



Office for People With
Developmental Disabilities



LGBTQIA+ Training Curriculum

Participant Manual

OPWDD LGBTQIA+ Training Curriculum

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Sexual Orientation, Gender Identity, and Expression Affirming Approaches and Practices
June 2023

BACKGROUND

I. Using the LGBTQIA+ Curriculum

Training using the OPWDD Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual+ (LGBTQIA+) curriculum fulfills the required Gender Identity and Sexual Orientation training identified in OPWDD ADM #2023-01.

This curriculum does not capture all nuances of LGBTQIA+ related topics. It also is not intended to replace any anti-discrimination training. Rather, this curriculum gives a broad understanding of the LGBTQIA+ community, ways to support people with developmental disabilities who identify as part of the LGBTQIA+ community, and address potential problems that people in the LGBTQIA+ community may face.

II. The Importance of the OPWDD LGBTQIA+ Curriculum

OPWDD recognizes the importance of each person's rights, including the right to be given respect and dignity, to not be deprived of any civil or legal right solely because of a diagnosis of a developmental disability, and to express sexuality as limited by one's consensual ability to do so, among others (see 14 NYCRR 633.4). Historically, people with developmental disabilities have been denied the right to express their sexuality or non-conforming gender identity due to societal misconceptions or unaccepting attitudes. To shift to a more supportive and accepting approach, we must acknowledge this historical perspective and work to change it. This includes bringing awareness to people who are part of the LGBTQIA+ community and empowering those supporting them by providing training on this topic.

III. Additional Resources

This OPWDD LGBTQIA+ training curriculum is intended to be a helpful resource for providers to develop cultural competency among staff. By increasing staff understanding of the LGBTQIA+ communities, we can improve their ability to interact with different cultural groups. While this training curriculum provides a comprehensive introduction to the topic, there are many more resources available on this topic that you may find useful as you support people in the LGBTQIA+ community. You may need to add other information and seek out other resources to address the needs of the specific people you serve. Here are a few resources you may find helpful:

Organization Name	Website
The National LGBTQIA+ Health Education Center	https://www.lgbtqihealtheducation.org/
The Trevor Project	https://www.thetrevorproject.org/resources/
The Human Rights Campaign Foundation (HRC)	https://www.thehrcfoundation.org/
Planned Parenthood	https://www.plannedparenthood.org/
The Safe Zone Project	https://thesafezoneproject.com/
Gay & Lesbian Alliance Against Defamation (GLAAD)	https://www.glaad.org/
It Gets Better Project	https://itgetsbetter.org/
National Gay and Lesbian Task Force	http://www.thetaskforce.org/
Planned Parenthood	https://www.plannedparenthood.org/
Kids Health	https://kidshealth.org/
SOGIE Handbook	https://www.health.ny.gov/prevention/sexual_violence/docs/sogie_handbook.pdf
The New York State Lesbian, Gay, Bisexual and Transgender Health & Human Services Network (The Network)	https://gaycenter.org/recovery-health/health/lgbt-health-network/
New York State Division of Human Rights	https://dhr.ny.gov/

UNIT 1 – WELCOME AND OPENING

I. Welcome

OPWDD serves people with developmental disabilities according to a set of values including supporting human dignity, showing compassion, respecting the rights of others and providing excellence in all that we do. This training reminds us of our responsibilities to demonstrate these core values when we support people. To get the most out of this training, every person here should participate in the discussions and activities so that we all have a better understanding of the LGBTQIA+ community and how that relates to our work.

Learning and talking about historically marginalized communities, like LGBTQIA+ communities, can help us be better informed and culturally competent. This will ultimately improve the care we provide to those who identify as LGBTQIA+. This training will bring awareness of the LGBTQIA+ community and help staff better understand how to appropriately support people with developmental disabilities who are part of this community.

Some of you may be part of an LGBTQIA+ community yourself. Others might have very little experience with LGBTQIA+ communities. Many of you might fall somewhere in between. No matter your experience, please engage with this training. It is important for us to all walk away with the same information so we can work together to support people with the dignity and compassion we all deserve. If you have any questions, please ask them, and I will do my best to answer them.

