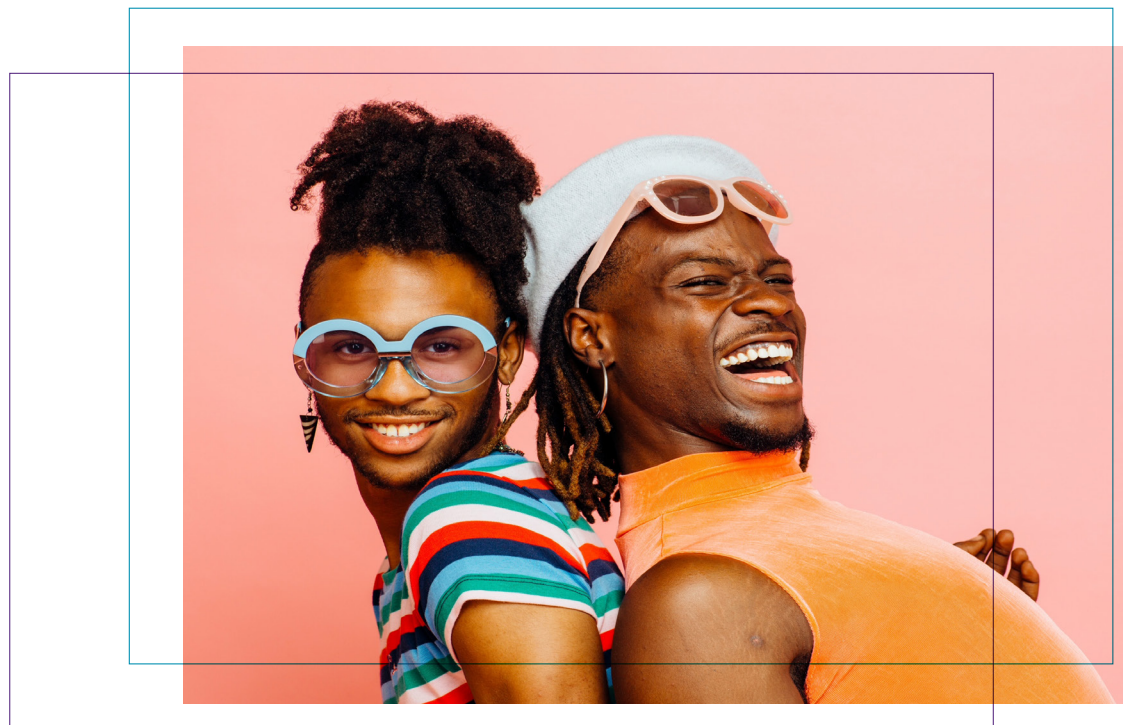
During their practice, facilitators should ensure that they have implemented emotional self-regulation strategies in order to avoid harming the helping relationship by contaminating the interactions with their own moods. Recent discoveries in neuroscience have shown that emotions and stress are contagious (stress resonance). Moreover, before helping young people to regulate their emotions, neuroscience specialists recommend proper self-regulation before an intervention, in order to avoid harm the helping relationship. Facilitators should ensure that they assess and regulate their emotional footprint. This notion refers to the scope and influence of emotions in work practice.

Unfortunately, negative emotions may be more contagious than positive ones. We should therefore favour a positive, caring approach in our actions as caregivers. The more meaningful your connection is with a young person being helped, the more likely a contagious positive approach will enable them to resolve the difficulties they encounter in a constructive way. It is therefore essential for facilitators to implement practical methods to manage their own internal tension, but also their own biases or prejudices if any remain.

AS FACILITATORS, HOW DO WE DEVELOP BETTER SOFT SKILLS
WITH LGBTQI+ YOUTH?

For LGBTQI+ individuals, having to deal with norms, which can be oppressive, stigmatizing and sometimes violent, leads to frustration, intimidation, anxiety, and, in many cases, depressive episodes. We suggest to help them clearly identify their emotions and, in particular, their needs, and then help them towards emotional regulation focused on resilience and positive self-affirmation (empowerment), with community support if possible.[14]

The first step towards sufficient knowledge and understanding of their emotions involves learning to recognize and **read** them. In other words, we need to learn **the literacy of emotions and needs**. Recognizing and then verbalizing their emotions will help individuals understand and then regulate them from a well-being perspective. Understanding their emotions and the resulting needs makes it possible to identify and then develop meaningful relationships, sources of human solidarity, resilience and empowerment. In other words: What and who would I need in order to develop? The facilitator should integrate this skill into their practice in order to teach it.

