

OUT of the **Margins**

A Report on Regional Listening Forums Highlighting the Experiences of Lesbian, Gay, Bisexual, Transgender, and Questioning Youth in Care

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Lambda Legal Defense & Education Fund is a national organization committed to achieving full recognition of the civil rights of lesbians, gay men, bisexuals, transgender people, and those with HIV through impact litigation, education, and public policy work.

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Most importantly, we would like to express our sincere gratitude to the hundreds of young people and adults who participated in the Listening Forums. We thank them for their generosity of spirit, their courage and willingness to share their stories and experiences, and their unending commitment to ensuring the safety and well-being of LGBTQ youth in care.

The Andrus Family Fund and the Transition Framework

Fostering Transitions: The CWLA/Lambda Joint Initiative and the Regional Listening Forums were made possible with the generous and visionary support of the Andrus Family Fund (AFF). AFF is a grantmaking foundation that has as a priority funding projects that help young people transition from foster care to adult independence. AFF and its grantees are guided by author William Bridges' Transition framework for achieving lasting change. AFF provides funding to unique projects that apply this framework in working with individual clients, including young people transitioning out of foster care, as well as to projects that address broader social change involving many individuals or organizations. The Transition framework has informed the work of the CWLA/Lambda Joint Initiative and the goals of our Listening Forums.

According to William Bridges, transition is fundamentally different from change. Where change is external and situational (e.g., when a young person ages out of foster care, or when a foster care agency adopts policy changes), transition is internal and psychological and describes the process of responding to the change. Bridges divides this process into three consecutive but overlapping stages: 1) *the ending*; 2) *the neutral zone*; and 3) *the new beginning*. Every transition begins with an *ending*, when old ways of acting consciously end and the loss that results from letting go of the familiar is acknowledged. Second, there is a *neutral zone*, where the old situation no longer exists, but the new situation is not yet comfortable. The *neutral zone* is an in-between time that may be marked by considerable chaos and great creativity. And, finally, if the first two phases are adequately attended to, there can be a *new beginning*, when lasting change truly occurs. Bridges believes that by supporting individuals and organizations in each stage of the transition process, change is most likely to be meaningful and permanent.

The Regional Listening Forums were designed as a key means to initiate the transition toward building the capacity of the nation's child welfare system to meet the needs of LGBTQ people, beginning with an acknowledgement of the *ending* of the ignorance and avoidance of the needs of LGBTQ young people and the old attitudes that have stood in the way of compassionate care. The Listening Forums provided an opportunity to share powerful stories of real-life experiences

and challenges directly from those who have lived them. By engaging participants in considering the points of resistance in creating an LGBTQ-supportive system and the tools and approaches that best support the transition to a new approach, Forum participants also addressed the needs of the child welfare field as it moves through the *neutral zone* of new learning. In many cities where a Listening Forum was held, a local task force was formed afterward to provide ongoing support and assistance to continue the transition toward the *new beginning* of a child welfare system that welcomes and supports LGBTQ youth and adults.

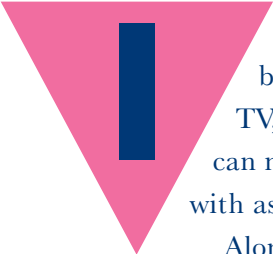
The AFF website (www.affund.org) offers further resources on this framework and how it can be applied to other situations involving change, as well as information about applying for an AFF grant. Several other LGBTQ foster youth-serving organizations are or were AFF grantees, including Gay and Lesbian Adolescent Social Services, Inc. (GLASS) in Los Angeles, California; Green Chimneys Children's Services, Lawyers for Children, and the Urban Justice Center in New York, New York; and True Colors, Inc., in Manchester, Connecticut.

We are profoundly grateful for AFF's support and vision, without which this Joint Initiative and report would not have been possible.

A LETTER OF FAITH

By H.J. David Ambroz, Attorney

Former youth in foster care



I am of the belief that isolation does not come from being alone, because how can we truly be alone? Awash in bodies on the street, on TV, at the store, in school, at church, in any and all public venues, one can never be alone with rare exception. Yet, as a child in care, in homes with as many as 40 youth, I never felt more isolated and alone.

Alone, and removed from the familial support network, no matter how dysfunctional, I was placed in a system and diagnosed as different—sick—simply because I was confused about my sexuality. In those isolating places, in those isolating times, I needed to know that I was okay, that no cure was needed. Even among my friends who knew that I was gay, it was not often discussed. And if it was, it was done in hushed tones and with diffused, opaque language.

Alone, as a gay youth, I was already part of a diaspora, fated to be different, and thrown among a populace that neither understood nor tolerated my divergence. Confused and isolated, I did much damage to my body, if not my soul, as I came to terms with my divergence at a time in adolescence when conforming is paramount.

Alone, away, and lost in the pre-*Will & Grace* days, the pre-Matthew Shepard days, the pre-*Lawrence* days, the pre-*Goodridge* days, the days of DOMA and Don't Ask, Don't Tell—these were my times, and still these are our times. So much has changed, but so much is still the same. LGBTQ youth are often dispersed and lost without a community to cheer and encourage and love and cherish them. These young travelers need to be armed with the knowledge that they are not broken; there is no need for a cure. They need to be made aware of their people's history, their community's proud and strident march towards equality.

Alone, fighting our self-immolation, we need society's love and support. We need not to be isolated and dispersed. In numbers there is power, if only in perception. They tried to cure me, but I was emboldened to fight all my battles with the same fervor they brought to my cure. The cure for the isolation that LGBTQ youth experience is a forum in which youth may gather, to support and nurture our divergence. What a simple thing it would have been to understand what I do now—I'm not alone, and I'm okay.

INTRODUCTION

I got jumped by a bunch of guys in my group home, and when I told the Director he said, “Well, if you weren’t a faggot, they wouldn’t beat you up.”

I realized that being gay is not my problem. It’s their problem. I see homophobia as a social disease. I try not to get involved in negative communities. But I do try to teach them. I’d rather teach them than ignore them. Otherwise, the ignorance will continue and nothing will ever be done about it.



Young people currently in the care of the child welfare system made these statements during events called Regional Listening Forums, organized by the Child Welfare League of America (CWLA) and Lambda Legal Defense and Education Fund (Lambda). The objective of these events, held in 13 different cities around the country between September 2003 and December 2004, was to highlight the experiences of lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth in care. The CWLA/Lambda Regional Listening Forums provided an opportunity for LGBTQ youth in care, and the adults who work with and care for them, to share their experiences and to work together to identify strategies for bringing about lasting change within the child welfare system. More than 500 youth and adult participants from 22 states attended the Forums, offering personal stories of actual experiences and concrete solutions for building the capacity of the child welfare system to better meet the needs of LGBTQ young people in care.

Background

The child welfare system has generally not been a safe and supportive place for LGBTQ youth. As a result, many have learned to hide in order to survive, while

others, unable to hide, turn to the streets in search of more safety than the system provides. Unlike other demographic characteristics such as race, age, or (in most cases) sex, LGBTQ youth may not be readily recognized by child welfare professionals, especially those ill-equipped to engender the trust necessary for a young person to disclose his or her sexual orientation or gender identity.

LGBTQ youth in care experience the same vulnerabilities as other youth. But their vulnerabilities are compounded by the high levels of abuse and rejection they often experience in their families, their placements, among their peers, in their schools, and in their communities. This can have profound consequences for their mental and physical health. For example, a study of high school students in Massachusetts found that gay, lesbian, and bisexual students were three times more likely to report having been threatened or injured with a weapon at school (23.5% of sexual minority students vs. 7.8% of others) and more than five times more likely to have attempted suicide (40.4% of sexual minority students vs. 7.2% of others) (Goodenow, 2003). LGBTQ youth often experience violent abuse, based on their sexual orientation or their gender identity, at the hands of members of their family of origin. Thirty-three percent of gay men and 34% of lesbians report suffering physical violence from family members as a result of their sexual orientation (Gross, Aurand, & Addessa, 2000). Current research shows that rejection of LGBT youth by families and primary caregivers can lead to negative physical and mental health outcomes for these young people (Ryan & Diaz, 2005). In the child welfare system, LGBTQ young people report experiencing incidents of violent abuse, rape, and harassment in their foster and group homes because of their sexual orientation and gender identities (Mallon, 1998).

CWLA/Lambda Joint Initiative

To fundamentally change the way LGBTQ youth are treated in the nation's foster care system, and to build the capacity of the system to support these youth, CWLA and Lambda combined their respective expertise in child welfare and LGBT civil rights and launched a partnership entitled "Fostering Transitions: CWLA/Lambda Joint Initiative to Support LGBTQ Youth and Adults Involved with the Child Welfare System." Based in Washington, DC, with regional offices in six cities, CWLA is the nation's oldest and largest membership-based association

of child welfare organizations. With a membership base of nearly 1,000 private and public child welfare agencies, including nearly every state's department of child welfare services, CWLA and its members attend to the needs of over 3.5 million abused and neglected children and their families each year with a wide range of services. Lambda is the country's oldest and largest advocacy organization dedicated to advancing the civil rights of LGBT people and people with HIV. Headquartered in New York City, Lambda also has four regional offices.

Together, CWLA and Lambda are working with partner organizations across the country to assist the child welfare field to:

- Let go of its previously held beliefs that LGBTQ youth do not exist or are to be shunned;
- Enter into a phase of new learning about LGBTQ youth so that their needs can be better understood; and
- Engage in new approaches to ensure that the needs of LGBTQ youth in care are met.

The Joint Initiative includes the following components:

- **LGBTQ Program Director and Foster Care Attorney:** For the first time in its 85-year history, CWLA hired a full-time LGBTQ Program Director to coordinate its efforts to improve systems of care for LGBTQ youth. Lambda's full-time Foster Care Attorney serves as Lambda's primary representative on the Joint Initiative.
- **National LGBTQ Advisory Network:** The Advisory Network is comprised of nearly 100 child welfare professionals and more than a dozen LGBT young people who guide and inform the Joint Initiative staff in the development of programmatic strategies, materials, and resources. All youth members of the Advisory Network are currently or have been in foster care. Advisory Network members also help disseminate information throughout their communities and regions.
- **Conferences:** Joint Initiative staff have conducted more than 50 workshops and presentations at national and regional conferences throughout the country. CWLA held a preconference institute dedicated entirely to LGBTQ issues prior to its 2005 national conference in Washington, DC. Based on the success of that event, in November 2006, CWLA will dedicate its entire annual three-day best practices conference, "Finding

Better Ways,” to the subject of working with LGBTQ youth in care. This conference, to be held in Nashville, Tennessee, will be the first national conference entirely dedicated to issues affecting LGBTQ youth in the child welfare and juvenile justice systems.

