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Evaluating a Safe Space Training for Professional School Counselors and Trainees Using a Randomized Control Group Design

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EVALUATING A SAFE SPACE TRAINING FOR SCHOOL COUNSELORS AND TRAINEES USING A RANDOMIZED CONTROL GROUP DESIGN

School counselors need to advocate and act as an ally for all students. Safe Space, a training designed to facilitate competency for working with and serving LGBTQ youth (i.e., LGBTQ competency), has received increased attention in the field of school counseling. However, limited empirical support exists for training interventions such as Safe Space, with only one study to date examining its effectiveness for graduate psychology students (see Finkel, Storaasli, Bandele, & Schaefer, 2003). This study used a randomized pretest-posttest control group design to evaluate and examine the impact of Safe Space training on competency levels of a sample of school counselors/ school counselor trainees and to explore the relationship between LGBTQ competency and awareness of sexism and heterosexism.

esbian, gay, bisexual, transgender, and questioning (LGBTQ) youth are at a disproportionate risk for depression, suicide, psychiatric care and hospitalization, poor school performance, truancy, running away, substance abuse, and sexually risky behaviors (Stone, 2003; Vare & Norton, 1998; Weiler, 2004). Suicide is the most significant risk, with studies indicating that 20-40% of sexual minority adolescents account for all completed suicides even though this student group represents less than 10% of the adolescent population (see Almeida, Johnson, Corliss, Molnar, & Azreal, 2009; Borowsky, Ireland, & Resnick, 2001; Centers for Disease Control and Prevention, 2011; Cook, 1991; D'Augelli et al., 2005; Eisenberg & Resnick, 2006; Garofalo, Wolf, Wissow, Woods, & Goodman, 1999; Gibson, 1989; Goldfried, 2001; Goodenow, 2003; Gould, Greenberg, Velting, & Shaffer, 2003; Haas et al., 2011; Marshal et al., 2011; Paul et al., 2002; Remafedi, 1999; Udry & Chantala, 2002). Research has suggested that sexual minority youth are twice (Russell & Joyner, 2001) to five times (Hatzenbuehler, 2011) more likely to attempt suicide as compared to their heterosexual peers.

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School counselors should understand that LGBTQ adolescents are at an increased risk for suicide from the stress, discrimination, isolation, and harassment that these individuals face based on affectional/sexual orientation, not simply due to their affectional/sexual orientation (Kitts, 2005). When considering the multiple risk factors and the unsupportive school environment (Muñoz-Plaza, Quinn, & Rounds, 2002; Palmer, Kosciw, & Bartkiewicz, 2012; Weiler, 2004) that sexual minority individuals encounter, the need for supportive individuals in the school is apparent (Reynolds & Koski, 1994). Accordingly, the American School Counselor Association's (ASCA's) position statement on *The Professional School Counselor and Bullying, Harassment, and Violence-Prevention Programs: Supporting Safe and Respectful Schools* (2005) states that, as a part of the school counselor's comprehensive program, violence prevention programming needs to include development of cultural competence, prevention initiatives, and intervention strategies. It stands to reason that school counselors are in need of training specific to the LGBTQ population given that school counselors work with at-risk youth and youth who are suicidal (Christianson & Everall, 2009) and LGBTQ youth make up a large percentage of suicidal individuals (Marshall et al., 2011).

Schools are a pertinent location for interventions geared towards assisting sexual minority youth because many peer- and school-related factors are significant sources of symptoms for these concerns (Head, 2010; Teasdale & Bradley-Engen, 2010). Furthermore, 21% and 51% of school counselors in elementary and middle/high schools, respectively, noted that they encountered a student presenting with affectional/sexual orientation issues (Fontaine, 1998). These statistics are likely underestimated if students avoid those who are not receptive or affirming of sexual minority issues (Goodrich & Luke, 2009), and school counselors may not identify LGBTQ students.

Advocating and being an ally for all students are ethical and legal obligations for school counselors (American Counseling Association [ACA], 2005; ASCA, 2007; ASCA, 2010; ASCA, 2012; Weiler, 2004). Important advances in the field of school counseling specifically address this issue. In particular, ASCA's *The Professional School Counselor and LGBTQ Youth* position statement (2007) states that school counselors

are aware of their own beliefs about sexual orientation and gender identity, are knowledgeable of the negative effects that result from stereotyping individuals into rigid gender roles, and are committed to the affirmation of youth of all sexual orientations and identities. (p.31)

ASCA's position statement on *The Professional School Counselor and Cultural Diversity* (2009) discusses the school counselor's role in providing counseling that is culturally competent, promoting the celebration of cultural diversity, and fostering awareness of cultural diversity. The ASCA National Model (ASCA, 2012) makes clear that

ADVOCATING AND BEING AN ALLY FOR ALL STUDENTS ARE ETHICAL AND LEGAL OBLIGATIONS FOR SCHOOL COUNSELORS.

"School counselor leaders are culturally responsive change agents who integrate instructional and school counseling best practices to initiate, develop and implement equitable services and programs for all students" (p. 11). Furthermore, the ASCA (2010) and ACA (2005) codes of ethics both discuss the importance of advocacy, social justice, and multicultural competency specific to the LGBTQ population.

Schools and school counselors have a unique opportunity to facilitate growth, awareness, knowledge, and understanding so that both sexual minority and heterosexual individuals can learn and develop in a positive

school environment. Having a supportive adult present in the school can provide a protective factor for sexual minority youth (McCabe & Rubinson, 2008). LGBTQ students who perceived there was no adult in the school that they could talk to were more likely to be threatened at school and to have attempted suicide numerous times in the previous year (Goodenow, Szalacha, & Westheimer, 2006). By providing an educative and affirming environment, school counselors assist in dispelling myths about LGBTQ individuals. Further, the school and community as a whole can experience a positive impact when school counselors support, understand, and perpetuate accurate perceptions of LGBTQ individuals. (Black & Underwood, 1998; Weiler, 2004).

The Transforming School Counseling Initiative (Seashore, Jones, & Seppanen, 2001) addressed the need for school counselors-in-training to become advocates for "system change" by striving to eliminate obstacles that hinder the success and promotion of all students (p. 5). To advocate for LGBTQ youth, school counselors must receive adequate competency training.

That is, expanding their knowledge, awareness, and skills for working with these students requires attention to school counselors' bias and self-awareness, knowledge specific to affectional/sexual orientation concerns and the intersection of heterosexism and homophobia with other forms of oppression, and advocacy and other intervention skills (Curry & Hayes, 2009). It is possible that "anti-homosexual attitudes perpetuate discrimination against gay and lesbian youths within the schools and society, as a whole" (Riggs, Rosenthal & Smith-Bonahue, 2011, p. 208). School counselors must be aware of

HAVING A SUPPORTIVE ADULT PRESENT IN THE SCHOOL CAN PROVIDE A PROTECTIVE FACTOR FOR SEXUAL MINORITY YOUTH

the beliefs and attitudes they hold and bring with them into the counseling relationship that may ultimately interfere with the therapeutic process and relationship (DePaul, Walsh, & Dam, 2009; Gonsiorek, 1988; Kissinger, Lee, Twitty, & Kisner, 2009).

