

COMPARING RURAL AND URBAN EDUCATION CONTEXTS FOR GLBTIQ STUDENTS

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ABSTRACT

This paper considers the different experiences for gay, lesbian, bisexual, transgender, intersex and queer (GLBTIQ) students from rural and urban education contexts. It draws on data from three studies of GLBTIQ students I have conducted since 2010, including a 2010 online survey of 3,134 GLBTIQ students in which one fifth came from rural areas; a 2012 study of transgender people and a 2013 study of transgender and intersex students. The different studies repeatedly showed that GLBTIQ students from rural and remote towns experienced isolation, social discrimination and a lack of appropriate services and support. They were less likely to feel safe at school, at social occasions and on the internet than their urban peers. Many aspired to leave their rural and regional homes to become the person they wanted to be in an urban environment. The paper concludes by recommending specific training, resources and contacts to improve rural education services for these students.

Key words: gay, lesbian, bisexual, transgender, rural

INTRODUCTION

Recent years have seen increased advocacy for gay, lesbian, bisexual, transgender, intersex and queer (GLBTIQ)¹ students globally. In 2011 the United Nations Educational, Scientific and Cultural Organisation (UNESCO) held the First International Consultation on GLBTIQ issues in Educational Institutions in Rio de Janeiro, Brazil (December 6-9th). The event was attended by government and non-government representatives and education research experts on the topic from all continents (including the author), who created the Rio Statement (UNESCO, 2011). The statement asserted that the right to education must not be 'curtailed by discrimination on the basis of sexual orientation or gender identity'. During that period 200 UN Member States attended the New York convening 'Stop Bullying – Ending Violence and Discrimination Based on Sexual Orientation and Gender Identity'. The UN Secretary-General Ban Ki Moon contended bullying on these bases was *a grave violation to human rights and a public health crisis*. These international events reinforced Australian moves towards the national Sex Discrimination Amendment (Sexual

¹ Gay and lesbian people can be broadly understood to be same-sex attracted; bisexual people as attracted to more than one sex. Transgender people identify as a sex different to the one assigned at birth, or as gender non-conforming. Intersex people have physical, hormonal or genetic features that are neither wholly female nor wholly male; or a combination of female and male; or neither female nor male. Queer is a political term that signifies an identity beyond the assumed norms of masculine male or feminine female heterosexual.

Orientation, Gender Identity and Intersex Status) Act 2013; which offered new protections against discrimination for Australian students on the basis of sexuality, gender identity and intersex status (Australian Parliament, 2013)². In the roll-out of the new protections, it is important to consider how GLBTIQ students are currently faring in various Australian schooling contexts.

Australian media attention to rural GLBTIQ students has been generated by a range of activists' efforts; notably including the recent launch of a book on one gay man's decision to drive around in a truck to remote, rural and regional³ Australian schools combatting homophobia through informal interventions (Witthaus, 2014). There is academic concern over his anti-homophobia framework's conceptual and pedagogical validity, including its use of problematic rural stereotypes such as 'The Frustrated Bogan' and 'The Sheep' in a simplistic liberal-progressive identity 'scale' privileging so-called urban tolerance of diversity over apparently rural conservatism (Rasmussen, 2013). Such concern is understandable given Witthaus' work is based on anecdotal experiences, and has not undergone formal university-led ethical or peer review processes. However, his efforts (and those of other community GLBTIQ spokespersons in rural contexts) must be understood as symptomatic of – and a non-academic community-based activist attempt at a practical solution to – perceived educational and empirical deficits. Until recently there was a lack of education policy guidance on how schools should best serve their GLBTIQ students (Jones, 2015; Jones & Hillier, 2012), and many Australian teachers reported confusion and difficulty over how to deal with GLBTIQ issues (Jones, Gray & Harris, 2014; Ollis, 2007), creating a knowledge gap which people like Witthaus sought to fill which few governments and academics had, beyond some collaborative efforts at pointing to the need for more engagement (Leonard, Marshall, Hillier, Mitchell, & Ward, 2010; Marshall, 2011).