- **Publications:** In addition to this joint publication, CWLA dedicated the entire March/April 2006 special edition of its *Child Welfare* journal exclusively to LGBTQ issues. Furthermore, in 2006 CWLA will publish *Best Practice Guidelines for Working with LGBTQ Youth in Care* to assist child welfare professionals in their efforts to support these young people. These *Best Practice Guidelines* have been developed through a collaboration known as the Model Standards Project (MSP) coordinated by Legal Services for Children and the National Center for Lesbian Rights, both based in San Francisco, California (see Conclusion). Finally, CWLA has updated its website to include, for the first time, information and materials relating to LGBTQ youth issues¹ and lists among its recommended sites the Lambda website² with its many materials geared for LGBTQ youth and families.
- **LGBTQ Toolkit:** In order to provide practical resources to the child welfare field in serving LGBTQ youth, the Joint Initiative is developing a “toolkit” that will contain information and resources to assist child welfare practitioners to support LGBTQ youth and families.
- **Public Policy and Advocacy:** The Joint Initiative staff has provided technical assistance to child welfare officials in a number of locales who are working toward developing competency in caring for LGBTQ youth in care. CWLA and Lambda have worked on policies, training initiatives, local task forces, and legislative matters in states around the country. In 2005, CWLA released and posted on its website a formal public policy statement in support of parenting by gay, lesbian, and bisexual, individuals and same-sex couples.

Regional Listening Forums

Previous publications by both CWLA and Lambda, including Lambda’s *Youth in the Margins: A Report on the Unmet Needs of Lesbian, Gay, Bisexual, and Transgender*

¹ See www.cwla.org/programs/culture/glbqtq.htm.

² See www.lambdalegal.org.

*Adolescents in Foster Care*³ (2001) and CWLA's *Serving Gay and Lesbian Youths: The Role of Child Welfare Agencies* and *Serving Transgender Youth: The Role of Child Welfare Systems* (1991 and 2000) contain numerous recommendations for the child welfare field to provide competent care for LGBTQ youth. Nonetheless, LGBTQ youth in the child welfare system have largely remained invisible and marginalized, and their voices have often gone unheard. Indeed, an administrator of one of the state child welfare agencies interviewed for *Youth in the Margins* claimed, "there are no [LGBT] youth in the state's foster care system" (page 103), although others in the state confirmed that this, of course, was not the case. In order to fundamentally change the way the system has treated these youth, CWLA and Lambda decided that a new approach was needed. The Joint Initiative sought to hear firsthand from LGBTQ youth themselves about their experiences in the child welfare system, and to work together with child welfare professionals to find solutions to the gaps and barriers to providing more competent care. This approach can lead to more meaningful and lasting change.

The CWLA/Lambda Listening Forums provided a safe environment for LGBTQ youth and the adults who work with them to share their experiences and devise strategies for a more competent system of care. Participants heard powerful first-person accounts of real-life experiences and challenges directly from those who have lived them, and considered the points of resistance to an LGBTQ-supportive environment and solutions for overcoming obstacles.⁴

Forums were planned through a collaborative process between Joint Initiative staff and local hosts and planners, many of who are members of the CWLA/Lambda National LGBTQ Advisory Network. Several documents were developed to support the recruitment of adults and youth to the Forums, including an invitation letter for adults, a separate invitation for youth containing more youth-friendly language, and colorful flyers for display in target areas (see Appendix A for examples of these materials). A high priority was placed on holding Forums in geographically diverse locations and in every region of the country.

3 This report can be downloaded free of charge at www.lambdalegal.org/cgi-bin/iowa/news/publications.html?record=899.

4 All participants were asked to read and sign a consent or assent form, depending on their age, confirming that they were participating in the Forum willingly and of their own volition. The consent/assent forms noted that the group sessions would be tape recorded for purposes of preparing the subsequent report of the Forums, but that no identifying information would be used. The consent/assent forms were reviewed and approved by CWLA's Institutional Review Board (see Appendix B for examples of these forms).

Forums were held in Hartford, Connecticut; Tucson, Arizona; New York, New York; Bloomington, Indiana; Sacramento and San Diego, California; Augusta, Maine; Jacksonville and Fort Lauderdale, Florida; Minneapolis, Minnesota; Denver, Colorado; Salt Lake City, Utah; and Philadelphia, Pennsylvania. The Forums also drew participants from a number of other states, including Georgia, Wyoming, Washington, Illinois, Ohio, Kentucky, Hawaii, North Carolina, Massachusetts, Rhode Island, South Dakota, and Texas. A large part of what made the Regional Listening Forums unique was their broad geographic scope, the variety of perspectives of the participants, and the consensus across the board that more needs to be done to protect and support LGBTQ youth in care.

Participants serving an array of functions within the child welfare system were invited to each Forum, including state child welfare administrators and policymakers; executives of local nonprofit service providers; clinical, direct care, and administrative staff of residential treatment and group home programs; representatives from the juvenile justice system; judges, lawyers, and Guardians ad litem; school administrators, teachers, and counselors; foster parents and families of youth in care; child welfare advocates; and most importantly, LGBTQ youth themselves.

Strategies for recruiting youth participants varied depending on existing services and resources, knowledge and understanding on the part of the local hosts and planners as to where to locate LGBTQ youth, and levels of trust between LGBTQ youth and local service providers. The overall goal of attracting 20 to 40 participants for each Forum was easily met.

The Joint Initiative held the Listening Forums in a variety of settings: two in local LGBT community centers, one in a private nonprofit community-based service organization, five in state or city offices, three in churches, and two in conjunction with national or regional conferences.

Discussion during the Forums, which typically lasted three to four hours, focused on three primary areas: existing resources for LGBTQ youth, unmet needs of LGBTQ youth in care, and strategies to improve care.

About three dozen questions were posed to the participants to guide the discussion (see Appendix C for a sample agenda and question list.) Participants focused on the following areas of particular concern for LGBTQ young people: anti-LGBTQ attitudes and their effects on the treatment received by LGBTQ youth in care, safety in placements, homelessness, school conditions, permanency planning, transgender youth issues, faith-based services, issues faced by youth in rural areas,

and issues faced by LGBTQ-supportive adults who work in the child welfare system. Consensus emerged at the Forums around three overarching themes:

1. A pressing need exists for comprehensive policies to facilitate open and competent support for LGBTQ youth in care;
2. If LGBTQ youth in care are to be served competently and compassionately, staff and service providers throughout all levels of the child welfare system require comprehensive training on how to do so;
3. To fill serious gaps in care for these young people, LGBTQ youth require services designed with their specific concerns in mind.

Each chapter of this report identifies and summarizes what Forum participants said about the unmet needs of LGBTQ youth and the steps the child welfare system must take to improve its support of them. These future steps contain specific recommendations for child welfare policymakers and practitioners. Each chapter is framed around direct quotes from Forum participants. It is their voices that guide the Forums and the findings of this report.

A more detailed description of the methodologies used in planning and conducting the Regional Listening Forums can be found in the March/April 2006 issue of *Child Welfare*. For more information about the CWLA/Lambda Joint Initiative, including the Regional Listening Forums, or to learn more about conducting a Listening Forum in your community, visit www.cwla.org/programs/culture/glbtc.htm.

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For Further Reading

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CHAPTER 1

ADDRESSING NEGATIVE ATTITUDES ABOUT PEOPLE WHO ARE LGBTQ



CHAPTER 1

ADDRESSING NEGATIVE ATTITUDES ABOUT PEOPLE WHO ARE LGBTQ

It became real clear to me that my caseworker wouldn't be able to handle it if I came out and told her I was gay. A couple of times I tried to hint around about it, but she just wasn't hearing any of it. And she was always asking me about my "girlfriends." So when she found me a foster home, I knew I couldn't count on her to have made sure they'd be cool with my being gay. I was afraid to tell my foster family too. So, more time in the closet for me.

—Youth participant

Ignorance and homophobia are the two primary barriers to care for LGBTQ youth.

—Adult participant, Jacksonville

We're seeing a national antigay political tone that permeates the child welfare system, hurting LGBTQ young people.

—Adult participant, Denver

Every Forum identified one overarching barrier to supportive services for LGBTQ youth: the negative stereotypes and beliefs about LGBT people still harbored by many involved in the child welfare system. In states ranging from California, where discrimination on the basis of sexual orientation or gender identity is expressly prohibited in the provision of foster care services (California Foster Care Nondiscrimination Act, 2003), to Florida (1977), the only state to ban gay and lesbian adults from serving as adoptive parents, Forum participants recounted story after story describing how ongoing anti-LGBT attitudes undermine young peoples' care.

These attitudes take different forms and stem from different beliefs and misconceptions. On the part of some, they include overt hatred and fear of LGBT people. The term homophobia is often used to refer to such attitudes about lesbian and gay people, while the term transphobia expresses hatred and fear of transgender people. Others, especially those who are uninformed about and have not come to know openly LGBT people, feel a great deal of unease about the subjects of homosexuality and transgender identity. Their attitudes may be based on stereotypes and misinformation that make them uncomfortable dealing with LGBT issues. Our society is rife with unexamined assumptions that heterosexuality and conformity to traditional gender roles are “normal” and therefore superior to others. The dominant thinking in our culture is that it simply is better to be heterosexual than gay or lesbian. This belief, called heterosexism (Herek, 2004), operates to deny and denigrate nonheterosexual forms of behavior, identity, relationships, and community.

The spectrum of negative views about homosexuality and gender variance stems from a variety of sources. For example, some religious denominations condemn homosexuality as immoral and sinful (see Chapter 9). At one time, homosexuality was considered a psychiatric disorder, although since the early 1970s, the leading mental health organizations, including the American Psychiatric Association and the American Psychological Association, have recognized it to be a normal variation in human sexuality. Through laws making consensual sodomy illegal, gay and lesbian people were also long condemned as criminal. In recent decades the great majority of states rejected these prohibitions, however, and in the 2003 decision *Lawrence v. Texas*, the United States Supreme Court declared such laws unconstitutional, holding that gay and lesbian individuals are entitled to government “respect for their private lives” (539 U.S. 558, 578 [2003]). Gender-variant behavior may challenge deeply embedded cultural assumptions and stereotypes about “proper” sex roles (Kite & Whitley, 1996). And negative attitudes may stem from general discomfort with the subject of sexuality, particularly that of young people. This discomfort plays out in ways that especially affect lesbian and gay youth, such as “Abstinence-Only Until Marriage” curricula taught in public schools. Since at the time of this writing, same-sex couples can enter into civil marriage in only one state, Massachusetts, this kind of curriculum sends a very clear signal to lesbian and gay youth that their sexuality can never be condoned. Sexual orientation and gender identity may also be viewed differently within and among ethnic and cultural communities. For example, not

all those who engage in sexual conduct with same-sex partners consider themselves to be “gay” or “lesbian.” In particular, people of color may not identify themselves by these terms, which they may associate with the majority culture.