A qualitative study examined experiences of sexual minority adolescents and found that school counselors used language that was heterosexist, displayed discomfort when discussing affectional/sexual orientation issues, and acted as if in disbelief when students came out to them (Rutter & Leech, 2006). Reynolds and Koski (1994) stated,

Just as counselors today are expected to not tolerate a lack of respect for racial, ethnic, and religious differences, so should the counselor be unwilling to tolerate a lack of respect for LGB people and issues, whether it be from students or staff. (p. 92)

SAFE SPACE TRAINING

Scholarship focused on LGBTQ issues has clearly stated the need for training that strengthens LGBTQ competency (Walker & Prince, 2010). Further, Goldman (2008) stated that training and courses need to be available for all educators, elementary through college/university, at all levels of staff. A study examining perspectives of school responses to the bullying of LGBTQ students found that training for school personnel was an important factor to creating a safe environment for sexual minority youth (Varjas et al., 2007). Although research indicates that training is necessary to increase knowledge, awareness and skills, little

research has been done on the effects of training school counselors in regard to sexual minority youth (Curry & Hayes, 2009; Pearson, 2003). Some literature has indicated positive relationships between knowledge, awareness, and skill for those who have attended trainings pertaining to sexual minority individuals, but this information is typically conceptual or survey based. For example, Satcher and Leggett (2007) found that, among the school counselors surveyed, positive attitudes toward LGBTQ individuals were associated with individuals who had attended a training about sexual minority individuals.

In another study, Riggs, Rosenthal, and Smith-Bonahue (2011) found that exposure to information related to LGBTQ issues had positive effects on pre-service teachers' knowledge, attitudes, and anticipated behaviors. They also suggested that such trainings may be "one line of defense against the hostile and discriminatory school environments that many sexual minority youth endure" (p. 208). Pearson (2003) called attention to the lack of training in the area of sexual minority issues: "The debate in the counseling literature is no longer *whether* to include training on LGB issues but *how*" (p. 293). Although infusing education and issues in all classes and outlining specifics in multicultural counseling classes is vital, this may not be enough to address specific training needs in regard to LGBTQ individuals (Carroll & Gilroy, 2001). Given the unique concerns and many risk factors LGBTQ individuals encounter, a separate training or seminar including educational components and experiential activities, in addition to the previously mentioned educational endeavors, is an important part of effective training (Pearson, 2003; Phillips, 2000).

Increasing knowledge, awareness, and skills regarding LGBTQ individuals are important components of multicultural competencies. It is important that school counselors review and are familiar with the multicultural competencies with respect to LGBTQ individuals. Research literature provides several independent components shown to be successful in increasing knowledge and awareness: (a) self-reflections of beliefs and attitudes held about LGBTQ individuals (Dillon et al., 2004), including anti-LGBTQ bias, homophobia and heterosexism (Phillips, 2000); (b) exploration of early childhood messages about LGBTQ individuals and challenge of those negative beliefs and/or biases (Pearson, 2003); and (c) acknowledgment and discussion of benefits and challenges to the coming out process (Callahan, 2001). The Gay, Lesbian and Straight Education Network (GLSEN) Safe Space training (2006) includes these components through individual and group processing, which assists participants in learning from each other.

School counselor advocacy for LGBTQ individuals is an important component in response to the call for a comprehensive approach to counselor advocacy (Myers, Sweeney, & White, 2002; Smith & Chen-Hayes, 2004). By providing training such as the Safe Space training that may increase knowledge, awareness and skills for working with LGBTQ youth, school counselors may be able to provide supportive relationships that will seek to greatly impact the quality of life and serve as a protective factor for many LGBTQ individuals (Goodenow et al., 2006; Teasdale & Bradley-Engen, 2010).

Empirical support is limited for existing training interventions, such as Safe Space, with only one study to date examining its effectiveness for psychology graduate students (see Finkel, Storaasli, Bandele, & Schaefer, 2003). Finkel and colleagues (2003) conducted the first empirically based study to implement and evaluate an actual training (note: the study refers to the training as "Safe Zone" which

is another term for Safe Space). Finkel et al. did not specify research questions or research design components but articulated how the Safe Zone training for two training sessions was implemented for students, faculty, and staff at one particular school. Neither did they describe data analysis procedures. The current study is important since no research has (a) examined the effectiveness of the Safe Space training in terms of competency levels or (b) attended to the relationship between LGBTQ competency and awareness of related oppressions (heterosexism, sexism).

PURPOSE AND RESEARCH QUESTIONS

A randomized control group pretest-posttest design was used to evaluate the impact of Safe Space training on school counselors' and school counselor trainees' competency levels across various demographic variables and to explore the relationship between LGBTQ competency and awareness of sexism and heterosexism. Two research questions were examined. First, what is the impact of Safe Space training on school counselors' and school counselors-in-training's knowledge, attitudes, and skills for working with LGBTQ individuals (i.e., LGBTQ competency)? And second, for school counselors and school counselors-in-training, is there a significant relationship between awareness of sexism and heterosexism and LGBTQ competency?

Hypothesis 1, corresponding to Research Question 1, was, when controlling for previous training and pretest scores, a significant positive relationship exists between receiving the Safe Space training and LGBTQ competency. That is, those who participate in the Safe Space training will report significantly higher competency as evidenced by a positive change in the total score on the Sexual Orientation

Counselor Competency Scale (SOCCS; Bidell, 2005). The authors controlled for pretest scores because the interaction between pretesting and treatment represents a major external validity threat to this particular research de-

TO ADVOCATE FOR LGBTQ YOUTH, SCHOOL COUNSELORS MUST RECEIVE ADEQUATE COMPETENCY TRAINING.

sign (see Dimitrov & Rumhill, 2003). In this statistical test, previous training (i.e., LGBTQ competency training) and pretest scores were the covariates to account for school counselors and school counselors-in-training's diverse background and exposure to the topic. The study controlled for this to help minimize error to sampling issues (e.g., primarily use of trainees from intact classrooms). Hypothesis 2 (research question 2) was, when controlling for previous training, there is a significant relationship between awareness of sexism and heterosexism and LGBTQ competency by group (SOCCS and Privilege and Oppression Inventory [POI] scales; Hays, Chang, & Decker, 2007).

METHOD

Participants and Procedure. Assuming Power at .80 and a moderate effect size per statistical analysis, researchers performed a priori power analysis using G*Power 3.1 (Faul, Erdfelder, Buchner, & Lang, 2009). The SOCCS has an overall mean of 4.64 ($SD = 0.89$; Bidell, 2005). Assuming a two-sided test with $\alpha = 0.05$, a sample size of 36 per group (72 total) was adequate to provide 80% power to detect a difference in mean scores between the groups of 0.60, or an effect size of 0.67.