II. Course Objectives

After completing this course, participants will be able to:

Identify the difference between sex and gender

Understand how to help someone who is "coming out"

Identify at least 3 different ways they can support a person with a developmental disability who identifies as part of the LGBTQIA+ community

Describe, in their own words, why using someone's pronouns is important

Describe why self-expression is important for people with developmental disabilities, including self-expression of their gender and/or sexual orientation

Identify at least 1 entity that should be contacted if staff think someone's rights have been violated

III. National Alliance of Direct Support Professional (NADSP) Code of Conduct

New York's direct support professionals (DSPs) have a professional code that guides and maintains high standards for the life-changing work they do each day. During this training, think about how this Code of Ethics applies when serving people who identify as LGBTQIA+. Let's review some of the ethics that apply so you can see how our code of ethics directly influences our work.

Person-Centered Supports

As a DSP, my first allegiance is to the person I support; all other activities and functions I perform flow from this allegiance.

Promoting Physical and Emotional Well-Being

As a DSP, I will commit to promote the emotional, physical, and personal well-being of the people I support. I will encourage growth and recognize the autonomy of those receiving support while being attentive and energetic in reducing the risk of harm.

Integrity and Responsibility

As a DSP, I will support the mission and vitality of my profession to assist people in leading self-directed lives and to foster a spirit of partnership with the people I support, other professionals, and the community.

Confidentiality

As a DSP, I will safeguard and respect the confidentiality and privacy of the people I support.

Justice, Fairness, and Equity

As a DSP, I will affirm the human rights as well as the civil rights and responsibilities of the people I support. I will promote and practice justice, fairness, and equity for the people I support and the community as a whole.

Respect

As a DSP, I will respect the human dignity and uniqueness of the people I support. I will recognize each person I support as valuable and promote their value within communities.

Relationships

As a DSP, I will assist the people I support to develop and maintain relationships.

Self-Determination

As a DSP, I will assist the people I support to direct the course of their own lives.

Advocacy

As a DSP, I will advocate with the people I support for justice, inclusion, and full community participation.

UNIT 2 – DEFINITIONS

I. Definitions

There are many definitions and acronyms associated with the LGBTQIA+ community. These definitions have changed and may continue to change over time. New terms, definitions, and acronyms may come about. Therefore, these definitions are not all of the terms used in the LGBTQIA+ community. Some people may have slightly different definitions than those that are listed here. However, this list of definitions is a good place to start learning and understanding more about the LGBTQIA+ community.

1. Gender-Related Vocabulary

Agender	An umbrella term that includes many different genders of people who identify as having no gender and/or having a gender that they describe as neutral. Many agender people also identify as transgender.
Cisgender	A term used to describe a person whose gender identity aligns with what is expected of them in their culture based on the sex assigned to them at birth. The prefix cis- means “on the side of” or “not across.”
Deadname	The name that a transgender person was given at birth and no longer uses upon transitioning.
Gender	This is very complex. Different cultures have different ideas about what gender means, and it generally considers things as male or female. Gender is something that’s seen in reference to social and cultural differences instead of our physical anatomy differences. Instead of being about someone’s anatomy, it is about how they are expected to act because of their assigned sex.
Gender Binary	A system in which gender is constructed into two strict categories of male or female. Within this system, gender identity is expected to align with the sex assigned at birth and gender expressions and roles are supposed to fit traditional expectations.

Gender Expression	External appearance of one's gender identity, usually expressed through behavior, clothing, body characteristics or voice, and which may or may not conform to socially defined behaviors and characteristics typically associated with being either masculine or feminine.
Gender-Fluid	A person that does not identify with a single fixed gender or has a fluid or unfixed gender identity.
Gender Identity	One's innermost concept of self as male, female, a blend of both or neither – how individuals perceive themselves and what they call themselves. One's gender identity can be the same or different from their sex assigned at birth.
Gender Non-Conforming	A broad term referring to people who do not behave in a way that conforms to the traditional expectations of their gender, or whose gender expression does not fit neatly into a category. While many also identify as transgender, not all gender non-conforming people do.
Intersex	Intersex people are born with sex characteristics that do not fit typical binary notions of male or female bodies.
Non-Binary	An adjective describing a person who does not identify exclusively as a man or a woman. Non-binary people may identify as being both a man and a woman, somewhere in between, or as falling completely outside these categories. While many also identify as transgender, not all non-binary people do. Non-binary can also be used as an umbrella term encompassing identities such as agender, bigender, genderqueer or gender-fluid.
Pronouns	Used in place of a proper noun (like someone's name). We use pronouns most often when referring to someone without using their name. (Example: he/him/his; she/her/hers; they/them/theirs). You cannot tell a person's pronouns by looking at them; it is best to ask for someone's pronouns or offer yours as a way of introduction.
Transgender	An umbrella term for people whose gender identity and/or expression is different from cultural expectations based on the sex they were assigned at birth. Being transgender does not imply any specific sexual orientation. Therefore, people who