Negative views about LGBTQ people are, of course, far from universal. With legal shifts like the Supreme Court’s *Lawrence* decision, to positive portrayals of gay, lesbian, and transgender people in the popular media, to increased visibility and openness of LGBTQ people in communities around the country,¹ our society has come to understand and respect its LGBT members more than at any other point in our history.

In a similar vein, all the leading professional and mental health organizations relevant to the provision of child welfare services firmly reject the view that gay people are “deviant” or “abnormal” and condemn discrimination against them or efforts to change their sexual orientation (American Medical Association, 2005; American Psychiatric Association, 1980, 1999, 2002, 2004; American Psychiatric Association Committee on Gay, Lesbian, and Bisexual Issues, 1993; American Psychological Association, 1975, 1997, 2002; Child Welfare League of America, 2005; DeLeon, 1998; Frankowski & American Academy of Pediatrics Committee on Adolescence, 2004; National Association of Social Workers, 1997; Paige, 2005; Patterson, 2004; Perrin & American Academy of Pediatrics Committee on Psychosocial Aspects of Child and Family Health, 2002). Moreover, most adults involved in the child welfare system as professionals or as foster parents no doubt are motivated by the desire to help, not injure, vulnerable children, and do not set out with an intention to harm LGBTQ youth. Many already affirmatively support LGBTQ people, and many more have the capacity to do so once they have greater understanding of what it means to be LGBTQ and of our shared humanity.

The Listening Forums demonstrated, however, that the heterosexism and disapproval still harbored by some in the child welfare system are too often the basis for care that ranges from less than compassionate, to practices and protocols that are outright discriminatory and abusive. The result of societal, institutional, and individual homophobia, transphobia, and heterosexism is that too many child welfare professionals believe that LGBTQ youth are, or should be, invisible, and that their needs are less important than those of youth who are

1 According to the 2000 U.S. Census, same-sex couples live in 99.3% of all counties across America (Gates and Smith, 2001).

heterosexual and gender nonvariant. If LGBTQ young people are not seen as having worth and value by their government, their society, their communities, and the adults who are charged with their care, they will not be afforded an opportunity to develop the self-esteem necessary to support their healthy growth and development and to achieve the positive outcomes sought by those working in the child welfare system. Addressing these negative views and curtailing their impact on the care given to LGBTQ young people must be a priority.

What Are the Needs of LGBTQ Youth in Care?

Child Welfare Systems that Acknowledge Their Existence

There is an institutional desire that LGBTQ youth remain invisible and silent. That way the system can go on ignoring them.

—Adult participant, Jacksonville

Given the pressure for LGBTQ young people to remain invisible and the lack of attention given to this population, few analyses of their prevalence in the child welfare system exist. But there certainly is strong evidence that LGBTQ youth are in the system, and in disproportionate numbers (see, for example, studies cited in Chapter 3). Participants at every Listening Forum were asked to give estimates, based on their experiences, of the percentages of teenagers in foster care who are LGBTQ. The responses were consistently in the range of 20 to 60%. This is not surprising, unfortunately, given the alarming rates of violence and rejection faced by LGBTQ youth from their families of origin because of conflicts over their sexual orientation or gender identity. One of the first steps child welfare systems must take is to acknowledge the LGBTQ youth in their midst and to focus attention on their needs for respect, safety, and services.

Acknowledgement that Anti-LGBTQ Attitudes and Beliefs Have No Place in Child Welfare Practice

Prospective caseworkers and foster and adoptive parents should be screened for anti-LGBTQ bias.

—Adult participant, Minneapolis

Crucial to remedying neglect and abuse of LGBTQ youth in foster care is recognizing that anti-LGBTQ attitudes may play *no* role in child welfare practice. For example, an individual caseworker may hold strong negative religious beliefs or other personal biases against LGBTQ youth, but under no circumstances should those private views be permitted to interfere with that caseworker’s responsibility to provide professional, respectful care to all young people, including those who are or may be perceived to be LGBTQ. The National Association of Social Workers, for example, has made clear that “homophobic or heterosexist views...reduce the effectiveness of support, services and treatment social workers offer to gay and lesbian clients” (1996).

LGBTQ youth in care should not be made to feel by the very professionals who are supposed to help them that they are entitled to anything less than full respect and support. Any child welfare staff whose personal beliefs do not allow them to adhere to sensitive and professional standards of care should not be allowed contact with any youth who could be LGBTQ.

Freedom from Anti-LGBTQ Harassment

It wasn’t just the other kids at my group home who were calling me “faggot.” It was the staff too. I had nowhere to turn for help.

—Youth participant

The prejudice LGBTQ youth face often takes its psychological toll, affecting their core sense of self by forcing them to deny and repress their identities. A number of studies show that stigma and prejudice based on sexual orientation place gay, lesbian, and bisexual people at a higher risk for stress-related mental illness than heterosexual people (Meyer, 2003; Proctor & Groze, 1994; Savin-Williams, 1994). LGBTQ youth need to feel that they are not condemned and stigmatized for something they cannot change and that is an important part of them—their sexual orientation or gender identity. They need to be cared for in an environment that shields them from, not exposes them to, bias and prejudice. They need to be free from anti-LGBTQ slurs and harassments. They need to feel loved, not hated, for who they are. They need to know that the child welfare system and adults who care for them are on their side.

Informed Adults Who Relate to LGBTQ Youth Based on Facts, not Myths

I got a call from a teenage boy on my caseload. He had told his foster parents he thought he was gay. They wanted him to go to a pastor who would make him “straight.”

—Adult participant, New York City

LGBTQ youth should be cared for by adults who are well informed about LGBTQ issues and who do not operate on the basis of bias and misconceptions. For example, LGBTQ young people often find themselves the victims of misguided efforts to change their sexual orientation or gender identity. Such “conversion” efforts or “reparative therapies” are extremely harmful psychologically, causing low self-esteem with no effect on what is essentially an immutable characteristic. For this reason, such efforts have been condemned as unethical by a number of mainstream psychological, medical, and child welfare organizations such as the American Psychological Association (DeLeon, 1998), The American Psychiatric Association (1980, 1999, 2002, 2004; and the American Psychiatric Association Committee on Gay, Lesbian, and Bisexual Issues, 1993), the American Academy of Pediatrics (1993; Frankowski & American Academy of Pediatrics Committee on Adolescence, 2004; Perrin and American Academy of Pediatrics Committee on Psychosocial Aspects of Child and Family Health, 2002), and the National Association of Social Workers (1997). LGBTQ young people may also be the victims of the damaging and unfounded myth that gay and lesbian people are sexual predators (Jenny, Roesler, & Poyer, 1994; Stevenson, 2000). Those caring for LGBTQ young people need to apply professional standards and information, not stereotypes, in their work.

Child Welfare Professionals Who Are Sensitive and Welcoming

My old caseworker changed the subject the one time I tried to let on I was a lesbian. After that he treated me differently, too—like there was a cold wind blowing in the room. Then I got transferred to my new caseworker. The minute I walked in to her office I knew things were going to be better. She had this poster about gay people over her desk and some rainbow beads hanging on her lamp. It was okay to tell her who I am.

—Youth participant

I had only one lady to talk to, but the rest of them weren't even trying to help me out.

—Youth participant

Like the systems in which they operate, child welfare professionals all too often refuse to acknowledge that they may have LGBTQ youth on their case-loads. Whether knowingly or not, they send powerful signals to the LGBTQ young people who are—invariably—in their midst that these youth will not be treated with acceptance or understanding and may not be safe to be “out” about their sexual orientation or gender identity. In his book, *We Don't Exactly Get the Welcome Wagon: The Experiences of Gay and Lesbian Adolescents in the Child Welfare* (1998), Dr. Gerald P. Mallon recounts how one staff member at a New York City social services agency told him, “We don't have any residents who are gay or lesbian. We have over a hundred adolescents in our programs and I know all of them and none of them are gay or lesbian!” (Mallon, 1998, p. 7).

These signals may be sent in countless ways. For example, a child welfare intake worker may ask a lesbian teenager whom he is interviewing if the girl has a boyfriend. By not considering the possibility that the girl may have not a boyfriend but a girlfriend, he has sent a message, however unwittingly, that he is comfortable discussing the child's personal relationships only if those relationships are heterosexual. The young person will be less likely to share any feelings or struggles she might be experiencing with regard to her sexuality. And the intake worker will not have sufficient information about the youth's background and characteristics upon which to make the best, or even an adequate, match with a supportive foster family or programs. For LGBTQ young people, the implications of these kinds of scenes, played out over and over around the country, are clear: that the adults charged with their care would be happier if they were heterosexual and gender-conforming. And thus the rift between adults and LGBTQ youth begins, creating barriers to open and honest communication and undermining youths' self-esteem.

LGBTQ young people need adults who are comfortable acknowledging their existence and sensitive to the cultural beliefs and biases that stand in the way of open and candid interactions.

Respect and Support

I live at an independent living program, and the staff will say things like, “Do you like boys now?” And I’ll say, “No, what are you talking about?” That’s the kind of thing that really bothers me.

—Youth participant

I told everyone that I am a lesbian, and I’m sorry if you have a problem with it. I lost a lot of friends, and the staff was really conscious of me. I was isolated a lot, in many different ways. I would ask to do things, and even if I was being respectful, or if I was doing what I was supposed to, I’d still get a “no.”

—Youth participant

LGBTQ youth in care need what other youth need. They need to feel respected by the adults who work with them. They need to feel as though they are understood by these adults and can communicate with them. They need to know they matter. They need to believe they can rely on the adults who have been charged with tending to their daily lives. They need to know they belong and not made to feel isolated and alone.

When LGBTQ youth are made to feel isolated, as is the case with any youth who is kept apart from friends or other potentially supportive allies, they detach from the very system that has been designed to support them. They do not actively participate in therapy or other forms of supportive services. This can create great tension between service providers who believe they are offering a youth every chance to succeed while in care, and a young person who feels as though it is the system itself that has contributed to their sense of isolation and loneliness.

Next Steps for Child Welfare Policymakers

Combating homophobia and the heterosexist assumptions that pervade the child welfare system should be the number-one priority to improve care.