The first author recruited school counselors and school counselor trainees (SCTs) at a state level school counseling conference in a southeastern U.S. state by providing a sign-up sheet for individuals interested in such a training. Other participants and faculty at local universities who heard

about this training contacted the first author. This initial pool of potential participants and additional participants were recruited by e-mailing graduate program directors and local school counselors.

Participants included a total of 77 school counselor trainees in three universities in a Mid-Atlantic state and school counselors in a local school district participating in 1 of 7 Safe Space trainings. Out of the 77 total participants, only 74 survey packets were usable, i.e., contained pretest and posttest data. Of the 74, 62 (83.8%) were school counseling trainees and 12 (16.2%) were school counselors.

The mean age was 27.95 ($SD = 7.42$; range = 22 to 57 years). The frequency and gender of the attendees included: 23 females, 1 male (Training 1); 7 females, 2 males (Training 2); 4 females, 2 males (Training 3); 10 females, 1 male (Training 4); 6 females, 2 males (Training 5); 8 females, 1 male (Training 6); and 7 females, 1 male (Training 7). The total number of males and females for the sample was 9 (12.2%) and 65 (87.8%), respectively. With respect to affectional/sexual orientation, only one participant reported being gay with the rest of the sample reporting a heterosexual identity.

For race/ethnicity, 47 (63.5%) individuals identified as White/European American, 19 (25.7%) African American, 3 (4.1%) Biracial/Multiracial, 2 (2.7%) Asian American, 2 (2.7%) Latin American, and 1 (1.4%) reporting as Native American. The mean client caseload (whether in current work setting, internship as a school counselor-in-training, or no caseload reported) was reported to be 71 with a range of 0-500 clients ($SD = 158.18$). The number of individuals reporting working in an elementary school was 14 (18.9%); middle school: 9 (12.2%); high school: 14 (18.9%); alternative: 2 (2.7%); both elementary and middle:

1 (1.4%); and all three school levels: 1 (1.4%). Twenty-four (32.4%) reported 'no school level,' which could be due to the large sample of participants that were currently school counselor trainees. For statistical purposes, those identifying as "alternative", "both elementary and middle", and "all three school levels" were coded as "other".

Individuals were randomly assigned to a treatment or a control group and all participants received the training. Since assignment was random, school level or other demographic characteristics were not taken into consideration. The first author conducted the first six trainings in school counseling classes at three universities over two

to provide 80% power to detect a difference in mean scores between the groups of 0.60, or an effect size of 0.67.

Description of Intervention. The training chosen for this study was the *GLSEN Safe Space: A How-to Guide for Starting an Allies Program* (2006). GLSEN is a national leader in research, education, and resources about safe schools with the organization's focus on sexual minority individuals (Kosciw, Greytak, Bartkiewicz, Boesen, & Palmer, 2012). An ally is defined as someone "who works to end oppression by supporting and advocating for the oppressed population" (GLSEN,

print and distribute their training information, thus making this a viable option for school counselors to utilize in educational programming. Their manual outlines specific information for planning and implementing a Safe Space training and is user-friendly in that those trained can implement the program themselves. The authors evaluated other Safe Space programs, but found that they did not offer the same information, details, or depth of materials as did the GLSEN training. In addition, some of the training materials that were discussed in research articles could not be located. After the completion of this study using the GLSEN training from 2006, GLSEN modified their Safe Space training (see GLSEN, 2009). Prior to this study, there was no research validating this or other Safe Space/GLSEN trainings.

The training used was modified slightly to specifically address school counselors. For example, the Safe Space training (GLSEN, 2006) manual outlined a section called "Why We're Here," describing the purpose of this section as, "to increase awareness of why a Safe Space program is needed at your school" (p. 15). The manual provides statistics related to LGBTQ students in schools; however, the study authors added statistics pertaining to school counselors, training, and ASCA (ASCA 2012; Borowsky et al., 2001; Cook, 1991; D'Augelli et al., 2006; Fontaine, 1998; Garofalo et al., 1999; Gibson, 1989; Goodenow, 2003; Gould et al., 2003; Paul et al., 2002; Remafedi, 1999; Russell & Joyner, 2001; Stone, 2003; Udry & Chantala, 2002; Vare & Norton, 1998; Weiler, 2004) for purposes of training school counselors. Further, the authors slightly modified each specific section outlined in the manual to pertain to school counselors, schools, and specific needs therein. In summary, this training was a 3-hour, manualized program designed to educate individuals about issues related to the LGBTQ population and provide strategies for support and intervention (GLSEN, 2006).

THIS TRAINING INCLUDED DISCUSSIONS OF HOW TO CHANGE NON-AFFIRMATIVE CLIMATES WHILE ENSURING ACTIVE AND SAFE CONVERSATIONS WITH ALL STUDENTS ABOUT LGBTQ ISSUES.

semesters. The seventh training, which included SCTs and school counselors, was not in a school counseling class and was held at one of the three universities. The date range of trainings was September 2009 to February 2010.

Workshop attendance ranged from six to 24 participants. Prior to conducting analysis on the entire sample, the authors examined mean test score differences by group assignment. A MANOVA was conducted to ensure that no significant differences existed in SOCCS and POI total posttest scores based on training group. No significant differences were noted (Wilks' $\Lambda = 1.32, p = .21, \text{partial } \eta^2 = .107, P = .712$). Assuming Power at .80 and a moderate effect size per statistical analysis, researchers performed a priori power analysis using G*Power 3.1 (Faul et al., 2009). The SOCCS has an overall mean of 4.64 ($SD = 0.89$) (Bidell, 2005). Assuming a two-sided test with $\alpha = 0.05$, a sample size of 36 per group (72 total) was adequate

2006, p. 4). This Safe Space training aimed to increase competency (i.e., knowledge, awareness, and skills) for working with LGBTQ individuals.

Further, the GLSEN Safe Space training (2006) included role-playing exercises and case studies to modify non-affirmative school environments, which are useful for skill development (Pearson, 2003). In addition to knowledge and awareness, the training provided skills training for school counselors and offered support for counselors, teachers, and administrators in how to intervene in homophobia responses in the school setting. DePaul, Walsh, and Dam (2009) discussed the importance of the school counselors' role in educating teachers and school staff on issues related to sexual minorities. This training included discussions of how to change non-affirmative climates while ensuring active and safe conversations with all students about LGBTQ issues.