RURAL RESEARCH

Whilst international research – mainly from the US – has considered gay, lesbian, bisexual, and transgender (GLBT) adults from rural areas to a small extent (Drumheller & McQuay, 2010; Fisher, Irwin & Coleman, 2013; Lee & Quam, 2013), research on younger rural GLBTIQ people is lacking (Gray, 2009). The adult studies have contributed to the perception of rural areas as unsupportive of diversity; an America-wide study of GLBT baby boomers (n=1201) found that rural individuals reported lower levels of outness and increased guardedness with others than those from urban areas (Lee & Quam, 2013), and a small Texan focus group study of GLBT adults identified that the perception that the rural community was unsupportive was an obstacle to community work (Drumheller & McQuay, 2010). Beyond this, a survey of GLBT Nebraskan adults (n=770) found there were no statistically significant differences between rural and urban participants' health and wellbeing, except in their health insurance rates. Gray considered rural queer youth visibility in the media, calling the assumption-based narrative in American culture that GLBTIQ identities can only be successfully inhabited in city contexts whilst rural contexts are too dangerous, 'metronormativity' (Gray, 2009).

Australian research has only explored the experiences of mainstream rural students (Barbagallo & Boon, 2012; Hillier, Warr, & Haste, 1998; Warr & Hillier, 1998). Warr and Hillier's (1998) surveys and focus groups on rural secondary students' sexual health (n=1168) found that the students worried about being recognised when pursuing sexual health issues due to pre-existing relationships with those involved in their delivery or the greater risk of social observation in

² There are exemptions to the protections for private religious schools, which may potentially discriminate on the basis of students' sexuality or gender identity according to the new law, but not on the basis of intersex status (seen as biological).

³ A range of scales within the literature define rural as denoting low density contexts with large open land areas; remote as denoting low density contexts located at distances from service centres designated by central authorities to have an impact on service access; and regional as denoting areas designated by the government for population growth and development-related schemes (Australian Institute of Health and Water, 2010; Australian Institute of Health and Welfare, 2008).

towns with small populations. Further, peer pressure often regulated sexual attitudes due to the greater surveillance amongst peer and broader social groups interacting frequently and more exclusively in their relatively isolated contexts. Further, a number of the students in the study confused high risk sexuality practices with high risk sexuality groups (Hillier et al., 1998). Another study of 110 rural Queensland students (aged 18-21) found that 68 per cent believed improvements could be made to the content and delivery of sexuality education (Barbagallo & Boon, 2012). A search of academic databases dated 2000 to 2015, including ERIC, ProQuest and other key databases revealed no Australian studies *specifically* providing quantitative or qualitative data specifically on rural GLBTIQ students, or comparisons with urban students. Yet there are many reasons to believe that life may be different for rural GLBTIQ students, not the least because of a greater level of surveillance on sexual identities in these areas.

AIM AND METHODOLOGY

This project aimed to redress the lack of Australian research on rural GLBTIQ students. It re-examines the different experiences for GLBTIQs from rural and urban contexts in data from three previous studies focussed on Australian GLBTIQs and education, which were not previously focussed on rurality. It is consistent with the emancipatory paradigm of the research – identifying and foregrounding voices for marginalised groups to highlight their perspectives (Rogers, Malancharuvil-Berkes, Mosley, Hui, & O'Garro Joseph, 2005). I have been particularly interested in how researchers 'create' (as a described demographic) GLBTIQ participants studied through imposing the lens of a pre-determined and highly defined methodological frame (Jones, 2013); and therefore explored how the GLBTIQ participants constructed *themselves* regarding rurality in a more grounded fashion in a plurality of rural areas.

Methodology

A mixed-method approach was adopted. I re-examined survey and interview data from three studies on Australian GLBTIQs and education, reflecting on comparisons of their rural and urban participants through both qualitative and quantitative data. These data sources focus on a range of education settings including public (government-run) and private (religious and tuition fee) schools, vocational studies contexts such as TAFE, and universities. The data sources included:

- **Study 1** – An online 2010 national survey of 3,134 Australian GLBTIQ students aged 14–21 years with a mean age of 17. The survey had over 50 items, including sections on school policies and experiences (outlined in Hillier et al., 2010; Jones & Hillier, 2012).
- **Study 2** – An online 2012 national study of 273 Australian transgender female-to-male people aged 16-64 years, with a mean age of 30.5. In this study participants first completed a basic survey on their identities and experiences, and then contributed to communal blogs on key themes (e.g. education) over time (outlined in Jones, del Pozo de Bolger, Dunne, Lykins, & Hawkes, 2015).
- **Study 3** – A 2013 national study of 189 Australian transgender and intersex students aged 14-25 with an average age of 19. All participants completed a survey with a section on education experiences and needs, and fifteen participants were also engaged in in-person interviews for 1-2hrs (outlined in a report to be launched September 2014).