—Adult participant, Augusta

Acknowledge the Issue

Child welfare policymakers should, first and foremost, acknowledge the existence of LGBTQ youth within their systems and their responsibility to address the needs of these young people.

Become Informed and Aware of Personal Biases

Policymakers should review the social science literature on homosexuality and gender identity, such as the American Psychological Association's *Guidelines for Psychotherapy with Lesbian, Gay and Bisexual People* (2000), and CWLA's *Standards of Excellence for Child Welfare Service for Adoption Services*² (2000), and *Transitional, Independent Living, and Self-Sufficiency Services* (2004) to ensure that they are setting policy on the basis of facts, not myths and prejudices. They should examine their own beliefs and assumptions to ensure that they are not carrying personal biases against LGBTQ people into their professional lives.

Adopt Policies and Protocols to Ensure that LGBTQ Youth Receive Bias-Free Care from Child Welfare Professionals

Child welfare policymakers should establish a professional milieu in which anti-LGBTQ bias and practices are not tolerated. They should develop and disseminate written policies and protocols that outline expectations for the positive support required for LGBTQ youth. These policies and protocols should include clearly articulated consequences for staff should they exhibit anti-LGBTQ attitudes and practices on the job. Similar protocols and consequences should be outlined and enforced for residents of child welfare programs as well.

Adopt Policies and Protocols to Ensure that LGBTQ Youth Receive Bias-Free Care in Foster Family Settings

Policymakers should require screening of foster families to ensure that youth are not placed in homes where foster parents are unequipped to care for them without bias. Policymakers should also develop and disseminate policies that require foster parents to commit to acting without bias or prejudice so long as LGBTQ

² For more information and to purchase CWLA's *Standards of Excellence*, visit <http://www.cwla.org/programs/standards>

youth are in their care. Since a young person may not come out or reach the age when they first identify as LGBTQ until after they have been placed in a foster home, it is imperative that all foster parents, including those with strong negative views about homosexuality, be subject to clear expectations requiring them not to impose their personal beliefs in harmful ways on a young LGBTQ person in their care. Policymakers should establish policies and protocols to allow for changes in placements to move LGBTQ youth from homes that are less than fully supportive.

Mandate Training and Competency on LGBTQ Issues for Child Welfare Staff and Foster Parents

Throughout each of the Forums, the overwhelming need for training on LGBTQ issues was seen as crucial to developing more competent systems of care for LGBTQ youth.

Policymakers should mandate comprehensive staff training on adolescent sexuality, and, specifically, on LGBTQ issues. They should also make competency on LGBTQ issues a required professional qualification for staff. Competence on these issues should be added to staff performance evaluation mechanisms. Policymakers should likewise require all foster parents to have basic training on LGBTQ issues.

Create Welcoming Environments for LGBTQ Youth

Child welfare policymakers should establish a milieu in which LGBTQ youth are made to feel welcome and supported. For example, policymakers should distribute and encourage posting of LGBTQ symbols such as pink triangles,³ rainbow flags,⁴ “LGBT Safe Zone” stickers, and posters in areas of their organizations where all youth might see them.⁵

Advocate Against Bias

Policymakers should be willing to take public stands against anti-LGBTQ attitudes in their communities. They should combat anti-LGBTQ measures by their governments that will negatively impact the youth in their care. In this way, child welfare

3 Pink triangles became a symbol of gay pride following World War II, during which gay men, considered deviants by the Nazis, were forced to wear them in concentration camps so that they could be identified as such.

4 The rainbow is an international symbol of LGBTQ pride.

5 Contact Lambda (www.lambdalegal.org) or the Gay, Lesbian, Straight Education Network (GLSEN) (www.glsen.org) for such materials.

agencies, as respected members of the communities whose children they serve, can set examples that mirror their overall approach to the caring support of all children.

Next Steps for Child Welfare Practitioners

Gain Competency to Work with LGBTQ Youth

Child welfare practitioners should review research materials and obtain training on working with LGBTQ youth. They should examine their own beliefs and assumptions to ensure that they are not carrying personal bias against LGBTQ people into their professional conduct.

Be Sensitive and Welcoming to LGBTQ Youth

Child welfare practitioners should be aware that they may well have LGBTQ youth on their caseloads. They should adjust their approaches to working with all youth accordingly. Practitioners should be sensitive to the cues a young person might be sending about their sexual orientation or gender identity and should make the young person feel safe to be open.

They should display supportive LGBTQ images such as pink triangles, rainbow flags, “LGBT Safe Zone” stickers, and posters in their offices, or if they meet with youth offsite, affix symbols where they can be seen, for example, on their appointment books or briefcases. These images send a clear signal to a youth that the child welfare professional is open to discussing issues of sexuality and will respond with competence and respect if the youth discloses that he or she is LGBTQ.

Child welfare practitioners should learn the skills necessary to engage LGBTQ youth in open, honest, and nonjudgmental discussion about their sexuality. The more child welfare professionals have the trust of and know about the youth they serve, the better equipped they are to address the young person’s needs.

Ensure that Youth Are Not Subjected to Anti-LGBTQ Bias

Child welfare practitioners should not tolerate anti-LGBTQ bias and practices by professional peers or by other youth. They should address the use of anti-LGBTQ language whether or not they currently serve LGBTQ youth. Many LGBTQ youth in care understandably feel a strong need to hide their sexual orientation or gender identity to protect their safety, so many have never made these aspects

of their identities known to staff. Therefore, it is imperative that staff model sensitivity on LGBTQ issues and respectful behavior at all times.

Child welfare practitioners should also screen and monitor placements and attendant schools to ensure that LGBTQ youth are not being sent into settings where they are likely to face bias and discrimination.

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CHAPTER 2

SAFE AND SUPPORTIVE PLACEMENTS



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I was put in a room by myself because I'm gay. I wasn't allowed to be around anyone else.

—Youth participant

I got jumped by a bunch of guys in my group home, and when I told the Director, he said, "Well, if you weren't a faggot, they wouldn't beat you up."


—Youth participant

I knew of a lesbian couple in my hometown who were foster parents. I was too scared to ask my caseworker to introduce me to them, so instead, I dropped lots of hints and signals, but she never picked up on any of them.

—Youth participant

LGBTQ youth need acceptance from their caregivers and to be safe in their placements.

—Adult participant, Sacramento



GBTQ young people are too often subjected to the dual indignities of suffering violence at the hands of their family members, and then, in their child welfare placements, being subjected to further humiliation and mistreatment from the adults charged with their care and protection. Nearly half of the youth in out-of-home care who were interviewed in the Family Acceptance Project, a comprehensive study of LGBT adolescents and their families, were removed from their homes, ran away, or were thrown out of their homes because of their LGBT identities (Ryan & Diaz, 2005). A 2001 study by the Urban Justice Center, a nonprofit organization

providing legal representation and advocacy to poor and homeless people in New York City, found that once placed in a foster care setting, as many as 78% of youth are removed or run away due to anti-LGBT violence and harassment. Fifty-six percent of LGBTQ youth interviewed in the study had spent time living on the streets because they felt safer there than they did living in their group or foster homes (Feinstein, Greenblatt, Hass, Kohn, & Rana, 2001, p. 16). A youth who contributed to the publication *In the System and In the Life* said of his experiences, “I had at least two fights a day. The boys used to do stupid things like throw rocks at me or put bleach in my food because I was gay. Once I was thrown down a flight of stairs, and I’ve had my nose broken twice. They even ripped up the only picture of my mother that I had” (Desetta, 2003, p. 46–47). Another youth quoted in the same publication said, “I left in the morning for school. When I came back to go to my room, somebody had spray painted the word ‘faggot’ on the door. The staff didn’t do nothing much but laugh when I told them” (Desetta, 2003, p. 50).

Some caregivers do not know how to intervene effectively when an LGBTQ foster child is harassed; others actively participate in the mistreatment. First and foremost, LGBTQ youth in care need to feel physically and emotionally safe. No child should ever be forced to remain in a placement where they are humiliated, harassed, and abused.

What Are the Needs of LGBTQ Youth in Their Placements?

Affirming Foster Family Placements

My foster family took away my clothes, called me a “dyke,” and tried to remake me.

—Youth participant

A few of my foster families treated me like a human being; the rest treated me really badly.

—Youth participant

When I was in foster care all my foster mom would do was taunt me.

—Youth participant

It's all about having an open mind. LGBTQ foster youth want foster parents who will support them and treat them like they belong. They're normal. Just because they label themselves as something else doesn't mean anything. They just want somebody to accept that, "I am Mary. This is me. This is how I am."

—Youth participant

Many young people are in care specifically because they are LGBTQ and may not trust a foster family placement.

—Youth participant

The goal of foster family care is to provide a safe, loving, and family-like environment until the family of origin is rehabilitated and reunified, or until another form of permanency is achieved. As with all young people in care, LGBTQ youth need families who will love and care for them and offer the guidance and support they need to grow into productive and healthy adults. Under most circumstances, it is best for foster youth to be placed with a foster family rather than in a congregate care facility. Family foster care is better suited than group home care to teach young people about family relationships and to provide ongoing support even after the young person leaves the system.

For some LGBTQ youth, the primary barrier to placement with a foster family, even an accepting and loving family, is their own history of rejection, abuse, and trauma previously experienced in their family of origin. Unfortunately, LGBTQ youth often find the same rejection, harassment, and abuse from members of their foster families that they experienced within their families of origin. As a result, many of these youth do not want to return to a family setting under any circumstances.

LGBTQ youth need foster families willing to care for and support them. The families, in turn, need assistance from the placement agency to develop the skills to understand and address the issues LGBTQ youth face. They need to understand the distinctions between sexual orientation and gender identity and to help LGBTQ young people safely navigate the developmental process of coming to terms with an LGBTQ identity. Efforts to force or convince these young people to become heterosexual or gender-typical only impair their healthy development. Indeed, it is a violation of the ethical standards of every reputable professional

child welfare, social work, and psychological association to use therapeutic strategies to change the sexual orientation or gender identity of any person (see Chapter 1). Foster parents need training and guidance so that young people are not subjected to such efforts.

Foster families of LGBTQ youth should never compound the rejection these young people may have experienced within their families of origin by exhibiting the same rejecting behaviors.

There are over 500,000 children in America's foster care system and far from enough families to care for them. States do not do enough to recruit families for foster youth, as evidenced by the Child and Family Service Reviews (CFSR), the federal audit of state child welfare performance. LGBTQ youth face added obstacles in finding safe, supportive placements. Congregate care facilities, while appropriate for some youth with high degrees of special needs, can rarely replace the experience of living with a loving family in a home setting. More needs to be done to recruit, train, and support families to care for LGBTQ young people.