	identify as transgender may identify as heterosexual, gay, lesbian, bisexual, etc.
Two-Spirit	Two Spirit is an umbrella term that encompasses different sexualities and genders in some Indigenous Native American communities. This is a cultural term that is reserved for those who identify as an Indigenous Native American.

2. Sexuality-Related Vocabulary

Asexual	A person who experiences little or no sexual attraction.
Bisexual	A person who is romantically and/or sexually attracted to both males and females, or more than one gender.
Gay	A person who is emotionally, romantically, or sexually attracted to members of the same gender. People of all genders may use this term to describe themselves.
Heterosexual	Someone who is sexually or romantically attracted to people of a different sex or gender.
Lesbian	A woman who is emotionally, romantically, or sexually attracted to other women. Women and non-binary people may use this term to describe themselves.
Pansexual	A person who is not limited in sexual choice with regard to another person's sex assigned at birth or gender identify.
Polyamorous	A person who engages in intimate relationships with more than one partner with the consent of all partners.
Queer	A term used by some LGBTQ+ people to describe themselves and/or their community. Reclaimed from its earlier negative use the term is also considered by some to be inclusive of the entire community and by others who find it to be an appropriate term to describe their more fluid identities. Because it is traditionally a negative term for people who are LGBTQ+, some people within the community dislike the term. Therefore, use this word only when self-identifying or quoting an individual who self-identifies

	as queer (i.e., “My friend identifies as queer” or “My friend is a queer person”).
Sexual Orientation	An inherent or immutable enduring emotional, romantic, or sexual attraction to other people; a person’s sexual and emotional attraction to another person and the behaviors and/or social affiliation that may result from this attraction. An individual’s sexual orientation is independent of their gender identity.

3. Other LGBTQIA+ Related Vocabulary

Ally	An ally is a heterosexual and/or cisgender person who supports equal civil rights, gender equality, and LGBTQIA+ social movements.
Discrimination	When a person experiences negative treatment or impact, intentional or not, because of their gender identity, gender expression, sexual orientation, or perceived sexual orientation, gender identity, or gender expression
LGBTQIA+	An acronym for “lesbian, gay, bisexual, transgender, queer, intersex, and asexual/aromantic/agender” with a “+” sign to recognize the limitless sexual orientations and gender identities used by members of the LGBTQIA+ community.
Outing	Exposing someone’s sexual orientation or gender identity to others without their permission. Outing someone can have serious repercussions on employment, economic stability, personal safety or religious or family situations, as well as emotional and mental suffering.
Sex Assigned at Birth	The sex, male, female or intersex, that a doctor or midwife uses to describe a child at birth based on their external anatomy.

II. Pride Flags

One of the most well-known symbols of the LGBTQIA+ community is the pride flag. The original 'rainbow flag' was created by Gilbert Baker in 1978 to celebrate members of the gay and lesbian political movement. It has eight colored stripes stacked on top of each other to evoke a rainbow, a symbol of hope. Since then, other LGBTQIA+ flags have been created to celebrate the different members of the community.

- 1) 6-Stripe Pride Flag: Celebrating the LGBTQIA+ community.
- 2) Philadelphia Pride Flag: Added stripes of Black and Brown to the previous six colors, thus better representing and advocating for LGBTQIA+ people of color.
- 3) Progress Pride Flag: Represents both trans people (with the white, pink, and light blue) and people of color (with the black and brown).
- 4) Disability Pride Flag: Designed by Ann Magill and updated in 2021 to ensure accessibility, each color of the Disability Pride Flag represents a different type of disability: physical (red), cognitive and intellectual (yellow), invisible and undiagnosed (white), psychosocial (blue), and sensory (green). The charcoal background symbolizes mourning and rage for the victims of ableist violence and abuse, and the colored bands are placed diagonally to convey persons with disabilities “cutting across” societal barriers.