For all studies, recruitment occurred through a combination of social networking website advertisements; stories in rural and urban press; and flyers in rural and urban gender clinics and youth services. All studies contained a question on the participants' postcodes. The *Rural, Remote and Metropolitan Areas Classification* (RRMA) was applied to these postcodes to divide participants by into urban, rural and remote groups (Australian Institute of Health and Water, 2010).

FINDINGS

Rurality Overall

The most notable difference between rural and urban GLBTIQ participants across all three studies was the way in which they discussed their school's location. The majority of the rural GLBTIQ participants across the three studies repeatedly identified themselves or their school as belonging to a rural demographic throughout their completion of the open-ended qualitative questions in the surveys and interviews concerning education. This occurred even though they were never directly asked about rurality in any of the studies. Rurality was asserted as a factor that *the participants wanted to be considered* in exploring their circumstances, *which they perceived as having impacted their experience of school and identity*. Conversely, urban GLBTIQ participants rarely mentioned their location, making urban contexts appear less of a catalyst for unstimulated comment and more of an unexamined 'norm'. Only a few individuals in each study from urban areas directly mentioned these contexts, usually noting the increased services and social environments available after moving to such areas. In a typical example, Pierre (gay, 18yrs) from Study 1 offered:

... living in a rural area was pretty tough, but after I moved to the NSW coast I found the atmosphere less threatening, and I felt FAR less alone. These days I'm very involved with queer activism and politics and socialising and this has brought out the best in me.

Safety at School

The 3,134 GLBTIQ students (aged 14-21) in Study 1 came from all states and territories in proportions reflective of the general Australian population. According to the RRMA index, 67 per cent (n=1975) lived in urban zones (including major cities). A group of 18 per cent (n=662) lived in rural zones and a further 2 per cent (n=49) were from remote zones. Only 55 per cent of rural GLBTIQ students felt safe at school, compared to 65 per cent of urban GLBTIQ students. Further, only 60 per cent of rural students felt safe at social events, compared to 70 per cent of urban GLBTIQ students. Thus, rural GLBTIQ students were more likely to feel unsafe in the places they were legally required to spend most of their time. The qualitative data particularly showed the rural GLBTIQ students were afraid to come out at school. For example, Kim (bisexual, 14yrs) was not out at school but only talked about her sexuality to people from Kids Help Line and various support websites, due to concerns over identity surveillance in her rural town; *... I live in a rural area and word gets around fast*. Michael (questioning, 18yrs) has not disclosed his sexuality to anyone, commenting, *My town is semi-rural / semi-urban and mostly white, so the only 'diversity' we see is due to wealth. I feel unable to come out at school*. Rhys (gay, 16 years) said *I know it's OK to be sexually attracted to men, it's just that I live in a rural area, so my largest fear is rejection from my friends and from the local community*.

Some rural GLBTIQ students had actually experienced indirect or direct discrimination in educational environments such as schools and TAFE, based on sexual orientation. For example, Sarah (lesbian, 20yrs) experienced indirect discrimination in her vocational course when the teacher asked the class to *'put your hand up if you don't think you could work with someone who is GLBTIQ'...* Half the people in the class put their hand up. Craig (gay, 17yrs) experienced direct discrimination in years 9 and 10:

Coming from a rural town, I did have to endure quite an amount of physical comedy at my expense. The changerooms before and after PE were the worst, you always had your back turned on at least some of the other boys. You never knew what they would do – hit you, trip you. I was the only openly gay boy at my 7-10 school, and one of about four in my year 11/12 school. Derogatory words such as 'fag' said under the breath as people walk past do sometimes get me down.

Generally rural students in university environments felt safer and more supported, such as Jayden (gay, 21 years):

Having finally admitted to someone I was gay over a year and half ago, and from there, slowly telling more people at university, I have been overwhelmed by the amount of support. Though I am yet to tell anyone from ...I still fear their rejection as a result of the homophobic upbringing of children in small rural communities.