I've met a lot of straight people who want to help. Just because they don't know anything doesn't mean they don't want to learn. And some of them know a lot more than some LGBTQ people.

—Youth participant

Having struggled with personal identity issues themselves, lesbian and gay foster parents may offer sensitivity to young people dealing with all sorts of issues, including being LGBTQ, being in foster care, and being marginalized in society. Many lesbian and gay foster parents have dealt with loss and difficult family issues and can therefore be empathetic to foster youth.

—Adult participant, New York City

Just because someone's not queer doesn't mean that you can't match them with someone who is. Placement matching should emphasize pairing queer youth with people who are open minded and accepting, whether they identify as LGBTQ or not.

—Youth participant

LGBTQ youth do not necessarily need to be placed with LGBTQ families in order to be safe and accepted.

—Adult participant, Sacramento

LGBTQ youth need positive and affirming foster parents, regardless of the foster parents' sexual orientation.

—Adult participant, Denver

It is important to avoid the assumption that LGBTQ youth only want gay and lesbian foster parents and vice versa.

—Adult participant, New York City

Whether an LGBTQ foster youth prefers to live with an LGBT family, or whether the sexual orientation and gender identity of the parents do not matter, the essential need is the same. All young people need families who will accept, support, and love them for who they are. While LGBT adults may be especially equipped to foster LGBTQ youth, these young people deserve caring and affirming foster parents whether LGBT or not.

Safe and Supportive Group Homes

When I was in a group home, I was assaulted because I'm gay. I didn't appreciate that I had to take it. The staff knew what was going on but they didn't try to stop it.

—Youth participant

You get jumped and the staff don't do anything, so you start carrying a knife to protect yourself. Then you get in trouble for carrying a weapon.

—Youth participant

There is a need for safety, especially in group homes where the staff can be unfriendly. Rape and other forms of abuse are even tolerated.

—Youth participant

LGBTQ youth whose families of origin have rejected them and who do not feel safe in their placements often experience isolation and a compounding of the original familial rejection. They feel as though there is no one to support and protect them. This can create tremendous tension and conflict between the youth and group home staff. Some staff members may not possess the skills necessary to detect the feelings of isolation that underlie a young person's behaviors. Others may deliberately make LGBTQ youth feel unsafe through negative language or silent complicity with abuse from others. Name-calling, including use of slurs like "faggot" and "dyke," too often is not addressed within child welfare settings. Physical abuse, even at the hands of staff members themselves, is a common experience for LGBTQ youth in many congregate care settings.

Appropriate room assignments within group homes:

I was placed in a co-ed group home. When I was shown to my room, I asked why I was being put on the boys' floor. They said, "You're not a boy? Well, we can't put you on the girls' floor looking like that." So they made me sleep on a couch on a landing in between the two floors.

—Youth participant

Segregation and isolation of LGBTQ young people from one another within residential facilities is based upon a mistaken belief that there will always be sexual behavior between LGBTQ young people, even in nonromantic relationships.

—Adult participant, Hartford

A common approach by group home staff after a young person acknowledges his or her sexual orientation or gender identity is to place the child in a room by him or herself. This is sometimes done under the auspices of protecting the child's safety, yet doing so may further compound the sense of isolation the young person feels.

Respect for normal development in LGBTQ youth:

When LGBTQ young people express normal, age-appropriate behaviors such as handholding and kissing, they need to be supported in adhering to the same rules

that non-LGBTQ youth are required to follow in congregate care and other settings. Heterosexual dating is generally viewed as a healthy part of adolescent development. Although dating and expressing physical affection are not typically condoned among youth living in the same congregate care program, non-LGBTQ youth are encouraged to date others outside the program and receive guidance from program staff as to the kinds of behaviors that are age-appropriate. In contrast, LGBTQ youth are rarely encouraged to date other youth outside their program, and the same romantic behaviors considered appropriate for heterosexual teenagers are often viewed as inappropriate when engaged in by two members of the same sex. This double standard further erodes the sense of validation, worth, and safety LGBTQ youth feel from the adults charged with their care.

Specialized group homes for LGBTQ youth:

Once I got to [the LGBTQ group home], I started to get better. I was really nervous when I first arrived, but I saw that everyone was just like me. I felt safe to be in a place where I could be myself without getting harassed. I've been there for about six or seven months, and I've made so many improvements.

—Youth participant

When I came to [the LGBTQ group home], I had just gotten out of rehab. I made a lot of progress in rehab, but I could have made even more if it had been a more supportive environment. I didn't know that there were programs like this specifically for LGBTQ people. It's a very satisfying feeling to wake up every day and look around knowing that I'm in a supportive environment and staying clean.

—Youth participant

The child welfare system needs to overcome the companion assumptions that LGBTQ youth belong in specialized programs and placements, and that because specialized

placements and services exist, no more is needed to make the rest of the system safer and more supportive.

—Adult participant, New York City

Specialized programs are able to offer the types of safety and security that all LGBTQ youth should be offered in each of their placements, whether or not they have been specially designed for them.

—Adult Participant, Sacramento

In recent years an increasing number of group homes, shelters, and independent-living programs have opened around the country specifically to address the needs of LGBTQ youth. Gay and Lesbian Adolescent Social Services (GLASS) opened the nation's first LGBTQ youth group home in Los Angeles in 1984. A few years later, the New York City branch of Green Chimneys Children's Services opened its first group home for gay, bisexual, and transgender youth (Gramercy Residence). Over the years, both GLASS and Green Chimneys have expanded their residential services for LGBTQ youth, and new LGBTQ youth group homes, independent living programs, and shelters have opened in Boston, San Francisco, Detroit, Atlanta, and Philadelphia. These programs do an excellent job of providing safe and secure living environments where LGBTQ young people can be open about who they are and find affirming support from adults. They are places where visible signs of pride and acceptance are proudly displayed, such as pink triangles, rainbow flags, and "LGBT Safe Zone" posters.

Although they serve an important function, specialized programs cannot be seen as a long-term solution to the challenge of ensuring the safety of all LGBTQ youth in care. Instead, all congregate care facilities should be made safe for all youth, including those who are LGBTQ. There are approximately 10,000 licensed congregate care programs in this country housing tens of thousands of foster youth. The existence of a handful of programs that have been especially designed to address the needs of LGBTQ youth does not absolve the entire child welfare system from meeting its responsibility to ensure the safety, permanency, and well-being of all youth in care. Moreover, a primary goal of the child welfare system is to place children in the least restrictive, most family-like setting possible, which even the best group homes fail to achieve.

Safety in Communities

The system needs to do more to ensure that placements are not in neighborhoods or communities that are known to be hostile to LGBTQ people.

—Adult participant, San Diego

When I was 15, I was walking down the street with my best friend and a group of guys came up to us and asked my friend if he was gay. He said yes, and they killed him right in front of me.

—Youth participant

LGBTQ youth need safe spaces to hang out during the day. Public parks often feel safe, but they're not really safe. There's just nowhere else to go.

—Adult participant, Jacksonville

For LGBTQ youth, there is often a lack of stability in placements because they move from one home, community, and school to another. It's hard to feel safe and attached if no one has reached out to you and you think you might be leaving soon.

—Adult participant, Augusta

The need for safety extends beyond the boundaries of individual placements. LGBTQ young people also have the right to be kept safe within their communities, schools, and neighborhoods. Although some placements may take steps to create a safe and welcoming environment for LGBTQ youth, they may be located in neighborhoods in which LGBTQ people are not safe. LGBTQ young people should be assured that their caregivers and case managers will do all they can to protect them and advocate on their behalf if they encounter harassment or abuse, whether in the placement or out in the community.

Furthermore, it is not uncommon for young people in care to experience frequent changes in placement on the road toward permanency. For LGBTQ youth, this may create barriers to their continued safety because each placement

change brings with it a change in access to resources, relationships, and supports they need to feel safe.

Safety in Juvenile Detention Facilities

LGBTQ young people in foster care who engage in age-appropriate sexual experimentation are often unfairly labeled as sexual predators and transferred to the juvenile justice system.

—Adult participant, Salt Lake City

LGBTQ youth are often accused of sexual assault when engaging in age-appropriate sexual activity.

—Adult participant, Ft. Lauderdale

There was consensus among Forum participants that the juvenile justice system needs to take much better care of LGBTQ youth, and that juvenile detention should never be used under any circumstance to provide a safe placement for an LGBTQ youth who has not been adjudicated a delinquent.

Adults who work in child welfare and juvenile justice need to have a greater understanding of normal, healthy adolescent sexual development, and to be able to distinguish between sexual behavior that is age-appropriate and that which is truly aggressive or predatory. Often, sexual behavior by LGBTQ youth in care that would be considered acceptable if engaged in by heterosexual young people is considered aggressive, predatory, and inappropriate by caregivers and may lead to serious consequences, including a referral to and interaction with the juvenile justice system.

Many child welfare and juvenile justice professionals do not understand or appreciate the distinction between sexual orientation and sexual behavior. While youth who identify as heterosexual are thought to be sexually active only if they are actually engaging in sexual activity, gay or lesbian youth are thought to be sexually active even if they are not. LGBTQ youth need adult caregivers who understand and appreciate that they are not wholly defined by their sexual orientation or gender identity any more than are heterosexual and gender-typical youth.

Organizations such as the American Bar Association's Opening Doors Project; Legal Services for Children, the National Center for Lesbian Rights, and the National Juvenile Defender Center's Equity Project; and the Correctional

Association of New York’s Juvenile Justice Coalition are bringing to light the experiences of LGBTQ youth involved with the juvenile justice system. A growing body of evidence illustrates the experiences of these young people. According to the Correctional Association of New York’s Fall 2005 *Bulletin*:

In jail, LGBT young people regularly face verbal and physical harassment—not only from their peers, but from facility staff as well. And there is usually little they can do about it (p.1).

In the words of one youth:

“[The] harassment continues. I complain but they don’t take it serious. I’m afraid it might get out of hand. Boys are trying to touch me and stuff, but staff does nothing. I feel like I live in hell. This evening was filled with violence... I fear for my safety” (p. 1).

Next Steps for Child Welfare Policymakers

Adopt Policies and Protocols that Ensure the Safety of LGBTQ Youth

Child welfare policymakers should acknowledge that more must be done to ensure the safety of LGBTQ youth within their placements, schools, and communities. Child welfare policymakers should review published studies that document the unsafe living conditions for LGBTQ youth in care. They should affirm that all young people in the child welfare and juvenile justice systems are legally entitled to be kept safe in their placements, and acknowledge that there are direct links between the lack of safety in care and the risk of homelessness. They should support the posting of LGBTQ symbols of pride, including pink triangles, rainbow flags, and “LGBT Safe Zone” stickers and posters, in congregate care facilities.