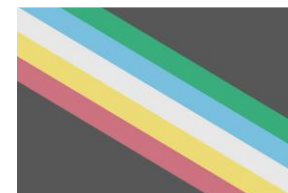
**6-Stripe
Pride
Flag**



**Philadelphia
Pride Flag**



Progress Flag



**Disability Pride
Flag**



Asexual Pride Flag



Intersex Pride Flag



**Transgender Pride
Flag**



Ally Pride Flag

These are just a few different kinds of pride flags. There are many others out there representing and celebrating people who identify as a smaller part of the LGBTQIA+ community – such as lesbian, pansexual, and so on.

UNIT 3 – GENDER AND SEX ASSIGNED AT BIRTH

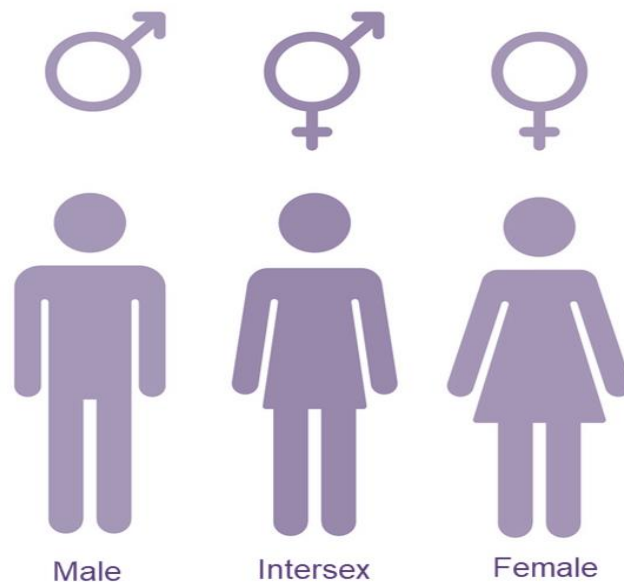
I. Sex Assigned at Birth, Gender, and Gender Identity, and Gender Expression

OPWDD recognizes that people can identify with a range of different gender identities and sexual orientations, and that gender identity may or may not be associated with their sex assigned at birth. OPWDD regulations 14 NYCRR 633.4 protects the rights of people with developmental disabilities to be free from discrimination related to a variety of factors, including their gender identity or expression, sex assigned at birth or their sexual orientation.

Someone's gender and their sex assigned at birth are two different things. It's sometimes common for people to confuse sex, gender, and gender identity. Someone's biological or assigned sex does not automatically tell us what their gender or gender identity is.

1. Sex

Sex is a label assigned by a doctor at birth based on the genitals and chromosomes you have. It's usually male or female unless their sexual anatomy doesn't fit into one category. Then they may be described as intersex.



2. Gender

Gender is very complex. Different cultures have different ideas about what gender means, and it generally considers things as male or female. Gender is something that's seen in reference to social and cultural differences instead of our physical anatomy differences. Instead of being about someone's anatomy, it is about how they are expected to act because of their assigned sex.

3. Gender Identity

Gender identity is about how someone identifies, or feels inside, or how they would like to express their gender. This can be through the clothing they wear, their hair and makeup, and other aspects of personal appearances.

Think: Gender Identify is an Internal feeling.

Many people feel that they are either male or female. Other people might feel like a masculine female or feminine male. Other people might not feel like either gender.

Cisgender	Transgender	Non-Binary, Gender Queer, or Gender Fluid
<ul style="list-style-type: none">• People whose sex assigned at birth and gender identity are largely the same.• Example: Tonya was assigned female at birth and she identifies as female.	<ul style="list-style-type: none">• People whose sex assigned at birth is of the other gender than their gender identity.• It's important to realize that some people who identify as transgender may only use this identification during their transition. After they transition, they might simply identify as their transitioned gender.• Example: Marcus' sex assigned at birth was female. He began transitioning to a male 6 months ago. Marcus identifies as a transgender male. He thinks once his transition is finished, he will only identify as male.	<ul style="list-style-type: none">• People who do not identify with any specific gender.• Example: Mateo does not identify as male or female. They identify as someone between genders, like on a spectrum.