14 - We will address support for resilience and empowerment in the section on know-how.

Two steps are essential for a proper understanding of emotions.

1. IDENTIFYING AND VERBALIZING

Before over-reacting when a legit emotion overwhelms us, for example, with anxiety or depression, it is helpful to **"put into words" what we feel**. Sometimes, young victims of homophobia or transphobia are confused and without bearings; they do not understand why they are attacked for only being who they are. TELL ME WHAT YOU ARE EXPERIENCING AND FEEL. This wording opens the door to the other person's expression and non-judgmental listening. It should be noted that young people may experience several quite contradictory emotions at the same time: for example, they may be proud of themselves and their identity while internalizing to a certain extent the shame conveyed by relatives or peers about who they are, which may cause tension. If a young person is not able to verbally express the emotion, invite them to write or draw it. The important thing is for them to express themselves.

2. ASSOCIATING AND MAKING CONNECTIONS

Once an emotion has been identified, we should associate it with its **sources** and **needs to which it may refer**. For example:

What made you angry? What happened at school and what bothered you: the teacher's behaviour, the student's comment or your own behaviour? What solution(s) can you suggest? First, to calm down your anger or let off steam; second, to prevent it from happening again?

Any solution to young people's problems requires an understanding of their legitimate emotions, feelings and aspirations. Humanity is highly diverse.

SEXUAL ORIENTATION, GENDER AND GENDER EXPRESSION

Since LGBTQI+ youth are not a homogeneous group (each community has specific needs), it is important not to assume anything about the emotional, relationship or community difficulties encountered. In recent years, the creative proliferation of new terms used to refer to gender requires us to listen more than ever and learn from younger generations. For example, for some, non-binary means changing between masculine and feminine expression; for others, simply an absence of binarity in their ways of being, which are more or less androgynous. Some people will tell you that they have sex with people of the same sex, but that they identify as heterosexual; others that they are bisexual; others that they are pansexual. The younger generations are very creative when expressing their sex, gender or sexual preference identities and, as we saw in the first section, the vocabulary is bound to be constantly changing. As a facilitator, in order to understand and build sustained trust by allowing young people to be who they are, you should refrain from any judgment. This will allow you to show empathy and consider their viewpoint and perspective. You will also be aware of the social and ethical norms that govern everyone's behaviour (LGBTQI+ youth and those around them) and the extent to which the predominantly "heterosexist" and "cissexist" worldview may negatively impact the self-esteem, physical and mental health of LGBTQI+ youth. Their views are often not taken into account in this world in which people consider everyone to be heterosexual and cisgender until proven otherwise – and even any slight clue is often questioned. As we say in English, "Think outside of the box." When you interact with LGBTQI+ youth, think differently about what you know about your own world. When working with LGBTQI+ youth, it should be about them. How can you promote their well-being and ensure their development? These are two fundamental questions that should guide your thinking.

All this occurs in the relationship we develop with the young person (relational skills). Once we are aware of the young person's reality and what they are experiencing, we can interact better with them, i.e., develop positive, meaningful social connections with them, resolve conflicts or differences in perspective in a constructive way, communicate clearly and listen actively. To improve your relationship with LGBTQI+ youth, you can also consult competent resource persons in order to better understand the youth's reality and better resist social pressures that may hinder the youth's empowerment. Reading a book like the one you hold in your hands is also a good way to enhance your work as a facilitator.

CONCLUSION OF THIS SECTION

We all have emotional and social needs. However, an elemental analysis of the five basic needs, which make up Maslow's pyramid, reveals that they are part of our intrinsic needs. Maslow ranked the five human needs in order of importance:

1. Physiological needs.

2. Safety needs.

3. Social belonging.

4. Esteem.

5. Self-actualization.

As soon as our physiological needs are met, we turn to the **need for safety**, which is built on the trust we develop with others. We need to feel protected from emotional, physical and psychological threats. This certainty is established through emotional stability. We must also have a **sense of belonging** and, to achieve this, we need to **feel respected and loved** by a group or family. To develop our identity and autonomy, we also need to **feel useful and appreciated**. We build self-esteem in the eye of others. LGBTQI+ youth will be self-actualized when all of these conditions are met.