GLSEN offers materials free of charge and encourages others to

Data Collection. The sequence of data collection for six of the trainings was as follows. First, the first author distributed a pretest packet 4 weeks before scheduled training to all participants for each training except one. Due to weather and scheduling conflicts, the professor of one class gave standardized instructions for giving out the pretest and posttests for one group. (During this time, the first author was available by telephone to answer any questions that might arise from the participants). Second, participants in each group were randomly assigned to treatment and control groups for statistical purposes; the first author gave the posttest packet three weeks following the pretest packet to the control groups for all trainings except one. Finally, a week following the posttest period for the control group, the training was provided, and the first author distributed the posttest packet to all participants at the end of each training. Data from those participants who had not served as controls made up the intervention group in statistical analysis.

One of the seven trainings (school counselors and school counseling trainees) followed the same timeline as the first six trainings; however, the first author distributed pre- and posttest packets through e-mail. Since this training was not conducted in an intact school counseling class, gathering the participants together multiple times for pre- and posttest purposes was not seen as beneficial or feasible. To maintain confidentiality, participants returned packets via e-mail or fax to the second author, who had a secure location at the university where the training was held. Any identifying information associated with their return distribution was removed.

Safe Space Training. The first author conducted the training according to the manual (see GLSEN, 2006) for all trainings. The trainer outlined information and statistics on LGBTQ youth, discussed through group work ways in which anti-LGBTQ bias hurts everyone, asked participants to reflect on beliefs and attitudes held about LGBTQ individuals, recognized biases,

discussed benefits and challenges to coming out, and provided intervention ideas and specific techniques for intervening regarding homophobia and heterosexual bullying in schools.

Instrumentation

Demographic Sheet. The demographic information included information on participant age, gender, ethnicity, affectional/sexual orientation, religious/spiritual orientation, degree(s) held, training and program information, experience, number of clients seen during the past academic year with LGBTQ or affectional/sexual orientation concerns, approximate total number of clients on caseload, and school level information. Demographic data were used to gain an understanding of participants' diversity and aid in potential multicultural implications.

GLSEN OFFERS MATERIALS FREE OF CHARGE AND ENCOURAGES OTHERS TO PRINT AND DISTRIBUTE THEIR TRAINING INFORMATION.

Sexual Orientation Competency Scale (SOCCS). The SOCCS (Bidell, 2005) examines knowledge, attitudes, and skills of counselors with respect to sexual minority clients. The scale was used in pre- and posttest to measure the effectiveness of the training program toward increasing LGBTQ competency. The 29-item instrument uses a 7-point Likert scale (1 = *not at all true* to 7 = *totally true*) that participants use to endorse various statements related to affectional/sexual orientation concerns. Higher scores indicate increased levels of counselor competency regarding affectional/sexual orientation. Sample items include "It would be best if my clients viewed a heterosexual lifestyle as ideal" and "Being born a heterosexual person in this society carries with it certain advantages." According to Bidell (2005), the SOCCS is a psychometrically valid (i.e., evidence of criterion-related and convergent validity) and reliable

instrument with an overall coefficient alpha of .90 (Ponterotto & Charter, 2009), with .76 on the knowledge, .88 on the awareness, and .91 on the skills subscales. Additionally, the overall SOCCS one-week test-retest correlation coefficients were .84, the Attitudes subscale was .85, the Skills subscale was .83, and the Knowledge subscale was .84 (Bidell, 2005).

Privilege and Oppression Inventory (POI). The POI (Hays et al., 2007) is a 39-item measure of awareness of privilege and oppression. This scale is self-report and uses a 6-point Likert scale to examine one's knowledge and understanding of privilege and oppression as it exists across race, gender, affectional/sexual orientation, socioeconomic status, and religion/spirituality. The Likert scale ranges from 1 = *strongly disagree* to 6 = *strongly agree*, with lower score

indicating a low level of awareness for each subscale.

The POI has four subscales: white privilege awareness, heterosexism awareness, Christian privilege awareness, and sexism awareness (designed to assess one's awareness of privilege and oppression as related to these topics; Hays et al., 2007). Because oppression awareness related to affectional/sexual orientation and gender were most closely related to LGBTQ competency, for the purposes of this study, the authors used only the subscales of heterosexism awareness and sexism awareness. The POI demonstrated content validity evidence (i.e., use of six-person expert panel; refer to Rubio, Berg-Weger, Tebb, Lee, Rauch, 2003) and internal consistency evidence for each subscale (i.e., alphas were .81 and .79 for heterosexism awareness and sexism awareness, respectively, for the original scale); therefore, using certain subscales as

opposed to using the entire inventory is acceptable (DeVellis, 2003).

Reliability estimates for this sample for the POI (i.e., heterosexism awareness and sexism awareness subscales) were .74 (total sample), .87 (control group posttest), and .93 (intervention group posttest). The POI validation tests revealed that convergent validity was significant at the .01 alpha level with heterosexism awareness ($r = .35$) and sexism awareness ($r = .32$; Hays et al., 2007). The two POI scales were used to measure the variables awareness of heterosexism and awareness of sexism outlined in research question 2. Instruments were coded for matching pre- and posttests.

RESULTS

The total sample ($N = 74$) had a total SOCCS mean of 4.41 ($SD = .67$) at pretest and 4.31 ($SD = .66$) at posttest for the control group ($n = 31$). The intervention group ($n = 43$) was 4.94 ($SD = .82$) at posttest. For the POI, the sample had a mean of 4.99 ($SD = .65$) at pretest and 4.99 ($SD = .55$) at posttest for the control group. At posttest, the intervention group had 5.05 ($SD = .80$) (see Table 1).

The Impact of Safe Space Training on LGBTQ Competency

To test Hypothesis 1 (controlling for previous training and pretest scores, a significant positive relationship existed between receiving the Safe Space training and LGBTQ competency), an ANCOVA was run to examine the training's influence on knowledge, awareness, and skill levels when controlling for previous training experiences and pretest scores. Levene's test was nonsignificant for the pretest group data, indicating that the group variance was equal, hence the assumption of homogeneity of variance was not violated ($F [1,72] = 1.484$, $p = .23$). The ANCOVA indicated that a significant relationship existed between individuals who received the training and higher levels of knowledge,

TABLE 1 MEANS AND STANDARD DEVIATIONS FOR THE POI AND SOCCS TOTAL SCALES PER GROUP ASSIGNMENT

Group	Pretest	Posttest Control	Posttest Intervention
SOCCS Total	4.47 (.67)	4.31 (.66)	4.94 (.82)
POI Total	4.99 (.65)	4.99 (.55)	5.05 (.80)

Note. Standard deviations are presented in parentheses following mean estimates.

TABLE 2 CORRELATION STATISTICS FOR PRETEST TOTALS FOR SOCCS AND POI

		POI Pre Total	SOCCS TOTAL
POI Pre Total	Pearson Correlation	1.000	.509**
	Sig. (2-tailed)		.000
	N	74.000	74
SOCCS_Total	Pearson Correlation	.509**	1.000
	Sig. (2-tailed)	.000	
	N	74	74.000

** Correlation is significant at the 0.01 level (2-tailed).

awareness, and skills ($F [3,74] = 9.844$, $p = .002$, partial $\eta^2 = .12$, $P = .87$). Hypothesis 1, those who in the intervention group of the Safe Space training will report significantly higher competency levels, was supported. Overall, there was a significant change in SOCCS scores for the intervention but not the control group.