Clare (bisexual, 20 years) similarly commented, *As I live in a rural area, it's much easier now I'm at uni and we have a queer collective.*

Study 2 told a similar story. Most of the 273 FtM transgender participants (aged 16-64) came from Victoria (39%) and New South Wales (30%). This group was disproportionately concentrated in urban settings in Sydney and Melbourne, rather than in the rural and remote areas represented (where only one tenth resided), or other states and territories represented, compared to the broader Australian population (Australian Bureau of Statistics, 2012c). This contrasts with the younger GLBTIQ students in study 1, and is likely due to the fact that these participants were on average in their 30s and thus not confined to their families' original homes anymore. A large portion (69%) of FtM transgender participants had a post-secondary qualification. The participants were relatively divided between having post-graduate degrees (19%) and undergraduate degrees (25%), TAFE qualifications (25%), and secondary school certificates (27%). This was a higher portion than the general Australian population (57%, Australian Bureau of Statistics, 2012a). This reflected a similar finding that transgender people were well-educated more broadly from *Tranznation* (Couch et al., 2007). Conversely, 4 percent had not completed secondary school and had only had a primary school education – twice the portion of the general Australian population (2%, Australian Bureau of Statistics, 2012a). Given that by law Australian young people are required to stay in schools until 15-17 years of age (depending on state and territory laws), this educational disruption suggested that there have been problems for transgender Australians in school contexts.

In Study 2, neither rural nor urban transgender participants saw their schools as trans-positive environments. No rural or urban participants reported unisex bathroom options (toilets someone of any sex/ gender identity could use) were standard at their school. Some urban participants mentioned occasionally seeking to use the staff toilets on the days when they were permitted, but this was a rarity. One urban student reported being able to use disabled toilets, but this is not useful long-term for someone who does not identify as having a disability and is recognisably able-bodied in the minds of other students, compared to having a unisex bathroom anyone can access without the need to declare any particular identity, or allowing students to use the bathroom congruent with their gender identity. Several participants commented that their single sex schools offered no other option than to act like the intake gender, or that there was a sense that alternatives simply did not exist. Aid (socially male, 18yrs) summed up the general attitude to his gender identity at his urban school as, *Not accepted. You had to stick to strict gender norms or teachers involved your parents.* Brett (male/ transgender male, 27yrs) said, *My primary and high school had an extremely bad attitude towards Trans. It was a strict Catholic school. It was horrible. Many bad things happened to me in that school.* Of the two groups, the rural students were more likely not to discuss their gender identity at school, but such discussion was quite minimal. Again, rural universities were perceived as better contexts than schools, with an encouraging experience reported by Harry (FtM transgender, 24 yrs); *At highschool, I'm unsure exactly what was in place. At uni there is definitely a policy that protects trans people.* He commented that whilst there was never any relevant information distributed on transgender identities at school, his university had relevant gender courses.

As in Study 2, the 189 Australian transgender and intersex students from Study 3 (aged 14-25) particularly resided in Victoria (49%) and New South Wales (19%) rather than other states (Western Australia 12%, Australian Capital Territory 8%, Queensland 10%, South Australia 1%, Northern Territory 1%). Despite efforts to recruit participants from elsewhere, most participants

again lived in Melbourne or Sydney. Overall, 66 per cent of transgender and intersex students found their sexuality education inappropriate for their needs. Further, 38 per cent of the young people in this study had experienced harassment or abuse at school. With an emphasis on younger populations than Study 2 however (the average participant in Study 3 was aged 19yrs), the qualitative findings of Study 3 did reflect recent improvements in school policies particularly in urban Victorian schools – where the more recent *Supporting Sexual Diversity in Schools* policy (VIC Government, 2008) requiring schools to be more supportive of diversity appeared to have had an impact, alongside a policy specifically on transgender and intersex students in the *Victorian Schools Reference Guide* (VIC Government, 2007; see section 4.5.10.11). Several students attending Melbourne-based schools discussed how these environments were recently becoming more supportive and inclusive. Fiona (MtF Transgender, 17yrs) commented:

I have been lucky enough to attend a small, independent secondary college in Melbourne's inner-east. I spent 2012 mostly identifying as female and preferring the use of a different name and relevant traditional female pronouns, and found overwhelming warmth and support from my peers, teachers, and administrative staff. I did continue to use the male bathrooms (but never felt uneasy about this at school, though I have in less supportive environments) and gender-segregation was rarely an issue as it was not a technique promoted or employed at the school.