3

KNOW-HOW FOR WORKING WITH LGBTQI+ YOUTH AND THEIR ENVIRONMENTS [by Michel Dorais]

A dozen basic principles should guide interventions with LGBTQI+ youth and their living environments. These principles are not necessarily specific to this population but are nevertheless absolutely essential in order to ensure respect for people and their self-determination and, more generally, to meet their needs through quality support services.

1st PRINCIPLE

Never assume or take for granted the sex, gender and sexuality/sexual orientation of anyone, regardless of their age or appearance. We should respect the individual as they define themselves. To do so, ask them specifically how they define themselves and how they wish to be addressed.

This avoids problems associated with misgendering young people, i.e. referring to them using a word that does not correctly reflect the sex or gender with which they identify. Whether such an error is intentional or unintentional does not change anything. Understandably, people want to be referred to according to the identity with which they identify. The least we can do is take note of this: respecting others begins with the recognition of their identity.

2nd PRINCIPLE

Use appropriate vocabulary (see the LGBTQI+ glossary in the first section of this document). So that everyone feels included, when possible, using gender-neutral language, which takes into account non-binary and gender plurality, is also highly recommended.

It is incorrect to believe that the use of neutral and inclusive language requires the invention of new words and neologisms. The English language already has many tricks to avoid gendered terms. For example, we can use the plural: rather than saying "When a student forgets to bring his books to class," we can say "When students forget to bring their books to class."

3rd PRINCIPLE

Always respect the individual's self-determination, which is their ability to decide their future for and by themselves, in the exercise of their rights and freedoms.

While charters and laws sometimes impose age restrictions, the general movement is to recognize equal rights for young people, except in rare exceptions set by law. Young people have as many rights as adults, including the right to their private lives and privacy. For example, professional secrecy is just as important in the context of interventions concerning them. Therefore, it is advisable to never disclose any information whatsoever collected in the context of the support work with young people without their explicit, free, informed and revocable consent.

Unless proven otherwise, every individual is able to make decisions for their own lives. The role of caregivers is essential to help individuals find their own solutions by drawing on their motivation and strengths, while taking advantage of the support available in their environment. To be able to build on their own strengths, every individual must first be able to recognize and develop their qualities, skills, talents, interests and legitimate aspirations. For this reason, respect for self-determination implies encouraging self-expression.

4ᵗʰ PRINCIPLE

Ensure that LGBTQI+ youth always have non-discriminatory access to public and parapublic services, in particular, education, health and social services.

Section 10 of the Quebec Charter of Human Rights and Freedoms states:

> "Every person has a right to full and equal recognition and exercise of his human rights and freedoms, without distinction, exclusion or preference based on race, colour, sex, gender identity or expression, pregnancy, sexual orientation, civil status, age except as provided by law, religion, political convictions, language, ethnic or national origin, social condition, a handicap or the use of any means to palliate a handicap. Discrimination exists where such a distinction, exclusion or preference has the effect of nullifying or impairing such right."

Reaffirming these principles is particularly important for trans and non-binary individuals, as references to gender identity and expression have recently been added to the list of recognized rights. Charters of Rights (Canadian and Quebec), laws, rules of professional conduct and ethical obligations of professional orders in Quebec apply to everyone.

5ᵗʰ PRINCIPLE

Always intervene from a perspective of equity, respect for diversity and its social inclusion in all its forms.

This includes working to support the self-esteem of LGBTQI+ youth and recognize and celebrate LGBTQI+ contributions in communities. It also means actively combating conscious or unconscious biases, and sexist, heterosexist, cissexist, xenophobic, homophobic and transphobic prejudices, whether they are visible at the individual, family, institutional or community level.

In short, facilitators should work to develop empathy with and show kindness towards LGBTQI+ youth. These principles go well beyond tolerance and open-mindedness, as they are proactive, not just reactive. This perspective also means taking into account all aspects of an individual's identity. Their ethnic origin, skin colour, religion or lack of relationship, for example, can add to the prejudice, discrimination or rejection suffered.

6th PRINCIPLE

Avoid considering living condition problems experienced by LGBTQI+ youth as personal problems.