Awareness of Sexism and Heterosexism and LGBTQ Competency

To test Hypothesis 2 (when controlling for previous training, there was a significant relationship between awareness of sexism and heterosexism and LGBTQ competency), a partial correlational analysis was conducted between the SOCCS and POI total scales by test administration. Partial correlations allow for controlling the impact a third variable (i.e., previous training) has on other variables (Field, 2009). There was a significant positive relationship between awareness of sexism and het-

erosexism and LGBTQ competency for the pretest administration ($r [74] = .51$, $p < .01$, $r^2 = .26$) (see Table 2), posttest control group administration ($r [30] = .69$, $p < .01$, $r^2 = .38$) (see Table 3), and posttest intervention group administration ($r [41] = .61$, $p < .01$, $r^2 = .48$) (see Table 4). Rounded off, these findings indicate moderate effect sizes for test administrations (Cohen, 1992). Hypothesis 2 was supported; therefore, a significant relationship existed between awareness of sexism and heterosexism and LGBTQ competency.

DISCUSSION

This study sought to evaluate and examine the impact of a Safe Space training on school counselors' and SCTs' levels of knowledge, awareness, and skills related to LGBTQ competency and the relationship between heterosexism and sexism awareness. Findings from the present

TABLE 3 CORRELATION STATISTICS FOR POSTTEST CONTROL GROUP ONLY FOR SOCCS AND POI

		POI Pre Total	SOCCS TOTAL
POI Total Control	Pearson Correlation	1.000	.692**
	Sig. (2-tailed)		.000
	N	32.000	30
SOCCS Total Control	Pearson Correlation	.692**	1.000
	Sig. (2-tailed)		.000
	N	30	30.000

** Correlation is significant at the 0.01 level (2-tailed).

TABLE 4 CORRELATION STATISTICS FOR POSTTEST INTERVENTION GROUP ONLY FOR SOCCS AND POI

		POI Pre Total	SOCCS TOTAL
POI Total Tx	Pearson Correlation	1.000	.613**
	Sig. (2-tailed)		.000
	N	42.000	41
SOCCS Total Tx	Pearson Correlation	.613**	1.000
	Sig. (2-tailed)		.000
	N	41	43.000

** Correlation is significant at the 0.01 level (2-tailed).

study contribute to the literature on advocating for LGBTQ students and assisting school counselors and school counselor trainees in acquiring the training necessary to face the challenges and provide support to assist schools in serving all of their unique students. This article provides empirical evidence of a best practice training for school counselors as a means of increasing school counselor knowledge, awareness, and skills as an element of LGBTQ competency.

With respect to the effect of Safe Space training on LGBTQ competency, an overall analysis (i.e., total SOCCS score) indicated a significant relationship existed between individuals who received the training and higher levels of knowledge, awareness, and skills.

Results also indicated statistical significance and small to large effect sizes with respect to the relationship between heterosexism and sexism awareness (i.e., total POI score) and LGBTQ competency. Specifically, greater awareness of heterosexism and sexism related to higher levels of knowledge, awareness, and skills. This finding is consistent with the conceptual literature that suggests greater training is related to reduced incidences of homophobia and heterosexism (DePaul et al., 2009; GLSEN, 2006; Pearson, 2003; Phillips, 2000). In effect, practicing school counselors, school counselors-in-training, guidance directors, and school counselor educators now have an evidence-based training for use in professional development. Thus,

LGBTQ individuals can be assisted in that effective training will reduce homophobia and heterosexism, making schools safer for all students.

Implications

School counselors have noted their interaction with sexual minority youth (Fontaine, 1998). Yet literature has also extensively highlighted the lack of training in this area (Carroll & Gilroy, 2001; Curry & Hayes, 2009; Goldman, 2008; O’Connell, Atlas, Saunders, & Philbrick, 2010; Pearson, 2003; Reynolds & Koski, 1993; Riggs et al., 2011; Rutter & Leech, 2006; Satcher & Leggett, 2009). Given the many risk factors sexual minority students face, such as suicide, psychiatric care and hospitalization, depression, running away, substance abuse, sexually risky behaviors, poor school performance, and truancy (Stone, 2003; Vare & Norton, 1998; Weiler, 2004), it is imperative that school counselors are trained in how to best assist these students. Since school-related factors are significant sources of symptoms for concerns, schools have a unique responsibility in offering interventions that assist sexual minority youth (Head, 2010; Teasdale & Bradley-Engen, 2010). While understanding that having a supportive adult present in the school can provide a protective factor for sexual minority youth (McCabe & Rubinson, 2008), school counselors are able to gain the training needed. Since LGBTQ students who perceived there was no adult present in the school that they could talk to were more likely to have been threatened at school and to have attempted suicide numerous times (Goodenow, et al., 2006), school counselors with increased competencies in this area may impact mental health concerns and, eventually, suicide rates.

Multiple ASCA position statements (2005, 2007, 2009), the ASCA National Model (2012), and other important advances in the field of school counseling (Seashore et al., 2001) have continued to address the issue of advocacy. Further, while the many articles calling for increased school coun-

selor competency in serving LGBTQ students has been extremely important for the field, direction and evidence for answering the 'how' is lacking. This leaves school counselors and counselor educators ill equipped and confused about how to alleviate this issue. In terms of answering the resounding call to action, this study provides evidence of an effective training.

Scholars have noted the responsibility of school counselors in educating teachers and other school staff on issues specific to sexual minorities (DePaul et al., 2009). By participating in this study, school counselors have been provided essential information that not only assists in their training, but provides them with essential information for conducting and carrying out other trainings as well. Further implications are noted in terms of the train-the-trainer model: the first author gave

not limited to addressing LGBTQ issues but those of the entire student population and school/community climate as a whole. School counselors could also adapt activities presented in the trainings for classroom guidance lessons and use them to enhance character education initiatives. "Schools that effectively address and prevent the perpetration of harassment and bullying also are proactive at the classroom level" (Luecke, 2011, p. 143).

School counselors can benefit from this study in multiple ways. School counselors could use this study to impact school climate by providing a Safe Space in-service training for their school. School counselors could also use the information presented in this study as an example of how to evaluate a training they have provided for educators in their schools or

However, although some time lapse occurred between administrations, memory and practice effects may have influenced responses. Future research may include more longitudinal data collection to minimize this threat further. An additional limitation refers to the instrumentation used in this study. The SOCCS and POI appeared to be sound instruments with good psychometric properties, but, as with any assessment, it is important to consider the possibility that other information could go undetected. For example, the measures may not have assessed additional aspects of LGBTQ competency and/or other issues related to oppression awareness. Future research may include other quantitative and qualitative measures of competency and oppression awareness.