4. Gender Expression

This is the way someone communicates their gender identity through their chosen appearance and behavior. It might include their clothing, hair, language or behavior. Someone's gender expression might conform with or defy gender norms.

Think: Gender Expression is an External communication of gender.

For example:

- Linda identifies as a female (gender identity). She likes to wear dresses, paint her nails, and wear glitter eyeshadow (gender expression).
- David identifies as a male (gender identity). He likes to wear neckties and dye his hair pink (gender expression).
- Parker identifies as non-binary (gender identity). They like to wear a variety of clothes, from dresses to basketball shorts to jeans (gender expression).

You might know of someone whose gender expression differs from their gender identity. Maybe it is someone you knew in school who identified as a woman but wore athletic clothes and was called a "tomboy." You might be familiar with some famous people whose gender expression differs from their gender identity. Some of these famous folks include Prince, Elton John, David Bowie, Lil Nas X, Kurt Cobain, and Harry Styles.

II. Appearance and Self-Expression

Everyone has the right to make choices about their appearance and self-expression, including how they choose to dress and/or groom. These choices must be allowed, regardless of whether they conform to traditional gender stereotypes. There are many ways people may choose to alter their appearance and express themselves. However, in some cases, the clothing/grooming of a person with a developmental disability must be regulated for their medical and/or behavioral needs (e.g., trimmed nails due to potential self-injury). If this is the case, the reason for this decision should be documented.

III. Pronouns and Names

People may choose to go by the name and pronouns they were assigned at birth, or they may choose to go by names and pronouns that more accurately represent their gender

identity. They may use their requested name and pronouns regardless of their age or disability.

1. Pronouns

- What are they?

Pronouns are the words used in place of someone's proper name. This might be "she/her," "he/him," "they/them," some combination of those three, or something else. You should never assume someone's pronouns. To avoid doing this, you might use gender-neutral language. Gender-neutral language means using a word that isn't associated with a specific gender.

For example, instead of saying "She works at day habilitation" for someone whose pronouns you don't know, you might say "They work at day habilitation." *If you know someone's pronouns, you must use them.* Calling someone by their pronouns shows respect for the person. It also helps to build an empowering, safe and nondiscriminatory environment.

- Why should we use gender-neutral language when we don't know someone's pronouns?

The purpose of gender-neutral language is to avoid word choices which may be interpreted as biased, discriminatory or demeaning by implying that one sex or social gender is the norm.

- What if I use the wrong pronouns for someone?

Sometimes you might use the wrong pronoun for someone. Maybe you accidentally misgendered them (that is, assumed their gender was something different than what they identify with). Or maybe that person recently changed their pronouns. If you accidentally use the wrong pronoun for someone, you can apologize, correct yourself, and move forward. Commit to practicing them to get it right the next time.

- How do I address pronoun use with the people I support?

Having a conversation with them is a great place to start. You might share your pronouns first, which can introduce the topic. You might also choose to speak with your supervisor about having LGBTQIA+ training made available for the people with developmental disabilities you support.

If someone tells you they want to use different pronouns, you should ask if it's OK to use them with everyone (like with their family, friends, employer, etc.). Some people only want to use their pronouns in one setting but aren't ready to tell people in another

setting about their pronoun change. You shouldn't out the person by sharing that information with anyone before they're ready. If you're concerned about this news and think the person might be helped by having additional services, like counseling, you may raise this only with the appropriate people in the person's clinical team.

2. Names

A person's legal name and/or pronouns may differ from those they use in their everyday lives. The person's requested name and pronouns must be used to the greatest extent possible except where it's legally unable to do so (e.g., must use legal name for Medicaid billing). In places where you have to list someone's legal name for Medicaid billing, you should also list somewhere on the document the person's requested name.

For example, if you are working to develop a Staff Action Plan, it might say Name: John Smith ("Jane"). But when you are working with the person you would simply call them Jane, or the name the person chooses to be called.