In psychology, this is called the fundamental attribution error. For example, a young person who is rejected by their living environment might become depressed because of this, not because of their sex, gender or sexuality. LGBTQI+ people have been pathologized for a long time because of who they were: obviously, it is essential not to fall (again) into this trap. It is important to understand that LGBTQI+ youth face additional challenges compared to other youth of the same age.

7th PRINCIPLE

Be able to reframe problems or difficulties in order to deconstruct and stop homophobia and transphobia.

Since the definition of a situation tends to dictate the reaction to that situation, facilitators have a great responsibility to analyze the difficulties or problems experienced by LGBTQI+ youth. We should always remember that human beings react to situations or events according to the meaning they attribute to them. However, we can make sense of it all: for example, we cannot ignore others' opinions and reactions. This means that positive or negative meaning attributed to events may change based on new understandings or experiences. For example, a young person who thinks they are abnormal due to their difference may develop negative emotions and reactions, which will harm them. A critical reframing of their way of perceiving themselves (for example, realizing that "LGBTQI+ people are just as normal as heterosexual people") will lead them to change the view they have of themselves. This is called cognitive reorganization; we no longer feel things the same way because we no longer view them in the same way.

Even if we are conditioned by our upbringing, our past and the prejudices of others towards us, any perception can change (for example, when new information arises to redefine a situation). Reframing is much more than a technique; it is a mental attitude to view and consider things in a new, critical light, in order to find new answers to previously unsolvable problems. Young people who have experienced pervasive problems may have lost sight of the fact that they have the capacity as well as the right to be happy and to be treated fairly and equitably.

8ᵗʰ PRINCIPLE

Know how to recognize and deal with the consequences of various types of aggression experienced by LGBTQI+ youth and the resulting stress and trauma.

This specifically concerns the stress of self-disclosure, particularly if it happens under adverse circumstances, i.e., in a climate of intolerance or rejection, whether on the part of parents, peers or adults supervising these young people, for example, at school, in sports and recreation. The consequences of minority stress, which is specific to minorities experiencing rejection, stigma and prejudice, should also be considered. These stressful conditions or situations may lead to chronic stress, potentially causing physical or mental health problems.

There are also consequences of symbolic violence and repeated microaggressions, whether homophobic or transphobic. These non-physical assaults include inappropriate remarks, off-colour jokes or derogatory comments that can cause anxiety, low self-esteem, depression, food or sleep problems, addictions and even suicide attempts. In many cases, the after-effects of post-traumatic stress may emerge as a result of the psychological, physical or sexual violence suffered. People with post-traumatic stress disorder typically have three types of symptoms. First, they relive the traumatic scene in their thoughts or nightmares. However, the opposite may occur through survival response: dissociation, flight or denial. Second, they seek to avoid – voluntarily or involuntarily – anything that might remind them of the trauma they have experienced (symptoms of emotional avoidance). E.g., "I don't leave my house anymore. I don't see anyone anymore." Third, they are permanently or almost constantly on the defensive, in a state of hypervigilance, even in the absence of imminent danger. E.g., "The slightest noise makes me jump. I'm always on my guard. Even since I was assaulted, I'm afraid to be touched."

Certain interventions are usually helpful for people experiencing the after-effects of trauma. The first intervention is to allow them to vent, i.e. to tell their story while receiving empathy for what they experienced and felt. It is also important to reassure them that their emotions are normal: trauma always has after-effects. Also, it is important to keep in mind that what they experienced is not acceptable; they are the victims and not the problem. In their search for well-being, it is also essential to know how to draw on their internal and external strengths and resources: they can rebuild themselves with these strengths. This means encouraging empowerment in their own lives: for example, being able to live in a place where they feel safe and develop stimulating life projects.

9ᵗʰ PRINCIPLE

Be able to identify the resilience and empowerment capacities of LGBTQI+ youth and LGBTQI+ communities.

As we have seen earlier, the capacity to recover from difficulties despite adverse circumstances is called resilience. Resilience draws on several types of complementary responses. First, there is a compensatory or adaptive capacity when facing adversity: we do not let ourselves be defeated. Resilient people have a propensity to define themselves by life projects rather than only by their past. For this reason, it is important to encourage young people's desire for self-reliance, their creativity, a sense of their own worth and, above all, the desire to overcome challenging situations by anticipating and working towards a better future. Although we cannot choose the events that occur, we can choose how to react to them in various ways. Through the support and encouragement they provide, caregivers can become resilience tutors.