Wellbeing Risks

Wellbeing risks were increased for rural GLBTIQ students in Study 1. Firstly, 37 per cent of rural GLBTIQ students had self-harmed compared to 28 per cent of urban GLBTIQ students. Self-harm involved actions such as cutting, ingesting poisons or banging body parts against walls with the intent of creating pain. Secondly, 23 per cent of rural GLBTIQ students had attempted suicide, compared to 15 per cent of those urban GLBTIQ students. Many of the qualitative responses to the questions on self-harm and suicide emphasised feelings of isolation. Pete (gay, 16yrs) said *I live in a rural town so the internet is almost the only way I can talk to other people of the same sexual orientation. Even then it is hard to do so.* Paul (gay, 18yrs) explained:

I used to hate myself pretty intensely, because of my sexuality, in my rural high school. I used to cut my thighs in an attempt to punish myself, inflict pain in anger etc. and I was hospitalised after one very memorable day at school because events led me to decide enough was enough. I don't really like to talk about it so not many people know, even my close friends. I told them all I contracted glandular fever.

John (gay, 19 years) explained that his hometown was *stifling, particularly in that whilst homophobia is often expressed in local media, there is no-one locally who defends the gay community.* He knew his sexuality from a young age, but found the isolation associated with it in his area overwhelming at times during school: *I became particularly upset and depressed from year 11. I was upset mainly because of my isolation - I knew I was gay but I was stuck in a city where the most visible gays were pushed into subcultures.* Whilst in this study drug use generally was negligible, GLBTIQ students from remote areas were more likely to use drugs compared to those from either urban or rural areas (one tenth of remote GLBTIQ students were using cocaine, ecstasy, inhalants and heroin).

In Studies 1 and 2, which were focussed more directly on transgender and intersex participants, there were similar findings of increased wellbeing risks. In addition, in Study 3, the 38 per cent of transgender and intersex students who had experienced harassment or abuse at school were twice as likely to report being diagnosed with Post-Traumatic-Stress Disorder than the other participants (21% compared to 10%, $P < .05$). Many of the participants talked about self-harm either as a means of 'stress relief', and a few individuals framed it as their attempt at changing their own body. For example, Dane (transgender MtF, 16yrs) explained:

At 13, I tried to stop the feminisation of my chest by burning it with a lighter. I don't actually classify this as self-harm, because the aim wasn't to hurt myself; it was to fix what I perceived as a legitimate physical defect.

Several individual participants had also discussed burning or cutting unwanted body parts in this way, as a means to 'fixing' themselves when they were unaware of, or felt unable to access, more appropriate medical approaches – a condition particularly experienced by the rural participants.

Moving & Metronormativity

Across all three studies the belief that life would be better in an urban area was often part of the narratives of rural GLBTIQ students, many of whom were looking forward to moving to urban areas to attend university or to start work in the future. For example, Fin (gay, 17yrs) said *My hopes are to finish year 12. Leave [this town] and not return. I F**ING HATE IT HERE!* and Mark (gay, 18yrs) commented *I lived just outside Melbourne, in an area considered 'rural' where no one was gay. It was s**t! But now things are looking better.* Jackie (lesbian, 18yrs) idealised the move as one towards joining the gay community:

In March I am moving to Brisbane, from my regional town. I don't know what is going to happen, but in a few months' time I will have something other than a few books, two mates, a gay ex-teacher and the internet, in order to be a part of the 'gay community'... I have never been A PART of the gay community! [This town] just doesn't have one.

Louise (lesbian, 21 years) said her feelings about her sexuality have gone from really bad to great in a very short amount of time, due to my move from rural Australia to Brisbane. She argued that it would be a long time before GLBTIQ people were 'properly accepted' in country areas, but that the resources and attitudes in the city made being gay a more positive experience.

Growing up gay in rural and regional Australia was terribly depressing. My parents took it well, but stressed the need to keep it a secret. For six years, I thought I was the only lesbian in my area – services aimed at LGBT young people were all in the cities.

Since moving to Brisbane she has been able to *join two queer social groups, a queer book club and have three gay housemates*, and emphasises the need for GLBTIQ community groups and positive role models.

Anna, (bisexual, 19yrs) was one of the students who had recently moved to a rural area from an urban one. She reflected:

All I can say from coming from a big city such as Melbourne where same sex couples are well common and you see a lot of us around and coming to a rural town where most same sex couples 'hide and live in fear' is hard to believe that we are living in the same country! There isn't anything around here unless we travel to [nearby town] near 1.5 hours away. There have been a few suicides here lately where the guys/girls have spoke about their sexuality and become victims of such abuse and ignorance from the community. Narrow-minded people in this town!!!