Calling someone by their chosen name shows them respect. If someone has transitioned from one gender to another, they might also choose to change their name even if it has not been changed legally. We'll use the example of John Smith who has changed her name to Jane Smith. If you called Jane by the name John, you would be using her deadname. This is the name that someone who is transgender had before they transitioned and no longer uses. If you use someone's deadname, they might feel triggered, invalidated, or hurt. That's why we should always do our best to use someone's chosen name whenever possible. If we accidentally say the wrong name, apologize, correct yourself, and move forward.

IV. Using Restrooms, Locker Rooms, and Other Gender-Segregated Areas

New York State has a Human Rights Law (HRL) (New York Executive Law Article 15) that was created to protect people who routinely experience discrimination based on certain protected traits, like their race, disability, gender, or sexual orientation. For people who are transgender or gender non-conforming, this means that they cannot be discriminated against based on the fact that they are transgender or gender non-conforming. For example, all people have the right to access public spaces and accommodations, regardless of whether they are transgender and gender non-conforming. This means they must be allowed access to public spaces (e.g., hospitals, parks, restaurants, hotels, food banks, and other places available to the general public). People must also be able to access sex-specific facilities that are consistent with their gender identity, like bathrooms and locker rooms. This means people cannot be forced to use a gender-neutral or separate restroom if that's not the person's choice.

OPWDD also prohibits the discrimination of people who are transgender or gender non-conforming in OPWDD-certified facilities. This means that in places where there are gender-segregated areas within an OPWDD-certified facility (e.g., day-habilitation bathrooms), people must be allowed to use the facility that matches their gender identity.

UNIT 4 – SEXUAL ORIENTATION, COMING OUT, AND SEXUAL ACTIVITY

I. Sexual Orientation

Sexual orientation is the sexual, emotional, or romantic attraction that a person feels towards another person. Over time, people's thoughts and feelings may change about their sexual attraction. It takes time for many people to understand who they are and who they're becoming. This includes understanding who someone is attracted to.

People do not voluntarily choose their sexual orientation. Some people may firmly feel that they know their sexual orientation. Other people might question their sexual orientation and need time or help to better understand what their sexual orientation is. Some types of sexual orientation include homosexual, heterosexual, gay, bisexual, and queer. There are many types of sexual orientations and people may change their sexual orientation identity over time. It's important to recognize that sexual orientation does not include gender. This means that terms related to gender (e.g., transgender, gender-nonconforming, or a-gender) aren't sexual orientations.

There are things you can do to support the people you serve who may question their sexual orientation. Examples include:

- Not using labels. Labels can be scary for people who are questioning their sexual orientation. Even if the person is questioning their gender, there's no need to use labels like "gay" or "bisexual." Let the person be the one to use a label when they are ready.
- Use Open-Ended Questions. It is best to avoid yes-or-no type questions like "Are you gay?" Instead, use open ended questions like "What types of thoughts have you had?" and "How are you feeling about those thoughts?"
- Listen without judgement. It is important that the people you serve are listened to without fear or judgement from others. If someone approaches you about their feelings around their sexual orientation, listen without judgement.
- Let the person choose their own path forward. People come to terms with their sexual orientation in their own way and at their own time. When supporting someone who is questioning their sexual orientation, encourage self-acceptance and open-mindedness. Let the person know you do not judge them whichever sexual orientation they identify with. Do not encourage someone you serve to identify as "straight," "gay," or any other sexual orientation. Only the person can determine their sexual orientation.

- Referring the person to a counselor or other professional. In some cases, the person struggling to identifying their sexual orientation may want or need the help of a professional to talk through their feeling about their experience with their sexual orientation. You can share with the person you serve that there are other people who can also help them work through these feelings, like a therapist.
- Education. The people you support might want information about sexual orientations and other LGBTQIA+ material. People have the right to education on this topic. If the person you support brings this topic up, you may share that there is information available for people to learn more about the LGBTQIA+ community and help the person access that information in a meaningful way.