Resilience can readily be associated with empowerment. Empowerment is a process involving the development of the power to take control of our lives (and the learning that leads to this emancipation). It involves the strengthening of our critical awareness of others' judgment, our self-esteem and ability to improve our living conditions based on our own needs and aspirations. To improve our living conditions, collective change is often necessary, hence the need to come together and unite in order to enhance collective empowerment: this is the very reason for the existence of LGBTQI+ movements and organizations. In short, empowerment involves an action aimed at taking our destiny into our own hands both individually and collectively.

10ᵗʰ PRINCIPLE

Focus medium- and long-term intervention on individual and community projects.

To do so, we should first reach out to LGBTQI+ people's loved ones and living environments (families, schools, sports, etc.) in order to ensure that LGBTQI+ youth receive caring and empathy and to maximize their potential. Focusing on people's potential and strengths is a great way to avoid labelling them, rather than only considering their problems — or worse yet, blaming them for the difficulties they are experiencing. Unfortunately, too many psychosocial intervention approaches focus on people's shortcomings, flaws and deficiencies. As a result, interventions tend to ignore or underestimate the capabilities and skills of LGBTQI+ youth; their abilities and creativity can go a long way to help them restore hope and overcome problems.

11th PRINCIPLE

Carry out (or provide support for) pro-LGBTQI+ awareness raising, mediation and advocacy and, in so doing, be an ally.

This essential work consists in promoting, claiming and defending the rights and freedoms of LGBTQI+ youth, wherever required, from a preventive perspective. This action can be taken in collaboration with resources such as LGBTQI+ community organizations or the Commission des droits de la personne et des droits de la jeunesse (Quebec Human Rights Commission). This action aims to ensure equity and social justice for LGBTQI+ youth and their communities or allies. It also asserts our position as allies for LGBTQI+ people and communities (including what we put on display in our offices, such as documents and posters, and on our personal or organizational websites).

12th PRINCIPLE

Reduce the isolation of young people, particularly outside urban centers.

Depending on the needs, we can and should promote existing or create new networks and support groups for LGBTQI+ youth: discussion groups, socialization, awareness raising or advocacy, from a perspective of mutual aid and solidarity. To do so, we need to know where to refer people who need help and how to take action from a mentoring perspective (providing inspiring role models and leading by example, whether we like it or not, which is the most effective way of teaching).

All too often, LGBTQI+ youth experience a great sense of isolation or loneliness as they are discovering themselves. For this reason, it is extremely important to provide them with virtual AND physical resources as well as places to meet and socialize with peers and inspiring allies. To this effect, we often need outside help to enhance helping relationships. LGBTQI+ youth have everything to gain by feeling supported in their living environment and actively participating in and belonging to a community.

GENERAL CONCLUSION

To help and protect LGBTQI+ youth (and their living environments), we need to be committed to implementing interventions and actions. In some circles, this is still not commonplace, since it is neither a concern nor a priority (and is therefore swept under the carpet). You may encounter resistance in your efforts to support LGBTQI+ youth. That is why promoting respect for human rights and freedoms is so essential. We should always keep in mind that young people have rights that need to be respected and enforced. They can never have too many allies to help them in this endeavour.

REFERENCES

Martin Blais, Mylène Fernet & Martine Hébert. *Le développement sexuel et psychosocial de l'enfant et de l'adolescent*, De Boeck supérieur, 2017;

Pascale Brillon, *Comment aider les victimes souffrant de stress post-traumatique*, Québec Livres, 2013;

Michel Dorais, *Le Métier d'aider*, VLB, 2018;

Michel Dorais, *Nouvel éloge de la diversité sexuelle*, avec la participation de Sophie Breton, VLB éditeur, 2019;

Annie Pullen Sansfaçon & Denise Medico (dir.), *Jeunes trans et non binaires*, éditions du remue-ménage, 2021.

+ All the documents of the École d'été sur les jeunes LGBTQI+ [in French only]:
https://fondationjasminroy.com/initiative/ecole-dete-sur-les-jeunes-lgbtq/