Selection bias is another important threat to consider for this particular study. Those who self-selected to participate in the Safe Space trainings may be more motivated to receive training than school counselors in general. In terms of pretest scores, if the individuals were more motivated and/or more LGBTQ competent than the average school counselor, for example, this could have affected the study's ability to show improvement after training. Further, selection bias exists based on ratio of trainees to practitioners; the sample primarily included school counselor trainees. Selection bias is present in this study since more trainees self-selected to participate than did practitioners. Future research should include a larger sample size to increase power and to further examine the impact of training on LGBTQ competency. Although the authors attempted to garner the appropriate sample size for this study, attrition prior to the workshops precluded additional data analysis.

A SIGNIFICANT RELATIONSHIP EXISTED BETWEEN INDIVIDUALS WHO RECEIVED THE TRAINING AND HIGHER LEVELS OF KNOWLEDGE, AWARENESS, AND SKILLS.

each participant all training materials used and discussed information in the training packets so that participants could hold trainings at their own schools. By receiving this training, school counselors are equipped to train teachers, staff, and other school personnel. School counselors gain the tools and information for talking with school administration and others interested in learning more about this training. Furthermore, school counselors, with their education and expertise in lifespan development, psychosocial implications, and related interventions and services (Milsom, Goodnough & Akos, 2007), are uniquely suited to implement such a training (House & Hayes, 2002).

The training discusses specifically how providing a positive climate for all affects all students, not just those identifying as LGBTQ. By understanding how anti-gay bias can hurt everyone, this training is

districts. District leaders, guidance directors, supervisors of school counselors, counselor educators, and school counselors-in-training also could use this study to assist in planning and advocating. Specifically, this study could be used for trainings, in-services, and other professional development initiatives aimed at addressing the needs of the LGBTQ population.

Limitations and Future Research

Although the design of this study attempted to address several potential threats to validity, readers should still take caution in interpreting the findings. First, testing is a potential threat as participants were administered a pretest and posttest and could have been familiar with or cued into the test format and purpose. Given that test-retest reliability of the SOCCS was relatively high, this was not likely a significant threat in this study.

CONCLUSION

As a profession, school counselors, school counselors-in-training, and counselor educators can no longer expect to progress while simply repeating

the call to action heard over the past few decades or blaming school counselors for their lack of training. To advocate for LGBTQ youth is to advocate for adequate competency training such as the one presented in this study. At the school level, district supervisors, student service directors, and administrators alike can advocate for this training in their school districts. At the preparation level, colleges, universities, and counseling centers also can advocate for this training in order to prepare school counselor trainees. By gaining knowledge, awareness, and skills to assist LGBTQ individuals, schools can move from being unsafe to affirming.

This study has provided information to assist all helping professionals working with LGBTQ individuals. Specifically, the study revealed that a significant relationship existed between individuals who received the training and higher levels of knowledge, awareness, and skills. Results also indicated statistical significance with respect to the relationship between heterosexism and sexism awareness and LGBTQ competency. This article provides empirical evidence of a best practice training for school counselors as a means of increasing school counselor knowledge, awareness, and skill as an element of LGBTQ competency. In effect, practicing school counselors, school counselors-in-training, guidance directors, and school counselor educators now have an evidence-based training for use in professional development.

With increased research in the area, the school counseling profession can start to answer this call and start to shift its focus from LGBTQ youth being an “at-risk” population, instead seeking to understand their unique perspectives, experiences, and ways of development. ■

BY RECEIVING THIS TRAINING, SCHOOL COUNSELORS ARE EQUIPPED TO TRAIN TEACHERS, STAFF, AND OTHER SCHOOL PERSONNEL.

REFERENCES

- Almeida, J., Johnson, R. M., Corliss, H. L., Molnar, B. E., & Azreal, D. (2009). Emotional distress among LGBT youth: The influence of perceived discrimination based on sexual orientation. *Journal of Youth and Adolescence, 38*, 1001-1014. doi:10.1007/s10964-009-9397-9
- American Counseling Association. (2005). *ACA code of ethics*. Alexandria, VA: Author.
- American School Counselor Association. (2005). *The professional school counselor and bullying, harassment, and violence-prevention programs: Supporting safe and respectful schools* (ASCA position statement). Retrieved from http://schoolcounselor.org/files/PS_Bullying.pdf
- American School Counselor Association. (2007). *The professional school counselor and LGBT youth* (ASCA position statement). Retrieved from http://schoolcounselor.org/files/PS_LGBTQ.pdf
- American School Counselor Association. (2009). *The professional school counselor and cultural diversity* (ASCA position statement). Retrieved from http://schoolcounselor.org/files/PS_CulturalDiversity.pdf
- American School Counselor Association. (2010). *Ethical standards for school counselors*. Alexandria, VA: Author. Retrieved from <http://schoolcounselor.org/files/EthicalStandards2010.pdf>
- American School Counselor Association. (2012). *The ASCA National Model: A framework for school counseling programs* (3rd ed.). Alexandria, VA: Author.
- Bidell, M. (2005). The sexual orientation counselor competency scale: Assessing attitudes, skills, and knowledge of counselors working with lesbian, gay and bisexual clients. *Counselor Education and Supervision, 44*, 267-279. doi:10.1002/j.1556-6978.2005.tb01755.x
- Black, J., & Underwood, J. (1998). Young, female, and gay: Lesbian students and the school environment. *Professional School Counseling, 1*, 15-21.
- Borowsky, I., Ireland, M., & Resnick, M. (2001). Adolescent suicide attempts: Risks and protectors. *Pediatrics, 107*, 485-493. doi:10.1542/peds.107.3.485
- Callahan, C. J. (2001). Protecting and counseling gay and lesbian students. *Journal of Humanistic Counseling, Education and Development, 40*, 5-11. doi:10.1002/j.2164-490X.2001.tb00097.x
- Carroll, L., & Gilroy, P. J. (2001). Teaching “Outside the box”: Incorporating queer theory in counselor education. *Journal of Humanistic Counseling, Education and Development, 40*, 49-58. doi:10.1002/j.2164-490X.2001.tb00101.x
- Centers for Disease Control and Prevention. (2011). *Sexual identity, sex of sexual contacts, and health-risk behaviors among students in grades 9–12 — Youth risk behavior surveillance, selected sites, United States, 2001–2009*. Retrieved from <http://www.cdc.gov/mmwr/preview/mmwrhtml/ss6007a1.htm>
- Christianson, C. L., & Everall, R. D. (2009). Breaking the silence: School counsellors’ experiences of client suicide. *British Journal of Guidance and Counselling, 37*, 157-168. doi:10.1080/03069880902728580
- Cohen, J. (1992). A power primer. *Psychological Bulletin, 112*, 155-159. doi:10.1037/0033-2909.112.1.155
- Cook, A. T. (1991). Who is killing whom? *Issues paper No. 1, Respect All Youth Project*. Washington, DC: INSITE and P-FLAG.
- Curry, J. R., & Hayes, B. (2009). Bolstering school based support by comprehensively addressing the needs of an invisible minority: Implications for professional school counselors. *Journal of School Counseling, 7*(7).
- D’Augelli, A. R., Grossman, A. H., Salter, N. P., Vasey, J. J., Starks, M. T., & Sinclair, K. O. (2005). Predicting the suicide attempts of lesbian, gay and bisexual youth. *Suicide and Life-Threatening Behavior, 35*, 646-660. doi:10.1521/suli.2005.35.6.646
- DePaul, J., Walsh, M. E., & Dam, U. C. (2009). The role of school counselors in addressing sexual orientation in schools. *Professional School Counseling, 12*, 300-308. doi:10.5330/PSC.n.2010-12.300