Develop and Enforce Nondiscrimination Policies

Child welfare policymakers should establish a professional milieu in which anti-LGBTQ attitudes and practices are not tolerated. They should develop explicit written policies and protocols that outline their expectations with regard to positive support for LGBTQ young people, and these policies and

protocols should include clearly articulated consequences for staff should they exhibit anti-LGBTQ attitudes and practices on the job. Child welfare policy-makers should make LGBTQ competence an expectation for the satisfactory attainment of professional goals and add this topic to all staff performance evaluation mechanisms. They should also prohibit the practice of so-called “conversion” therapies that seek to alter a person’s sexual orientation or gender identity and take administrative action against any staff member who advocates for or engages in this unethical and damaging practice, whether directly or indirectly.

It is the responsibility of the program administrators to intervene when staff or residents use anti-LGBTQ slurs. There must be a clear and unambiguous message that such behavior will not be tolerated and that there are consequences for it. It is also the responsibility of each staff member to report such behaviors to supervisors. Protocols and consequences should be outlined for residents of child welfare programs as well as for staff to ensure that anti-LGBTQ harassment is clearly prohibited and effectively addressed.

Child welfare policymakers should develop policies that specifically address the provision of supportive care to LGBTQ youth by their foster parents. These policies should explicitly prohibit foster parents from engaging in discriminatory or abusive conduct towards LGBTQ youth in their care.

Mandate Comprehensive Training on LGBTQ Youth Developmental Issues for Child Welfare Staff and Foster Families

Training is needed for all child welfare staff, especially in group homes where the staff can be more homophobic than the residents.

—Adult participant, Tucson

Safety is the result of greater competence, training, sensitivity, and understanding on the part of the adults working in the system.

—Adult participant, Philadelphia

Training is critical for everyone involved with the juvenile justice system, including probation officers and judges.

—Adult participant, Philadelphia

Child welfare policymakers should support comprehensive training on LGBTQ issues for all staff and foster families. LGBTQ youth in care need the support of caring adults who understand and can address their developmental needs. Child welfare policymakers should make themselves aware of existing training models on LGBTQ issues and make them available to all staff and caregivers.

Designate a Safe Haven

As a short-term measure before all child welfare placements are made safe for LGBTQ youth, designate a specific group home or placement as a “safe haven” for LGBTQ young people. Provide training on sexual orientation and gender identity to the staff, post LGBTQ symbols and posters, and widely announce the existence of the safe haven throughout the state. The safe haven should be located within a safe neighborhood and connected to a school known to be supportive of LGBTQ students.

Next Steps for Child Welfare Practitioners

Adopt Practices that Ensure the Safety of LGBTQ Youth

Child welfare practitioners should affirm that all youth in care are legally entitled to a safe living environment, and that harassment, humiliation, and abuse of any child is not acceptable. Child welfare practitioners should review recent studies that address unsafe living conditions for LGBTQ youth in care. Practitioners should affirm that all youth should feel safe in their living environments and acknowledge that there are direct links between the lack of safety often afforded LGBTQ youth in care and the rates at which they become homeless.

Adopt Practices that Create a Supportive Environment for LGBTQ Youth

Child welfare practitioners should place LGBTQ young people in placements where they will be safe and affirmed. They should help locate and create such

affirming living environments. They should display supportive LGBTQ images such as pink triangles, rainbow flags, and “LGBT Safe Zone” stickers and posters to send the clear signal to youth that the practitioner is open to discussing issues of sexuality and gender.

Child welfare practitioners should examine their own biases and be willing to reflect on how their attitudes and behaviors may contribute to creating an unsafe living environment for LGBTQ youth. They should never use anti-LGBTQ language or slurs and should intervene immediately when an LGBTQ youth is harassed or abused. They should take immediate consequential steps and send a clear message that anti-LGBTQ harassment will never be tolerated and will result in negative consequences for the offender. Child welfare practitioners should not allow LGBTQ youth to be referred for harmful “conversion” therapies that seek to alter a person’s sexual orientation or gender identity.

Gain Competency to Work with LGBTQ Youth

LGBTQ youth need the support of adults who have been adequately trained on sexual orientation and gender identity issues. Child welfare practitioners should learn the skills necessary to engage LGBTQ youth in open and honest discussion about their sexuality. The more child welfare practitioners know about the youth they serve, the better equipped they are to attend to the youths’ needs and to match them with the most appropriate placements available. Practitioners should avail themselves of existing information on adolescent sexual development and develop the capacity to understand the distinction between sexual orientation and sexual behavior. Practitioners should also examine their own biases with regard to sexual behaviors between LGBTQ and non-LGBTQ youth, and address these behaviors in a uniform way.

Recruit, Train, and Support Foster Families for LGBTQ Youth

Child welfare practitioners should actively recruit foster families who will care for LGBTQ youth. They should be willing and able to provide foster parents with the training and ongoing supports they need, including information about existing community services and resources. Practitioners should work with their local LGBT community centers and organizations to develop comprehensive outreach and recruitment strategies. All foster parents should be provided with information regarding adolescent sexuality and gender identity development and the

resources to provide ongoing support. Child welfare practitioners should denounce attempts by foster parents to change a young person's sexual orientation or gender identity. They should engage in discussions of LGBTQ issues with prospective foster parents in order to gauge their views on sexual orientation and gender identity. If a family displays a lack of willingness to support LGBTQ people, an LGBTQ youth should not be placed there. Prospective foster families should be assessed according to their ability to provide a stable, loving home for all young people in care, including LGBTQ youth.

Adopt Practices that Ensure the Safety of LGBTQ Youth in Their Communities

Child welfare practitioners should work with community leaders, including school administrators and local law enforcement officials, to create protocols that support every possible effort to keep LGBTQ youth safe and protected from harassment, abuse, and harm throughout the community.

Adopt Practices that Ensure the Safety of LGBTQ Youth in Juvenile Detention Facilities

Practitioners who work in juvenile detention facilities should adopt the same protocols and procedures as child welfare practitioners in ensuring the safety of LGBTQ youth. They should affirm that all youth in their charge are legally entitled to safety and protection from harm and should have the information and skills to serve LGBTQ youth.

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CHAPTER 3

HOMELESS LGBTQ YOUTH



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HOMELESS LGBTQ YOUTH

Right now I'm in a shelter. I don't like it because most people there are very homophobic. I got into a fight just because I'm gay and people don't accept that fact. I've been there for three months. I'm trying to get the heck out.

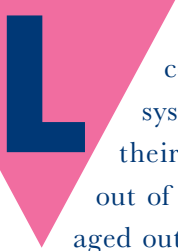
—Youth participant

The child welfare system needs a better understanding of what LGBTQ homeless youth experience on the streets and why they are there in the first place — like fleeing abusive homes and not feeling safe in their placements.

—Youth participant

More than 50% of the LGBTQ young people in the system have been homeless or runaway at some point.

—Adult participant, New York City



LGBTQ youth become homeless at rates that should be of great concern to anyone working in the child welfare and shelter care systems. Many are forced to leave their families or placements after their physical and emotional safety is jeopardized. Others are thrown out of their homes with nowhere to go but the streets. Still others have aged out of the foster care system unprepared to support themselves and without a permanent place to live. According to a June 2004 *New York Times* article addressing the issue of homelessness among LGBTQ youth, “There is no official count of those who are homeless and gay in New York, but Carl Siciliano, who runs the city’s largest shelter for gay young adults, puts their numbers in the thousands. Most national studies estimate that as many as half of all homeless youth are lesbian or gay, many of them tossed out by parents who scorn homosexuality for a variety of reasons” (Jacobs, 2004).

Half of the 54 lesbian and gay youth in the child welfare system profiled in the book, *We Don't Exactly Get the Welcome Wagon: The Experiences of Gay and Lesbian Adolescents in Child Welfare Systems* (Mallon, 1998), reported that they had spent periods of time living on the streets in preference to the hostile environment they found in child welfare settings. Some of the youth had been expelled from their homes when their parents discovered their sexual orientation. Others left their homes because family members subjected them to physical violence. One New York child welfare advocate told author Dr. Gerald P. Mallon, "We just keep seeing kids getting beaten up and thrown out of their houses, kids getting beaten up by their fathers for being gay, or young lesbians getting sexually abused by male relatives trying to change them so they won't be gay" (Mallon, 1998, p. 98). In 2003, Walden Family Services in San Diego conducted a needs assessment and found that more than 66% of the 400 local homeless LGBTQ youth interviewed reported at least one previous placement in the child welfare system (Berberet, 2004). The system proved to be so unsafe for these youth that they opted instead for life on the street.

Listening Forum participants were asked to estimate, based on personal experience, the percentage of homeless young people who are LGBTQ. The responses from young people and adults varied from 20% to 60%, with participants noting that the percentage of homeless young people who engage in same-sex sexual behavior at some point may be much higher. A study of inner-city homeless youth aged 11 to 23 found that one-quarter reported that they were lesbian, gay, or bisexual (Busen & Beech, 1998). Sixteen percent of runaways between the ages of 10 and 24 at one medical clinic in Los Angeles identified themselves as lesbian, gay, or bisexual, compared to 8% of nonrunaway youth at the clinic (Yates, MacKenzie, Pennbridge, & Cohen, 1988). And in a study of homeless young men between the ages of 15 and 20 at Covenant House medical clinic in New York City, 25% reported being gay or bisexual (Stricof, Nattell, Weisfuse, & Novick, 1991). One youth services director suggests, "These cities are places where gay youth believe they will find acceptance and nurturing, but instead they tend to experience exploitation and homelessness" (Kruks, 1991, p. 516). Among homeless youth as a whole, however, approximately 75% remain in their original communities, suggesting that "migration" of LGBT youth to the large cities is less significant than is often assumed (Farrow, Deisher, Brown, Kulig, & Kipke, 1992).

Being homeless further imperils an LGBTQ young person's physical and emotional security. According to a 2002 University of Washington study:

Among adolescents in general, GLBT youths are more vulnerable to health and psychological problems than are heterosexual youths. Many are victims of parental abuse, are substance abusers, and have both mental and general physical health problems. These problems may be amplified for GLBT youths who become homeless (Cochran et al, 2002, page 773).