There were however exceptions to the negative narratives about rural and remote areas. For example, Honora (lesbian, 18yrs) said, *My town is very open towards the gay community (in fact we have a remarkably large gay community, almost 1 in 7 people in the town, which is amazing for a country town).* The internet played an important role in improving some GLBTIQ students' experiences of rural living. Violet (lesbian, 15yrs) lived in a small Christian town and used the internet to *gain a sense of belonging and pride in the gay community and appreciate the lighter side of gay culture – that it involves fun as well as struggle.* Zane (gay, 21yrs), explained, *Having grown up in rural Victoria, there is a severe lack of face-to-face aid and support available to a sexually confused child. The internet is a rich source of information which can help alleviate the feeling of*

isolation. He used the internet to find partners, to come out to friends and to eventually give himself the confidence to attend gay meet-up events off-line.

The transgender and intersex participants from Studies 2 and 3 were particularly likely to have narratives in their qualitative responses which supported the concept of metronormativity. Many had already moved to Melbourne and Sydney because they had specific gender centres, gender experts and social supports for transgender and intersex people that were more difficult to find elsewhere. There was a distinct lack of transgender and intersex friendly services in rural areas, and also in cities like Brisbane where many services had recently shut down due to a lack of government support. Sally (MtF transgender, 18yrs) pointed out that the reason access to services was so important for transgender people in particular was that often it was a mandatory requirement of transition:

Part of the whole medical transition thing is mandatory counselling ... it's probably worth noting that I live in a small town in WA..., so access to relevant mental health professions can be a bit patchy for teens dealing with issues regarding gender.

Harry (FtM transgender, 24yrs) said that his best experiences were with doctors and health-care providers in the city area of Melbourne, to whom he would travel for many hours from his rural town since he was a teenager, in order to facilitate his transition to become male. In contrast, doctors in his rural home area *have little to no knowledge of trans* healthcare*. Like many of the participants who mentioned having poorly prepared providers, he was providing them with what little educational information he could. But he was not comfortable with this, and felt that the situation was terrible:

I would like to see it become easier from rural trans people to get adequate healthcare. I only found my good GP and psychiatrist because I got lucky and found someone who is trans* who put me on to them. It is very hard to find fellow trans* people in these areas and there is no visibility of a community existing in other areas either. There needs to be more services visible, so you don't need to out yourself while you are looking for help.*

Photoman (male, 41yrs) lived in a rural area and had only come to terms with being transgender later in life due to the lack of services for youth. He found he had to travel for four and a half hours just to see a doctor he could trust. The alternative was to deal with incompetent practitioners whom he had to teach:

... the locals I do not trust or like. Most of the time they are locums and I was continually having to tell them what was happening with my treatment. The locums at my local centre have no idea and do not understand trans issues. My regular GP has some knowledge and has been educating himself on trans* issues and treatments, that's why I prefer to travel.*

There were quite a few participants who had this issue, suggesting a clear need for better education of rural health providers Australia-wide, and city providers outside of NSW and Victoria.

Improving Life

In Study 1 all GLBTIQ students were asked what would improve their lives. For urban students the majority of answers focussed on improved sexuality education on GLBTIQ themes. For the majority of the rural students, their responses directly referred to their location in a rural area in some way. For most of the rural GLBTIQ students, their response related to **increased access** to social supports, groups or events focussed on GLBTIQ themes. For example, Fran (bisexual, 18yrs) called for *Having more same sex initiatives everywhere, especially rural areas*; Sally (bisexual, 16yrs) called for *easy access to GLBTIQ events/ support (especially since I live in a rural area)* and Rachel (lesbian, 20yrs) called for *more gay groups especially for rural areas*. Tom (gay, 21 years) wanted his school to improve its sex education to include same sex issues, but unlike the urban students he was concerned that making GLBTIQ issues more popular could force people out of 'the closet' and put them in danger:

... no matter how hard you try there will most always be bullying in school. You don't need to give more ammunition to children. This is from my own personal experience as my school was in rural area so city school would be different.

He argued that *the information needs to be there and the children aware it is there, but be able to retrieve it at their own terms.* A few individuals gave responses which indicated that they felt these supports were likely mutually exclusive with living in a rural area; such as Jonas (gay, 17yrs), who offered *Better information at school. Living in a less rural area.* Other smaller themes included a focus on safety – such as Brett's (gay, 20yrs) answer; *Feeling safe to be myself within the community, particularly rural.* A smaller number of individuals considered a change in attitude with rural communities in some way. Jayden (gay, 21yrs) gave a response that was typical for this sub-group when he responded, *More enlightened attitudes in rural areas* could improve his life overall.

