

The Impact of Silence Exercise

Purpose Statement

The purpose of this exercise is to increase participants understanding, empathy and knowledge regarding the unique stressors often experienced by sexual and gender minority youth, foster parents and families (AKA LGBTQ youth).

Learning Objectives

1. Participants will demonstrate increased understanding of the issues around coming out and how they might affect LGBTQ youth.
2. Participants will recognize that coming out is not about sexual behaviour, but about statements of identity and relationships, both of which are critical to emotional and social development in youth.
3. Participants will be able to articulate the potential consequences of social and emotional isolation on sexual and gender minority clients.

Time

- Explanation of exercise: 2 minutes
- Answering four questions: 2 minutes
- Pair work: 3 minutes
- Group debrief: 5 minutes
- Total: 12 minutes

Module Handouts

The activity questions may be shared as a handout for participants.

Description of Activity

In this interactive activity, participants write down the answers to four questions on the handout and pair off to complete an introduction activity that prohibits them from discussing anything they wrote down when answering the questions above.

Instructions

Print out the handout provided at the end of this guide for participants.

Distribute the handout and ask the group to answer the questions listed. They have two minutes to complete this task.

After the two minutes, ask everyone to pair up with someone they don't know well or work with on a day to day basis and decide who is going to go first. Ask whoever is going first to introduce themselves to their partner but explain that they are not allowed to mention any of the answers they wrote down to the questions. Make a big deal about this. Say things like, —*You can talk about whatever you want, but everything on your card is taboo. Don't mess up and talk about something on your handout, because if you do, the person you are talking to might despise you, reject you or no longer respect you.*||

Those going first introduce themselves to their partners for one minute. At the end of the minute, tell them to stop and switch. Those going second must then introduce themselves, again not mentioning anything they wrote down on their cards. Give them one minute.

After the minute is up, bring the folks back to the full group. Ask the following (or similar) questions to stimulate discussion about the impact of silence:

1. *Tell me about the experience:*

- What was it like to not be able to talk about what was on your card?
- What made it hard (to those who found it hard) and what made it easy (for those who found it easy)?
- Did anyone forget and say something on their list or talk around something on their list?
- Did anyone find that they would start talking and then run into something they couldn't talk about and have to suddenly stop or switch topics?
- What did you talk about?
- Did anyone notice that they had to invest energy in not talking about these important parts of their lives?

Usually people will notice that they talked about superficial things, about their pasts or found a particular topic and stayed on it for the whole time.

2. *What would it be like to have to do this exercise for two hours, two days or a lifetime, instead of only one minute?* At this point, most people begin to realize that it would be very hard not to talk about the people, places and experiences that are so important to us as human beings. They begin to see how limiting it would be, that they would not be able to relate authentically with other people and how silenced they would be.
3. Ask the group: *What was the point of the exercise?* (How does it relate to homophobia and heterosexism in our society?) Notice that people who are not "out" can't talk about their relationships, where they go and with whom they go, what they do or other important things that happen in their lives. Imagine with participants what it might be like to be 14 years old and having to keep so many secrets. Generate a list of the potential impacts of this level of social isolation (e.g., depression, anxiety, frustration, anger, substance abuse, sexual acting out, etc.)

At this time ask folks to turn over their handout and look at the statistics listed. Tell the group:

- These statistics illustrate the higher areas of risk associated with LGBTQ status in our culture. Note that stigma, harassment and social isolation are what lead to high risk factors for LGBTQ youth—not the fact that they are LGBTQ. We know from our work that LGBTQ youth are at a higher risk for becoming homeless. This is one of the reasons why this exercise is important.

Close the activity by reflecting on the difference between identity and behaviour. Two examples of how you might discuss this are offered below:

1. Notice, for example, that if a youth, family member or co-worker is not out, even the most mundane of daily living activities can become off-limits. Imagine never being able to discuss what you did last weekend or with whom. The most profound experiences—falling in or out of love, the beginning of a new relationship, the ending of a meaningful relationship, the birth of a child, a partner's death or illness — are all taboo. All of these events are about relationships, rather than behaviour; they are about connections, not what one does in the privacy of one's bedroom with a significant other.
2. Ask participants how many wrote down what they do with a significant other in the privacy of the bedroom? Note that the reason you are bringing this up is because in a heterosexual context even the most quintessential sexual acts are seen differently than in a same-sex context. In a same-sex context even straightforward statements about identity are reduced to sexual behaviour.