II. Coming Out

Coming out refers to the process that people who are LGBTQIA+ go through as they work to accept their sexual orientation and gender identity and share that identity with others. Coming out can be a stressful and terrifying process for people. If someone comes out to you – that is, shares their LGBTQIA+ identity with you – it’s likely because that person trusts you and wants to share this information about themselves. If someone comes out to you, reassure them that they have your support. People who come out may worry that others won’t like them anymore, or think that they are weird or doing something bad. People who identify as part of the LGBTQIA+ community are not weird or bad, and OPWDD and its providers are committed to destigmatizing the LGBTQIA+ community.

Things You Might Say to Someone Who Just Came Out to You	Things You Should Not Say to Someone Who Just Came Out to You
<ul style="list-style-type: none"> • Thank you for trusting me. • I’m proud of you for telling me. • I’m glad you told me. I’m here for you. • I’m here for you no matter what. 	<ul style="list-style-type: none"> • I knew it. • Big deal. • That’s weird/gross! • No you’re not. • We don’t talk about that. • It’s just a phase. You’ll get over it. • You don’t look/sound gay. • I love gay guys! Can we be friends? • I hope you aren’t going to try and hit on me now. • It doesn’t matter to me.

If someone comes out to you, you might have some questions about it. It's important to be kind and not ask insensitive questions.

Questions You Might Ask Someone Who Just Came Out to You	Questions You Should Not Ask Someone Who Has Just Come Out to You
<ul style="list-style-type: none"> • How can I support you? • What pronouns do you use? • Have you told anyone else? How did it go? • Is there anyone else you would like to tell? Is there anyone who you don't want to know just yet? • Is there anything you'd like me to do to help you? Or would you just like me to listen? • Is it OK if I ask you some more questions about this? • Would you like me to get you some more information about LGBTQIA+ supports? • Would you like me to be with you when you tell your mom/doctor/friend/etc.? 	<ul style="list-style-type: none"> • Are you sure? • Which one of you is the man/woman? • How do you know? • When did you decide to become gay/trans/queer/etc.? • What's wrong with you? • How do you guys do it? • How do you know you're gay if you've never dated a woman? • Do you like to cross-dress? • Why didn't you tell me sooner?

Key take aways for supporting LGBTQIA+ people with intellectual and developmental disabilities:

- Listen and do not judge.
- Let them explore their gender and sexuality, with your guidance, so they can figure out who they are.
- Learn about the LGBTQIA+ community. Find reliable sources for more information if you need it.
- Be open-minded.
- Validate the person by using the pronouns they've told you to use.
- Include other members of the person's clinical team and circle of support, as appropriate, to make sure they have the support they need.
- Help the person explore involvement with LGBTQIA+ organizations if they are interested in doing so. These organizations can provide advocacy, community, education, and relationships that may be meaningful to the person you support.

III. Supporting People to Exercise their Right to Engage in Sexual Activity

There is an outdated presumption that people with developmental disabilities do not have sexual needs, and that they cannot engage in sexual activity. This isn't the case. People with developmental disabilities do have sexual needs, and they may want to engage in sexual activity. It's important that they have meaningful access to sex and sexual health education. This goes for people who identify as heterosexual as well as those who identify as part of the LGBTQIA+ community.

If someone shows an interest in sexual activity, you should bring this interest to their person-centered planning team to make sure the person has the support and information they need. This might include helping them get information about preventing sexually transmitted diseases, accessing birth control, boundary setting, family planning, or learning about the range of sexual activities. These skills can be difficult for anyone, but especially people with developmental disabilities. Giving them education and support can help them have safe sexual experiences. People with developmental disabilities have a right to this information.

If you are concerned that a person doesn't have the capacity to consent to sexual activity, you should bring this up with their clinical team. They will consider whether the person needs a capacity assessment. For more information on information about determining someone's capacity to engage in sexual contact, you can check out OPWDD ADM #2023-02

UNIT 5 – OTHER CONSIDERATIONS

I. Confidentiality

If someone shares their sexual orientation or gender identity with you, this information should only be shared with others that the person has allowed you to, or as determined by the treatment team based on an assessment of the need to share this information to support the person.

If you share someone's sexual orientation or gender identity without their consent, you are outing them. Outing someone can be upsetting or traumatizing to the person. It might even put them in dangerous situations. That's why you should only share someone's LGBTQIA+ status with people the person allows you to, except for when sharing it with the clinical team when necessary to develop appropriate services for the person (for example, counseling).

