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LGBTQ Inclusivity Toolkit Demonstration Project
Pre-Post School Staff Survey

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LGBTQ Inclusivity Toolkit Demonstration Project Pre-Post School Staff Survey

Respondents will first review informed consent and decide whether they choose to continue and take the survey or not continue and exit the survey.

Survey Instructions

Please read each question carefully and select the answer that most closely fits your opinion. We have provided definitions below of terms that we use throughout the survey for your reference. We thank you for taking the time to complete this survey.

Definitions

- **Sexual orientation** refers to a person's sexual and emotional attraction to another person and the behavior and/or social affiliation or identity that may result from this attraction (straight, lesbian, gay, bisexual, etc.).
- **Gender identity** refers to a person's innate, deeply felt psychological identification as male, female, or something else (e.g., non-binary) which may or may not correspond to the person's designated sex at birth.
- LGBTQ stands for lesbian, gay, bisexual, transgender, or queer/questioning.

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1.	lease select your current role:					
	 ☐ Instructional Staff (skip to instructional staff list) ☐ Non-Instructional Staff (skip to non-instructional staff list) 					
	· · ·					
	*Skip to either Question 2 based on response to Question 1					
2.	Please select your current instructional staff role. Select multiple.	Please select your current non-instructional staff role. Select multiple.				
	☐ Teacher ☐ Paraprofessional ☐ ESL Teacher ☐ Instructional Coach ☐ Other (open text box)	 □ District level staff □ School office staff □ Administration □ Student services (School Psychologist, Nurse, Social Worker) □ Custodial staff □ Cafeteria staff □ School Resource Officer □ Other (open text box) 				
3.	How long have you served in your current role? ☐ 1 year or less ☐ 2-5 years ☐ 6-10 years ☐ 11 or more years					
4.	What is your highest level of education? High school or equivalent Associate degree Some college coursework completed Bachelor's degree Master's degree Doctorate or professional degree (e.g., MD or JD)					

5.	Are you aware that your district is working to implement an LGBTQ inclusivity toolkit this year?
	☐ Yes
	□ No

6. How much knowledge do you have about the types of resources for students with LGBTQ identities at your school in the following areas?				
	No knowledge	A little knowledge	Some knowledge	A great deal of knowledge
The types of programs and activities, such as clubs, that my school has for students with LGBTQ identities				
Social emotional learning, mental health, and counseling services tailored to students with LGBTQ identities				
Community organizations that support students with LGBTQ identities				

7. Please tell us how much you agree or disagree with the following statements:					
	Disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Agree
I am aware of policies in place at my district that provide protection for students with LGBTQ identities.					
I feel confident applying my district's policies during incidents that involve bullying of students with LGBTQ identities.					
I feel confident applying my district's policies that support maintaining safety for students with LGBTQ identities.					

3.	_	the last school year did you attend any professional development training(s) that addressed the needs of students GBTQ identities?
		Yes (skip logic to question 9)
		No, (skip logic to question 10)
9.	How m	nany hours did you spend at these professional development trainings?
		1 to 3 hours
		3 to 6 hours
		More than 6 hours
10		ften do you use inclusive teaching strategies and materials (e.g., valuing other cultures and perspectives, using als that present history from a different perspective)?
		Not applicable (I am not an instructor)
		Never
		Daily
		Weekly
		Monthly

11. How often do you					
	Never	Daily	Weekly	Monthly	Quarterly/ Semester
Participate in or support any school-based LGBTQ-inclusive activities, such as awareness weeks or LGBTQ history month?					
Participate in or support a GSA (Gay Straight Alliance or Genders and Sexualities Alliance) or similar school-based LGBTQ-inclusivity club?					
Display symbols or other visuals to indicate your classroom or office is a safe space?					
Share your pronouns with students and other staff to support the school becoming a more					