In Studies 2 and 3 participants were also asked what could improve their lives, and their focus was almost exclusively on education of medical and educational professionals regarding transgender and intersex issues. Maddox (male/ ftm/ transman, 21yrs) suggested that younger health-care and educational professionals who had lived, worked and studied in *big Western cities* should be brought to hospitals and schools in rural areas, because he felt they had a fairly strong basis of what transgender is compared to those who were older or were mainly based in rural areas. He also felt it impacted their knowledge of terms like *gender dysphoria and gender neutral.*

The participants repeatedly emphasised their sense of feeling overwhelmed by having to educate their principals, teachers, school counsellors, psychologists and doctors on transgender and intersex themes. This was particularly so for the younger participants who had little information on these topics themselves, and had often initiated contact with these staff in order to gain more information in the first place. However, many respondents from Study 3 found that some engagement in educational activism, when conducted in groups of local community members in their area, could be helpful for their self-esteem and wellbeing. Shannon (androgynous, 17yrs), explained that before engaging in local activism in a social group:

I never felt part of a community before. I didn't agree with the religion I was born into, I never liked many people at my schools or how the school operated. I didn't care about the area I lived in".

After the group targeted the school with information it helped Shannon with regaining a sense of community and connecting to peers.

CONCLUSION

The studies showed that GLBTIQ people from many rural and remote towns felt that the rurality of their schools and homes impacted their experience of GLBTIQ identity, often due to isolation from GLBTIQ communities and a lack of appropriate educational and medical services. Many aspired to leave their rural and regional homes and supported narratives evidencing Gray's (2009) 'metronormativity' – the assumption that GLBTIQ identities can only be successfully inhabited in city contexts. This assumption need not be perceived as 'the truth'; the studies uncovered that there is indeed a full range of experiences had by GLBTIQ students in a plurality of rural areas, including some individuals who experienced rural towns and schools that were safe and supportive. However, at times social activism, creating or accessing social events or engagement with internet communities had been necessary to improve their experiences. Thus to improve conditions more widely, staff in rural educational and health services should undertake training in GLBTIQ-sensitive service delivery through national bodies like the Australian Safe Schools Coalition, or trusted state-specific bodies that have previously liaised with educational bodies locally (such as WA's Freedom Centre, QLD's Open Doors and Parents and Friends of Lesbians and Gays, SA's Shine and so on). Training should avoid stereotypes about rural people as 'innately' more homophobic, upholding the assumptions of metronormativity. Both school and health service staff need to learn how to actively signal to GLBTIQ youth

(through poster displays and pamphlet provision) that they are welcome in their environments, and would be supported if they needed further assistance. Urban GLBTIQ supports (gender clinics, education networks and so on) should reach out to rural GLBTIQ students by offering emergency contact via Skype, telephone or online forums, to better meet their needs in the interim. Social groups and events, whilst they have a tendency to arise organically, are seen as very important for wellbeing by rural GLBTIQ students and need to be encouraged and supported by institutional structures. Administrative bodies or school leaders can allow and approve GSAs, the setting up of 'queer rooms' or the hosting of diversity-focussed events on-campus.

School policies consistent with the safe space provision and anti-discrimination approaches consistent with new national legislation protecting GLBTIQ students have been found to reduce incidences of bullying and wellbeing deficits for the group and these are encouraged alongside more discrete provision of information on GLBTIQ issues in schools – both through general sexuality education efforts and provision of pamphlets in communal areas or counsellors' offices (Jones, 2015; Jones et al., 2015; Smith et al., 2014). This information should contain links to local social groups in rural areas. Further, rural educators discussed in a range of contexts in the study did on occasion engage with education efforts designed by academics around themes of Queer theory, anti-homophobic pedagogies or simply the more complex exploration of social constructions of sex, gender and sexual orientation. Such efforts could be more broadly taken up through rural educators exploring the study of such themes offered in key academic writings on Queer themes directly in higher education contexts or with senior students, such as excerpts from the seminal text *Gender Trouble* (Butler, 1990). Educators may also consider existing influential writings and practical interpretations by educators and academics from a range of contexts for work with a variety of student grade levels (Barnard, 1994; Britzman, 1995; Bryson & De Castell, 1993; DePalma & Atkinson, 2007), including with primary schools students (DePalma & Atkinson, 2009).

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