Consider a pregnant co-worker. When she announces her pregnancy with great joy, what do most people say? Most of us offer congratulations and wish her well. But how many people try to picture how she got that way? (Participants usually laugh here and recognize that they —don't go there||). In a heterosexual context, sexual behaviour is usually about relationships, rather than the sexual act leading to the pregnancy. Among heterosexual couples, sex for the sake of procreation is about growing their family.

However, if LGBTQ youth or adults say they are LGBTQ, people often respond with, —Don't tell me about what you do in bed.|| This makes the statement that if they're LGBTQ they're all about sex, rather than about the people they love, the places they go or the events and activities that are important to them.

Impact of Silence Exercise

Please take two minutes and answer the four questions below.

1) Who are the 3 most important people in your life?

2) What are the 3 places that have special significance in your life?

3) What 3 things do you most like to talk about?

4) What 3 things do you spend the majority of your time doing?

Higher Areas of Risk Associated with LGBTQ identity¹

- **Severe social, emotional and cognitive isolation result in a higher incidence of mental health issues:** These may include bouts of depression, lower self-esteem and problems with anxiety. Often these young people exist in complex, unstable family situations, due in part to issues of coming out, silence and secrecy. (Cochran et al., 2002). In addition, the typical —concealment strategies designed to hide a youth’s sexual orientation become an —unending and extremely stressful chore (Grossman, 1997) that is emotionally and socially crippling (Dempsey, 1994). While these information sources are older than ten years old they point to early information that continues to have important impacts.
- **Higher incidence of homelessness, dropping out, running away and sexual acting out:** At the same time, there are few external resources in place to support, safe, culturally competent, identity-affirming, out-of-home care, such as foster homes and group homes (Ryan, 2003; Youth in the Margins, 2001; Cochran, 2001).
- **Significantly higher risk of HIV/AIDS transmission:** Up to one-half of gay/bisexual boys forced out of their homes engage in survival sex to support themselves, greatly increasing their risk of HIV infection (Savin-Williams, 1988). Additionally, recent figures released by the Centers for Disease Control indicate that 50 percent of all new infections are among people under the age of 24, with the highest rates of infection among young, gay, Black men.
- **Higher incidence of multiple suicide attempts and the creation of suicide plans:** Multiple studies of LGBTQ youth and young adults have reported a substantially higher proportion of suicidal thoughts and attempts than their heterosexual peers (Russell, 2003). A number of studies have indicated that between 48 and 76 percent of sexual minority youth have thought of suicide and 29 to 42 percent have attempted suicide (Hammelman, 1993; Hershberger & D’Augelli, 2002; Rotheram-Borus, Hunter, & Rosario, 1994; Russell, 2003). Findings from the National Longitudinal Study of Adolescent Health indicated that youth with same-sex or both-sex attractions and relationships report more suicidal thoughts and attempts than youth who report only opposite sex attractions and relationships (Russell & Joyner, 2001). While some of this research is over ten years old it continues to contribute significantly to our understanding of the stress experienced by LGBTQ youth. Further, recent findings from the Family Acceptance Project™ linked highly-rejecting families with dramatically higher rates of attempted suicide and suicidal ideation (Ryan et al., 2009).
- **Heightened risks for homeless LGBTQ youth:** LGBTQ homeless youth are at higher risk for negative outcomes like depression and substance abuse than non-LGBTQ homeless youth (Ray, 2006).
- **Vulnerability to involvement with the juvenile justice system:** A number of factors contribute to the over-representation of LGBTQ youth in the juvenile justice system, where they face discrimination, harassment and violence. These factors may include the following:
 - survival activities that LGBTQ youth may engage in on the streets to secure food, clothing or shelter after running away or being kicked out;
 - selective enforcement of —quality of life and —morals regulations for LGBTQ youth of color congregating in public places; and
 - harsher punishments of violations of age-of-consent laws between young people of the same sex than different-sex partners (Wilber, Ryan & Marksamer, 2006; Lambda Legal Defense & Education Fund & Child Welfare League of America, 2006).

Not all of these are set in stone or experienced by all LGBTQ youth. In fact, many of these risks factors can be ameliorated when youth receive support in one or more areas of their lives. The emotional distress that can lead to suicide, substance abuse and other problems is caused, in large part, by social isolation and stigma. Remove the social isolation and stigma and much of the emotional distress is relieved.

Harassment has been identified as a critical factor in predicting outcomes for youth. The greater the level of harassment a youth experiences, the greater the likelihood that she or he will engage in risky behaviours (Bontempo & D’Augelli, 2002).

¹ Note that stigma, harassment and social isolation are what lead to high risk factors for LGBTQ youth—not the fact that they are LGBTQ.