Homelessness is a complex social problem with economic, social, and psychological implications. In some parts of the country, the problem is truly epidemic. In other places, homeless youth may be less visible as they “couch-surf” from home to home, relying on friends and acquaintances for support. Issues related to homeless LGBTQ youth were of paramount importance to the young people who participated in the Listening Forums as well as to the adults who work with them. There was a clear consensus among participants that the child welfare system is not a safe place for LGBTQ youth, and that as a result LGBTQ youth may be more likely to attempt to forge a life on the street rather than seek services and support from the system.

What Are the Needs of Homeless LGBTQ Youth?

Access to Child Welfare Services

Tapping into the child welfare system is often impossible for homeless or runaway youth.

—Adult participant, Augusta

The child welfare system needs to do more outreach so homeless LGBTQ youth do not feel as though they have to hide from the system.

—Adult participant, Tucson

Homeless youth need to know they can seek services and shelter without the threat that they will be detained or sent home.

—Adult participant, Sacramento

Many LGBTQ homeless and runaway youth are on the run from the system because they were not safe in their placements. We need to make the child welfare system safer.

—Adult participant, Fort Lauderdale

Only a small percentage of the LGBTQ young people who become homeless each year end up in the child welfare system. Some seek assistance from the system but are turned away due to a lack of understanding of the serious nature of the family issues they are facing, including the risk of violence, hostility, and outright rejection. Some are even forced to return home to these unsafe environments by social workers and police officers. Many who have spent time in child welfare placements found that they were not safe and fled to the streets instead. The large numbers of homeless LGBTQ youth is in part a reflection that the child welfare system is failing these young people.

Safe Shelters

Homeless LGBTQ youth need safe shelters and housing programs that are welcoming and understanding. Unfortunately, that is not often the case. Instead, LGBTQ homeless youth may find themselves at shelters where physical and verbal attacks are all too common. Transgender homeless youth may be especially unsafe at shelters where beds are assigned according to biological sex and not gender identification (see Chapter 7).

Homeless young people should never be forced to give up their basic safety when availing themselves of a program designed to provide a safe haven. If sleeping on the street is a safer option than seeking support from a shelter or transitional living program, clearly not enough is being done to protect LGBTQ homeless and runaway youth. A more concerted effort is needed to create a system of care with the capacity and will to provide safe, welcoming, and professional support to the members of our society who need it most.

Meeting Basic Life Needs

Homeless LGBTQ youth need basic physical safety and comfort.

—Adult participant, Jacksonville

Homeless LGBTQ youth have basic needs such as food, clothing, a safe place to sleep, education, psychological support, and substance abuse treatment services.

—Adult participant, Bloomington

For anyone attempting to carve out a life on the street, the need for such basic necessities as food, clothing, access to bathing and toilet facilities, and hygiene products takes on great importance. Homeless young people may even take great risks in order to meet their basic needs. They need support from child welfare and shelter care systems to ensure that they have basic necessities like food and clothing.

Access to Community Resources

Service providers need to know what the options are for homeless LGBTQ youth and how to access existing resources and services.

—Adult participant, Philadelphia

The staff people at shelters need to enhance their knowledge of community resources for LGBTQ youth.

—Adult participant, Salt Lake City

Child welfare service providers should assist LGBTQ young people in identifying existing community supportive services so that if they do become homeless they know where to go as an alternative to living and working on the streets.

—Adult participant, New York City

Community resources, such as educational and vocational training, medical and mental health services, and legal services may be difficult for homeless youth to access. Anti-LGBTQ attitudes and behaviors may make tapping into these services even more difficult and uncomfortable for homeless LGBTQ youth.

Among the resources that homeless LGBTQ youth need are competent medical and mental health care. LGBTQ youth who are forced to live on the street may engage in survival behaviors that place them at significantly higher risk for mental health problems, substance abuse, and exposure to sexually transmitted

infections. Many of these youth do not have access to supportive mental and medical health care services or information and other safer sex resources. Furthermore, some of the survival activities in which homeless LGBTQ youth may be involved, such as prostitution, are illegal, causing the youth to interact with the juvenile and criminal justice systems. Therefore, homeless LGBTQ youth also need access to information about their legal rights and support in accessing competent legal services and advocates within the community.

Caring Adults in Their Lives

Homeless LGBTQ young people need adults to trust and provide protection and support.

—Adult participant, Minneapolis

Homeless LGBTQ youth need someone to go to for support.

—Youth participant

Like all young people, homeless LGBTQ youth need the support of adults, whether they are family members, child welfare professionals, or members of the community in which they live. Establishing trust between homeless LGBTQ youth and the adults in their lives might be difficult to accomplish with young people who have been kicked out of their homes for being LGBTQ. For homeless youth wanting to reach out to supportive adults, there may be none to find. More needs to be done to identify and recruit LGBTQ-affirming adults to serve as mentors and caregivers.

Next Steps for Child Welfare and Shelter Care System Policymakers

Adopt Policies and Protocols that Ensure the Safety of LGBTQ Homeless Youth

Child welfare policymakers should take the steps necessary to ensure the safety of LGBTQ youth in all placements so that these young people can safely remain in care and not resort to living on the streets. Moreover, the door through which young people exit the child welfare system has traditionally swung one way. Once a young person leaves the system, it is nearly impossible for them to get back in. Child welfare policymakers should adjust their existing policies to accommodate

the re-entry of youth who become homeless after leaving the system, but who have not yet aged out.

Child welfare and shelter care system policymakers should ensure that all shelters are prepared to keep homeless LGBTQ youth safe. Nondiscrimination policies should be developed that specifically offer protection based on a youth's sexual orientation and gender identity. They should establish a professional milieu in which anti-LGBTQ attitudes and behaviors among staff and residents are not tolerated. For example, policymakers should develop accountability standards that assess child welfare and shelter staff performance in supporting LGBTQ youth.

Develop Safe Shelters for LGBTQ Homeless Youth

This country has a shortage of safe shelters for homeless youth. The demand for beds at shelters far exceeds the supply, and shelters often have long waiting lists to get in. Additional safe shelters should be developed, including facilities specifically designed to house homeless LGBTQ youth who are not safe within existing shelters.

Mandate Training and Competency on LGBTQ Issues for Child Welfare and Shelter Care System Staff

Child welfare and shelter care system policymakers should ensure that all staff and caregivers receive adequate training and education on sexual orientation and gender identity and the underlying reasons why some LGBTQ youth become homeless in the first place. They should develop an understanding of the links between a young person's sense of safety within the child welfare system and the risk of homelessness when their placements prove to be harmful and unsafe. This type of training should be mandatory and provided to everyone.

Policymakers should support the incorporation of components within life skills curricula that address issues of sexual orientation and gender identity. They should encourage a better understanding of the ways in which safety issues impact a young LGBTQ person's ability to develop essential life skills. For example, LGBTQ youth who must be continually concerned for their safety and the levels of respect and support they receive will be less able to concentrate on developing the independent living skills necessary to function in the world as a young adult.

Adopt Policies and Protocols that Foster Community Connections

Enhance the knowledge of existing community resources for LGBTQ youth within shelters and agencies.

—Adult participant, Salt Lake City

Child welfare and shelter care system policymakers should encourage practitioners to develop connections with schools, medical care providers, shelter networks, and other community services so that they can refer LGBTQ youth to the most appropriate supportive services available. They should also develop protocols for conducting outreach to caring adults within the community who may serve as mentors and role models to LGBTQ homeless young people as they transition to adulthood.

Next Steps for Child Welfare and Shelter Care System Practitioners

Adopt Practices that Ensure the Safety of LGBTQ Youth

Child welfare and shelter care system practitioners should ensure that LGBTQ homeless youth are safe within their shelters. Whenever possible, homeless LGBTQ young people should be referred to shelters with nondiscrimination policies that include sexual orientation and gender identity, or to shelters specifically designed for homeless LGBTQ young people. Child welfare and shelter care system practitioners should help create a milieu within all shelters in which anti-LGBTQ attitudes and behaviors among staff and residents are not tolerated.

Gain Competency to Work with LGBTQ Youth

Child welfare and shelter care system practitioners should avail themselves of training and education on sexual orientation and gender identity and the underlying reasons why some LGBTQ youth become homeless in the first place. They should develop an understanding of the links between a young person's sense of safety within the child welfare system and the risk of homelessness when their placements prove to be harmful and unsafe.

Child welfare and shelter care system practitioners should incorporate supports and information within life skills curricula that address issues of sexual

orientation and gender identity. They should develop an understanding of the ways in which safety issues impact a young LGBTQ person's ability to develop essential life skills.

Adopt Practices that Foster Community Connections

Child welfare and shelter care system practitioners should make themselves aware of existing supportive resources and services for homeless LGBTQ youth in their area and be prepared to help these youth access available resources to address their basic living needs. They should be knowledgeable about schools, medical care providers, and mental health care providers that offer services to homeless youth.

Finally, child welfare and shelter care system practitioners should conduct outreach to caring adults within the community to serve as mentors and role models to LGBTQ homeless young people as they transition to adulthood. Whenever possible, the ultimate goal of these relationships should be to foster permanent connections that will help end the youth's homelessness.

Child welfare and shelter care system practitioners should work with homeless LGBTQ youth to locate affordable, safe housing within the community and to develop the independent living skills to maintain it.

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CHAPTER 4

COMMUNITY RESOURCES AND SERVICES



CHAPTER 4

COMMUNITY RESOURCES AND SERVICES

In my high school, when I came out, I didn't know where to go to for help, so I searched online. I found that the school computers had blocked out every website that used the words gay, lesbian, or transgender. I was, however, able to find thousands of websites with detailed instructions on how to commit suicide, and the best way to do it. But I couldn't access even one website with information about where I could go to for help. It's one thing to weed out pornography, and another to weed out life-saving information.

—Youth participant

Child welfare service providers need to be connected with LGBTQ resources and youth-serving organizations in the community.

—Adult participant, New York City

Life in foster care is stressful enough without the added societal pressures faced by LGBTQ youth. It is important that LGBTQ youth receive competent, affirming, and appropriate care from service providers with whom they interact, and that they are able to identify additional sources of support in the community. Participants in the Forums identified many resources available to LGBTQ youth in some cities and regions throughout the country, including youth drop-in and community centers, supportive mental and physical health services, after-school programs, mentoring programs, support groups, family support services, and legal services. Elsewhere, however, few, if any, supportive services exist for LGBTQ youth. There was consensus among Forum participants that many more resources need to be developed for LGBTQ youth so that no matter where they live, they will have access to supportive resources and services (see Chapter 8).

What Are the Needs of LGBTQ Youth in Accessing Community Resources and Services?

Sensitive, Qualified Health Care Professionals

Better coordination is needed between the child welfare system and physical and mental health care providers so that all programs can better identify and serve LGBTQ youth.