- DeVellis, R. F. (2003). *Scale development: Theory and applications* (2nd ed.). Thousand Oaks, CA: Sage.
- Dillon, F. R., Worthington, R. L., Savoy, H. B., Rooney, S. C., Becker-Schutte, A., & Guerra, R., M. (2004). Becoming allies: A qualitative study of lesbian-, gay-, and bisexual-affirmative counselor training. *Counselor Education and Supervision, 43*, 162-178.
- Dimitrov, D. M., & Rumrill, P. D., Jr. (2003). Pretest-posttest designs and measurement of change. *Work, 20*, 159-165.
- Eisenberg, M. F., & Resnick, M. D. (2006). Suicidality among gay, lesbian and bisexual youth: The role of protective factors. *Journal of Adolescent Health, 39*, 662-668.
doi:10.1016/j.jadohealth.2006.04.024
- Faul, F., Erdfelder, E., Buchner, A., & Lang, A. G. (2009). Statistical power analyses using G*Power 3.1: Tests for correlation and regression analyses. *Behavior Research Methods, 41*, 1149-1160.
doi:10.3758/BRM.41.4.1149
- Field, A. (2009). *Discovering statistics using SPSS* (3rd ed.). London, United Kingdom: Sage Publications Ltd.
- Finkel, M., Storaasli, A., Bandele, A., & Schaefer, V. (2003). Diversity training in graduate school: An exploratory evaluation of the safe zone project. *Professional Psychology: Research and Practice, 34*, 555-561.
doi:10.1037/0735-7028.34.5.555
- Fontaine, J. (1998). Evidencing a need: School counselors' experience with gay and lesbian students. *Professional School Counseling, 1*, 8-15.
- Garofalo, R., Wolf, C., Wissow, L., Woods, E. R., & Goodman, E. (1999). Sexual orientation and risk of suicide attempts among a representative sample of youth. *Archives of Pediatric and Adolescent Medicine, 153*, 487-493.
- Gay, Lesbian and Straight Education Network. (2006). *GLSEN safe space: A how-to guide for starting an allies program*. New York, NY: Author.
- Gay, Lesbian and Straight Education Network. (2009). *GLSEN safe space kit: Guide to being an ally to LGBT students*. New York, NY: Author.
- Gibson, P. (1989). Gay male and lesbian youth suicide. In M. Feinleib (Ed.), *Prevention and intervention in youth suicide* (Report to the Secretary's Task Force on Youth Suicide, 3, pp. 110-142). Washington, DC: U.S. Department of Health and Human Services.
- Goldfried, M. (2001). Integrating gay, lesbian, and bisexual issues into mainstream psychology. *American Psychologist, 56*, 977-88.
doi:10.1037/0003-066X.56.11.977
- Goldman, L. (2008). *Coming out, coming in: Nurturing the well-being and inclusion of gay youth in mainstream society*. New York, NY: Routledge/Taylor & Francis.
- Gonsiorek, J. (1988). Mental health issues of gay and lesbian adolescents. *Journal of Adolescent Health Care, 9*, 114-122.
doi:10.1016/0197-0070(88)90057-5
- Goodenow, C. (2003). *Violence-related experiences of sexual minority youth: Looking at data from the Massachusetts Youth Risk Behavior Survey, 1995-2001*. Springfield, MA: Massachusetts Department of Education.
- Goodenow, C., Szalacha, L., & Westheimer, K. (2006). School support groups, other school factors, and the safety of sexual minority adolescents. *Psychology in the Schools, 43*, 573-589.
doi:10.1002/pits.20173
- Goodrich, K., & Luke, M. (2009). LGBTQ responsive school counseling. *Journal of LGBT Issues in Counseling, 3*, 113-127.
doi:10.1080/15538600903005284
- Gould, M., Greenberg, T., Velting, D., & Shaffer, D. (2003). Youth suicide risk and preventive interventions: A review of the past 10 years. *Journal of the American Academy of Child and Adolescent Psychiatry, 42*, 386-405.
doi:10.1097/01.CHI.0000046821.95464.CF
- Haas, A. P., Eliason, M., Mays, V. M., Mathy, R. M., Cochran, S. D., D'Augelli, A. R., ... Clayton, P. J. (2011). Suicide and suicide risk in lesbian, gay, bisexual, and transgender populations: Review and recommendation. *Journal of Homosexuality, 58*(1), 10-51.
doi:10.1080/00918369.2011.534038
- Hatzenbuehler, M. L. (2011). Suicide attempts in lesbian, gay, and bisexual youth. *Pediatrics, 127*, 896-904.
doi:10.1542/peds.2010-3020
- Hays, D. G., Chang, C. Y., & Decker, S. L. (2007). Initial development and psychometric data for the privilege and oppression inventory. *Measurement and Evaluation in Counseling and Development, 40*, 66-79.
- Head, C. J. (2010). Navigating partnerships and addressing tough issues in promoting health among GLBTQ youth: An interview with Jesus Ramirez-Valles. *Health Promotion Practice, 11*, 15S-18S.
doi:10.1177/1524839910366395
- House, R., & Hayes, R. L. (2002). School counselors: Becoming key players in school reform. *Professional School Counseling, 5*, 249-256.
- Kissinger, D. B., Lee, S. M., Twitty, L., & Kisner, H. (2009). Impact of family environment on future mental health professionals' attitudes toward lesbians and gay men. *Journal of Homosexuality, 56*, 894-920.
doi:10.1080/00918360903187853
- Kitts, R. (2005). Gay adolescents and suicide: Understanding the association. *Adolescence, 40*, 621-627.
- Kosciw, J. G., Greytak, E. A., Bartkiewicz, M. J., Boesen, M. J., & Palmer, N. A. (2012). *The 2011 national school climate survey: The experiences of lesbian, gay, bisexual and transgender youth in our nation's schools*. New York, NY: Gay, Lesbian and Straight Education Network.
- Luecke, J. (2011). Working with transgender children and their classmates in pre-adolescence: Just be supportive. *Journal of LGBT Youth, 8*(2), 116-156.
doi:10.1080/19361653.2011.544941
- Marshal, M. P., Dietz, L. J., Friedman, M. S., Stall, R., Smith, H. A., McGinley, J., ... Brent, D. A. (2011). Suicidality and depression disparities between sexual minority and heterosexual youth: A meta-analytic review. *Journal of Adolescent Health, 49*, 115-122.
doi:10.1016/j.jadohealth.2011.02.005
- McCabe, P. C., & Rubinson, F. (2008). Committing to social justice: The behavioral intention of school psychology and education trainees to advocate for lesbian, gay, bisexual and transgendered youth. *School Psychology Review, 37*(4), 469-486.
- Milsom, A., Goodnough, G., & Akos, P. (2007). School counselor contributions to the individualized education program process (IEP). *Preventing School Failure, 52*(1), 19-24.
doi:10.3200/PSFL.52.1.19-24
- Mufioz-Plaza, C., Quinn, S., & Rounds, K. (2002). Lesbian, gay, bisexual and transgender students: Perceived social support in the high school environment. *The High School Journal, 85*(4), 52-63.
- Myers, J., Sweeney, T., & White, V. (2002). Advocacy for counseling and counselors: A professional imperative. *Journal of Counseling & Development, 80*, 394-402.
- O'Connell, L. M., Atlas, J. G., Saunders, A. L., & Philbrick, R. (2010). Perceptions of rural school staff regarding sexual minority students. *Journal of LGBT Youth, 7*, 293-309.
doi:10.1080/19361653.2010.518534
- Palmer, N. A., Kosciw, J. G., & Bartkiewicz, M. J. (2012). *Strengths and silences: The experiences of lesbian, gay, bisexual and transgender students in rural and small town schools*. New York, NY: Gay, Lesbian and Straight Education Network.
- Paul, J., Catania, J., Pollack, L., Moskowitz, J., Canchola, J., Mills, T., ... Stall, R. (2002). Suicide attempts among gay and bisexual men: Lifetime prevalence and antecedents. *American Journal of Public Health, 92*, 1338-1345.
doi:10.2105/AJPH.92.8.1338