If someone has come out to you and they have not given you permission to talk to others about it, you should not tell their family or friends. The person has the right to choose when and how they come out. They can choose who they do and do not want to come out to.

People might change their mind about sharing their LGBTQIA+ status with others. They might initially say it's OK to talk to their parent, siblings, and friends about it. Later, they might change their minds. The person's choice about this communication must be respected.

If someone is struggling with coming out, or fears coming out to certain people, you might ask if they want help coming out to others. You can offer support, or encourage them to speak with a therapist or trusted friend/staff person for advice.

II. Medical Care

1. Gender Affirming Medical Care

People have the right to access gender-affirming medical care. Gender-affirming medical care is a supportive type of healthcare that helps people feel happy, healthy, and safe in their gender. Gender-affirming medical care helps make sure that someone's mental and physical needs related to their gender are met. This might include having access to therapists who specialize in counseling on gender-related issues or doctors who provide hormone therapy to people who are transitioning. Gender-affirming medical care isn't just for transgender people. Cisgender people also may need gender-affirming medical care, they just may not realize they're getting it. For example, a cisgender woman who has a breast augmentation is getting gender-affirming medical care.

2. LGBTQIA+ Medical Providers

People with developmental disabilities have the right to be supported by providers that specialize in serving LGBTQIA+ patients. This might include seeing a therapist that specializes in helping people work through LGBTQIA+ related issues, providers who affirm those in the LGBTQIA+ community, or doctors who have specialized training to help LGBTQIA+ patients.

It's a good idea for providers to have a list of medical providers that provide gender-affirming care and services specifically for LGBTQIA+ patients. Check with your supervisors to see if a list like this exists. If not, consider helping them to develop one.

III. Individual Education

As we've already learned, people with developmental disabilities have the right to education on sexual health, family planning, sexually transmitted disease prevention, and LGBTQIA+ information. This information must be provided if a person asks for it. However, sometimes, a person might show an interest in these topics without specifically asking for education material.

Providers should empower people by educating them on these issues before they're asked for information. Educating people on topics related to sex, sexual orientation, and LGBTQIA+ issues might be uncomfortable for some people, but the more we teach about these topics the less stigma there is about them. By educating people, we can make sure they know what healthy intimacy looks like and how to advocate for themselves on these issues.

IV. Rights Limitations and Reporting Requirements

1. Rights Limitations

This training discussed many rights that people have related to their gender identity and sexual orientation. People's rights cannot be limited unless there's a specific medical or behavioral reason to do so. If a provider needs to limit someone's rights, they must comply with OPWDD's rights limitation regulations (14 NYCRR 633.16).

2. Reporting Requirements

If any of a person's rights as described in this training are being limited without a rights limitation, it is a reportable incident. Incident reporting must take place.

Some examples of reportable incidents and notable occurrences:

Action	Possible Incident Type
A person has come out as gay. Staff taunt them and call them gay slurs.	Psychological abuse
A provider refuses or significantly delays seeking gender-affirming medical care for the person.	Neglect
Some staff aren't using the person's pronouns or letting them dress in accordance with their gender identity.	Sensitive Situation, Reportable Mistreatment

V. Complaints

If a person with developmental disabilities has any complaints about their services related to their gender identity or sexual orientation, or think they've experienced unlawful discrimination or harassment, they can ask for help. They might contact their Care Manager or another trusted person for help.

They can also file a complaint with the Division of Human Rights (DHR). This can be done by filling out a complaint form and sending it via e-mail or mail to the DHR. You can also call the DHR toll-free at (888) 392-3644. For more information on filing a complaint with the DHR, you can visit <https://dhr.ny.gov/complaint>.

Lastly, the person can contact their local Developmental Disabilities Regional Office (DDRO) if they have any questions or concerns about their services.

VI. Closing

We've reached the end of your OPWDD LGBTQIA+ training. We have reviewed different LGBTQIA+ terms, identified the differences between sex and gender, learned about different kinds of sexual orientations, and discussed ways to best serve people who identify as part of the LGBTQIA+ community. Thank you for your time. Together, we can support and celebrate people with developmental disabilities who identify as part of the LGBTQIA+ community and help them live their fullest, most authentic lives.