RESOLUTION 109 - 2011

Subject: Supporting School Counselor Training in Lesbian, Gay, Bisexual, Transgender, and Questioning (LGBTQ) Issues to Foster a Positive School Climate

Introduced by: Michelle Hofmeister

Referred to: Health Care Insurance and Access

Whereas, Peer victimization, bullying, and a negative school climate for lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth may lead to higher rates of depression, suicide, alcohol and drug use, and truancy;¹ and

Whereas, Many school counselors receive inadequate or no training on sexual and gender identity and on providing LGBTQ affirmative services;² and

Whereas, School provision of peer-support groups, LGBTQ counseling, and anti-bullying policies are associated with less peer victimization and lower rates of suicide attempts;¹ therefore be it

RESOLVED, That the Wisconsin Medical Society opposes bullying in all its forms, including LGBTQ bullying, and supports legislation and policies that take responsible steps to prevent and take action against bullying; and be it further

RESOLVED, That the Wisconsin Medical Society encourage training programs for school administration, counselors, and students to become active leaders in promoting anti-bullying policies and positive school climates.

Fiscal Notes: First resolve within current budget if replacing existing legislative priority. Potential fiscal impact in second resolve depending on how Society is asked to encourage training programs.

References:

Relevant Policies

Society:
OUT-002 Helping Parents of Lesbian, Gay, Bisexual and Transgendered Children: The Wisconsin Medical Society should encourage physicians to inform the public of local or a national organizations such as PFLAG (Parents, Family and Friends of Lesbians and Gays) which have proven very helpful in helping families come through these stressful times and which have been very helpful in educating the public. (BOD, 0610)
AMA:

D-60.992 Bullying Behaviors Among Children and Adolescents
Our AMA shall work with appropriate federal agencies, medical societies, the Alliance, mental health organizations, education organizations, schools, youth organizations, and others in a national campaign to change societal attitudes toward and tolerance of bullying, and advocate for multifaceted age and developmentally appropriate interventions to address bullying in all its forms. (CSA Rep. 1, A-02)

D-60.993 Bullying Behavior Among Youth
Our AMA:
(1) will address bullying as a major component of its violence prevention program;
(2) will encourage appropriate public and private funding agencies to support research on bullying behavior and anti-bullying interventions (e.g., through special Requests for Proposals;
(3) through the Council on Scientific Affairs, will review the available research on the efficacy of intervention programs designed to reduce bullying;
(4) will work with specialty societies, state and local medical associations, the Alliance, public health agencies, departments of education, and other interested parties in preparing and disseminating materials that will help schools, teachers, parents, and others to address bullying at the local level; and
(5) will evaluate survey instruments that can be used to measure the incidence of bullying. (Res. 413, A-01).

D-515.997 School Violence
Our AMA will collaborate with the US Surgeon General on the development of a comprehensive report on youth violence prevention, which should include such issues as bullying, racial prejudice, discrimination based on sexual orientation or gender identity, and similar behaviors and attitudes. (CSA Rep. 11, I-99; Modified: BOT Rep. 11, A-0)