inclusive environment?						
Seek out opportunities offered by your school or district to learn about LGBTQ identities and experiences?						
Familiarize yourself with school and community-based resources for students with LGBTQ identities?						
Engage in discussions about LGBTQ topics with students or other staff?						
Refer students to activities, groups, partners, or other resources either through the school or outside of the school that support students with LGBTQ identities?						
12. What concerns, if any, do you have about eng Please select all that apply. □ I am concerned about negative feet □ I am afraid people will think that I□ I do not have time. □ I do not know how. □ I do not believe that addressing LO □ I do not believe LGBTQ inclusivity i□ Other (open text box)	edback from par edback from oth identify as LGBT GBTQ inclusivity	ents/caregivers er school or dis Q (regardless o	or students. trict staff. f whether you			estion?
13. How much do you disagree or agree with the statements?	following					
		Disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Agree
It is important for students with LGBTQ identitie	s and the					

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experiences of people with LGBTQ identities to be recognized in school activities.			
It is important for students with LGBTQ identities and the			
experiences of people with LGBTQ identities to be recognized in			
school lessons.			
It is important for schools to work towards being safe places for			
students with LGBTQ identities.			
It is part of my job to build a school environment in which students			
with LGBTQ identities feel safe and affirmed.			
It is the responsibility of each individual who works at a school to			
work towards LGBTQ inclusivity.			
It is part of my job to support LGBTQ inclusivity activities (e.g.,			
supporting clubs, learning more about supporting students with			
LGBTQ identities, being a safe person with whom students can			
discuss LGBTQ issues).			
·	1		

14. In your opinion, how much support is provided to students with LGBTQ identities in your school?				
	No support	Little	Some	A lot of
		support	support	support
From instructional school staff				
From non-instructional school staff				
From administrators				
From students				
From parents/caregivers, and the community				

15. During the current school year, how many	times have you heard students make harassing statements to another student or to a
school staff related to sexual orientation?	

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	1 time 2-3 times 4-5 times 6 or more times
school	the current school year, have many times have you heard <i>students</i> make harassing statements to another student or to a staff related to <i>gender identity</i> ? 0 times 1 time 2-3 times 4-5 times 6 or more times
	the past school year, have you intervened in a situation of bullying related to sexual orientation or gender identity? Yes (skip logic to question 18) No (skip logic to question 22)
the stu	intervened in an instance of bullying related to sexual orientation or gender identity, what actions did you take regarding ident who was doing the bullying? Please select all that apply. I have not intervened in any instances of bullying Asked the student who was doing the bullying to stop Talked with the student who was doing the bullying about the potential harm of the bullying behavior Referred the student who was doing the bullying to a school counselor or other resource staff Referred the student who was doing the bullying to school administration for disciplinary action Referred the student who was doing the bullying to a restorative practice program at the school (e.g., conflict resolution) Initiated a restorative practice with the student who was doing the bullying (e.g., peer-to-peer mediation) Contacted parent or caregiver about the behavior Other, please specify:

19. If you intervened in an instance of bullying related to sexual orientation or gender identity, what actions did you take regarding the student who was being bullied? Please select all that apply.

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	I have not intervened in any instances of bullying Referred the student who was being bullied to support services at the school Referred the student who was being bullied to support services outside of the school Initiated a restorative practice with the student who was being bullied (e.g., peer-to-peer mediation) Contacted parent or caregiver about the behavior Other, please specify:
their se	the past school year, how many times have you intervened in a situation where a student was being bullied based on exual orientation or gender identity? 0 times 1 time 2-3 times 4-5 times
	6 or more times I have not experienced a situation where a student is being bullied based on their sexual orientation or gender identity.
being b	the past school year, how many times have you consulted with school or district administrators about a student who was bullied based on their sexual orientation or gender identity? 0 times 1 time 2-3 times 4-5 times 6 or more times I have not experienced a situation where a student is being bullied based on their sexual orientation or gender identity.
intervo like th □	comfortable are you intervening in instances of bullying related sexual orientation or gender identity? If you have ened in a situation like this, think back to how you felt during that experience. If you have never intervened in a situation its, please try to imagine how you think you might feel. Very uncomfortable Somewhat uncomfortable Neither uncomfortable nor comfortable

Somewhat comfortable
Very comfortable