- Pearson, Q. M. (2003). Breaking the silence in the counselor education classroom. *Journal of Counseling & Development, 81*, 292-300. doi:10.1002/j.1556-6678.2003.tb00256.x
- Phillips, J. C. (2000). Training issues and considerations. In R. M. Perez, K.A. DeBord, & K. J. Bieschke (Eds.), *Handbook of counseling and psychotherapy with lesbian, gay, and bisexual clients* (pp. 337-358). Washington, DC: American Psychological Association. doi:10.1037/10339-014
- Ponterotto, J. G. & Charter, R. A. (2009). Statistical extensions of Ponterotto and Ruckdeschel's (2007) reliability matrix for estimating the adequacy of internal consistency coefficients. *Perceptual and Motor Skills, 108*, 878-886. doi:10.2466/pms.105.3.997-1014
- Remafedi, G. (1999). Sexual orientation and youth suicide. *Journal of the American Medical Association, 282*, 1291-1292. doi:10.1001/jama.282.13.1291
- Reynolds, A. L., & Koski, M. J. (1994). Lesbian, gay and bisexual teens and the school counselor: Building alliances. *The High School Journal, 77*(1-2), 88-94.
- Riggs, A. D., Rosenthal, A. R., & Smith-Bonahue, T. (2011). The impact of a combined cognitive-affective intervention on pre-service teachers' attitudes, knowledge, and anticipated professional behaviors regarding homosexuality and gay and lesbian issues. *Teaching and Teacher Education, 27*, 201-209. doi:10.1016/j.tate.2010.08.002
- Rubio, D. M., Berg-Weger, M., Tebb, S. S., Lee, E. S. & Rauch, S. (2003). Objectifying content validity: Conducting a content validity study in social work research. *Social Work Research, 27*(2), 94-104. doi:10.1093/swr/27.2.94
- Russell, S., & Joyner, K. (2001). Adolescent sexual orientation and suicide risk: Evidence from a national study. *American Journal of Public Health, 91*, 1276-1281. doi:10.2105/AJPH.91.8.1276
- Rutter, P. A., & Leech, N. L. (2006). Sexual minority youth perspectives on the school environment and suicide risk interventions: A qualitative study. *Journal of Gay & Lesbian Issues in Education, 4*, 77-91. doi:10.1300/J367v04n01_06
- Satcher, J., & Leggett, M. (2007). Homonegativity among professional school counselors: An exploratory study. *Professional School Counseling, 11*, 10-16. doi:10.5330/PSC.n.2010-11.10
- Seashore, K. R., Jones, L. M., & Seppanen, P. (2001). *Transforming school counseling*. St. Paul, MN: Center for Applied Research and Educational Improvement. Retrieved from <http://www.cehd.umn.edu/carei/publications/documents/TSCI-Final.pdf>
- Smith, S. D., & Chen-Hayes, S. F. (2004). Leadership and advocacy for lesbian, bisexual, gay, transgendered, and questioning (LGBTQ) students: Academic, career, and interpersonal success strategies. In R. Perusse & G. E. Goodnough (Eds), *Leadership, advocacy and direct service strategies for professional school counselors* (pp. 187-211). Belmont, CA: Brooks/Cole.
- Stone, C. (2003). Counselors as advocates for gay, lesbian, and bisexual youth: A call for equity and action. *Journal of Multicultural Counseling and Development, 31*, 143-152. doi:10.1002/j.2161-1912.2003.tb00539.x
- Teasdale, B., & Bradley-Engen, M. S. (2010). Adolescent same-sex attraction and mental health: The role of stress and support. *Journal of Homosexuality, 57*, 287-309. doi:10.1080/00918360903489127
- Udry, J., & Chantala, K. (2002). Risk assessment of adolescents with same-sex relationships. *Journal of Adolescent Health, 31*, 84-92. doi:10.1016/S1054-139X(02)00374-9
- Vare, J., & Norton, T. (1998). Understanding gay and lesbian youth: Sticks, stones and silence. *The Clearing House, 71*, 327-331. doi:10.1080/00098659809599584
- Varjas, K., Graybill, E., Mahan, W., Meyers, J., Dew, B., Marshall, M., ... Birckbichler, L. (2007). Urban service providers' perspectives on school responses to gay, lesbian, and questioning students: An exploratory study. *Professional School Counseling, 11*, 113-119. doi:10.5330/PSC.n.2010-11.113
- Walker, J. A., & Prince, T. (2010). Training considerations and suggested counseling interventions for LGBT individuals. *Journal of LGBT Issues in Counseling, 4*, 2-17. doi:10.1080/15538600903552756
- Weiler, E. (2004). Legally and morally, what our gay students must be given. *Education Digest: Essential Readings Condensed for Quick Review, 69*, 38-43.