—Adult participant, New York City

Most young people in the child welfare system are referred to a variety of professional service providers in the community to address their physical and mental health care needs, including counselors, therapists, doctors, and mentors. The experience of being LGBTQ in and of itself is not an indicator of potential mental or physical health problems. On the other hand, where such concerns exist, foster care systems can be ill-equipped to address them. LGBTQ young people in the child welfare system need access to sensitive and informed health care providers with whom they feel comfortable and affirmed, not judged and misunderstood. If service providers do not meaningfully address an LGBTQ youth’s mental and physical health care needs, problems may manifest in increasingly significant ways over the course of the young person’s adolescence, increasing the chances of a poor outcome upon aging out.

Sexual Health Education and Services

Currently, much of the sexual health education offered to young people in school is geared towards heterosexuals and does not address issues faced by LGBTQ people. In fact, Section 510 of the Social Security Act, created as part of the Personal Responsibility and Work Opportunity Reconciliation Act (1996) (commonly known as the 1996 welfare reform law), expects recipients of federal health education funding to promote an “Abstinence-Only Until Marriage” policy. This policy leaves many LGBTQ young people without any meaningful sexual health education from their schools, and does nothing to stem the growing HIV infection rate among young people.¹ It is the responsibility of the child welfare

¹ According to the June 1, 2001 special issue of the Centers for Disease Control and Prevention’s *Morbidity and Mortality Weekly Report*, both new and overall HIV infection rates among gay men aged 15 to 22 rose dramatically from the mid- to late 1990s.

system to ensure that LGBTQ young people in care receive accurate, nonjudgmental information about safer sex practices and prevention of sexually transmitted diseases (STDs), condoms, and confidential testing for STDs.

Peer Support and Social Groups

Making friends, dating, and developing romantic connections are all a normal part of adolescent development. This is no different for LGBTQ young people who benefit from attending peer support groups and social functions where they are able to meet other LGBTQ young people. Access to safe places to socialize with other LGBTQ young people is often limited, however, and foster parents or group home staff may impose further obstacles. As a result, LGBTQ young people may need assistance to connect with community peer support and social resources.

Affirming Mentors

Some group homes block mentors and other supportive adults from talking to young LGBTQ people.

—Adult participant, Hartford

Adult mentors provide lifetime connections and positive role models for young people. In fact, many young people in the child welfare system are assigned a mentor from the community. LGBTQ young people need access to mentors who will affirm and support them, and help connect them to the larger LGBTQ community.

Community Resource Lists

It is almost impossible for LGBTQ youth to access existing community services if their foster parents or group home staff do not approve.

—Adult participant, Jacksonville

LGBTQ young people in the child welfare system need access to information about existing supportive resources within their communities. Some LGBTQ young people prefer to identify and access community support on their own and confidentially, without relying on their caseworkers or caregivers. In other cases, the caseworkers and caregivers create obstacles preventing an LGBTQ young person from identifying and accessing support within the community. Lists of

supportive community resources, including affirming religious congregations, peer support groups, reading materials, and professional services enable LGBTQ young people to identify and access support on their own if necessary and are important sources of referrals for caseworkers and caregivers.

“Point Person” or Ombudsperson

LGBTQ young people and those who work with them need someone knowledgeable about LGBTQ issues within the system or service area to go to directly for information about community resources, or to address problems when they arise. A designated point person can be a critical link in finding an appropriate placement for an LGBTQ young person.

Next Steps for Child Welfare Policymakers and Practitioners

Identify Appropriate Health Care Professionals

Child welfare policymakers and practitioners should identify and recruit mental and physical health care providers with the skills to provide competent and affirming care for LGBTQ youth. Local LGBT community centers and other organizations serving LGBTQ people are often good sources of information about supportive health care professionals in the community.

Ensure Access to Sexual Health Education

Child welfare policymakers should develop policies that ensure all young people in care have access to accurate, nonjudgmental sexual health education and information. Child welfare practitioners should be prepared to provide access to condoms, information about STDs, and places where confidential STD testing is available in the community.

Find and Help Develop Peer Support and Social Groups

Child welfare policymakers and practitioners should support LGBTQ youth in engaging in appropriate adolescent activities. Where peer support and social groups are available, practitioners should assist LGBTQ young people to access them. Where such resources are not currently available, child welfare policymakers and

practitioners should help develop them. They should support LGBTQ young people to engage in age-appropriate dating at such social events as school proms, and be prepared to advocate for such events to be made safe for LGBTQ youth.

Around the country there are drop-in and community centers that serve LGBTQ young people.² For example, the Attic Youth Center in Philadelphia (www.atticyouthcenter.org) is a comprehensive agency exclusively serving LGBTQ youth with a variety of social and peer support services, including a youth-run community center that serves over 600 young people each month. Rainbow Alley in Denver (www.coloradoglblt.org/rainbow_alley.html), housed within the Colorado Gay, Lesbian, Bisexual, and Transgender Community Center, offers health services, counseling, and referrals to other community resources, and a drop-in center with a variety of youth-led events and activities.

Create Matches Between Mentors and LGBTQ Youth

Child welfare policymakers and practitioners should develop mentoring programs that match LGBTQ youth with safe and supportive adult mentors. All mentors should be provided with mandatory training on sexual orientation and gender identity so that they are prepared to work with LGBTQ youth.

Create and Distribute a List of Community Resources

Child welfare policymakers should support the creation and distribution of LGBTQ community resource lists. Child welfare practitioners should have knowledge of the resources for LGBTQ youth in their community and help young people access them. All young people in the child welfare system should be provided access to the resource list so they can privately access LGBTQ community resources if they prefer to do so on their own.

Appoint an Ombudsperson to Address LGBTQ Issues and Concerns

A statewide LGBTQ point person should be identified, and a network developed of individuals interested in working on LGBTQ issues and sharing resources. State-level leadership

² The National Youth Advocacy Coalition maintains a database of LGBTQ youth services around the country at www.nyacyouth.org.

on LGBTQ issues is needed, as well as more public awareness of the needs of LGBTQ young people.

—Adult participant, Augusta

Identify, train, and support an advocate or “point person” within each agency to act as an informal “go to” person until the entire agency has been trained and is prepared to work with LGBTQ people.

—Adult participant, Philadelphia

Child welfare policymakers should appoint a designated point person or ombudsperson for people to contact with questions or concerns on LGBTQ issues. The point person could be a caseworker, administrator, or person demonstrating leadership on the issues. In those states that already have a statewide ombudsperson to address general foster care concerns, child welfare policymakers should ensure that he or she is prepared and qualified to address LGBTQ-related issues and complaints.

Following the Forum held in Philadelphia, the Department of Human Services created the position of Liaison to the LGBTQ Communities charged with coordinating services and resources for LGBTQ youth in care and the adults who serve them. Cities throughout the country are encouraged to create similar positions.

Build Collaborations Between Child Welfare and LGBTQ Youth-Serving Agencies

In some parts of the country, LGBTQ and non-LGBTQ youth-serving agencies have combined their expertise to develop very successful partnerships to fill gaps in service to this population and to ensure a more comprehensive system of care. For example, the Connecticut Department of Children and Families (DCF) has maintained a successful partnership with a local LGBTQ youth-serving agency, True Colors, Inc. Their partnership, the Safe Harbor Project,³ has resulted in a measurable increase in DCF’s capacity to sensitively address LGBTQ youth issues in both direct services and placements. It has developed,

³ See www.state.ct.us/dcf/SAFE_HARBOR.

for example, the designation of point people dispersed throughout the state child welfare system, a mentoring program for LGBTQ and other youth,⁴ and a comprehensive statewide LGBTQ resource directory.

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⁴ See www.ourtruecolors.org/mentoring/SafeHarborProjectMentoringApplication.doc.

CHAPTER 5

ISSUES FACING LGBTQ YOUTH IN SCHOOLS



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ISSUES FACING LGBTQ YOUTH IN SCHOOLS

I came out in high school. The same boys kept jumping me because of it and the school administration didn't do anything about it.

—Youth participant

When I was in school they asked me to leave. They thought I was too much trouble because everyone wanted to kick my butt. When I was in state custody, they didn't care who kicked my butt.

—Youth participant

LGBTQ youth face harassment and violence from other students and unfair treatment by teachers.

—Adult participant, Denver

Foster parents, caseworkers, and Guardians ad Litem all need to advocate more for LGBTQ youth to be safe in school.

—Adult participant, Ft. Lauderdale

Schools cannot simply ignore LGBTQ issues any more.

—Adult participant, Augusta



While it may not be within the direct purview of the child welfare system to make schools safer for LGBTQ youth, it is the responsibility of child welfare professionals to work to ensure the safety of the youth in their charge in their placements and in their communities. All parents should advocate for the needs of their children at school. Child welfare professionals act *in loco parentis* for foster youth. Therefore, advocating for these children's safety and fair treatment at school becomes their responsibility, as it would be for any parent or guardian of a child. And since

youth in care often change schools with great frequency, it becomes even more important for child welfare professionals to help with those transitions. The problems LGBTQ youth commonly face in schools are compounded for those in foster care by the lack of support they often experience in their placements. It comes as no surprise, therefore, that participants in the Regional Listening Forums identified making schools safer for LGBTQ youth in care as a top priority.

America's public school systems have made much progress regarding the safety and support of LGBTQ students, thanks to efforts by organizations such as the Gay, Lesbian, and Straight Education Network (GLSEN), a national educational advocacy organization; Gay/Straight Alliances (GSAs),¹ afterschool clubs where LGBTQ and non-LGBTQ youth can come together to develop strategies for making their schools safer and more affirming of LGBTQ students; and other supportive resources for LGBTQ youth. GLSEN offers an easy-to-negotiate website full of resources for LGBTQ youth, parents, guardians, and educators. It serves as a clearinghouse for thousands of free and low-cost reports, brochures, and posters. It also lists national and international—and many local—organizations that can provide support and everything from spiritual to legal help as well as books, videos, and curricula for classroom and school library use.

While great progress has been made in many school districts throughout the country, data from several studies indicate that much more needs to be done to ensure the safety and well-being of LGBTQ youth in schools.

In its 2001 report, *Hatred in the Hallways*, Human Rights Watch, an international nongovernmental organization dedicated to protecting the rights of people around the world, documents attacks in the U.S. on the human rights of lesbian, gay, bisexual, and transgender youth, who

are subjected to abuse on a daily basis by their peers and in some cases by teachers and school administrators. These violations are compounded by the failure of federal, state, and local governments to enact laws providing students with express protection from discrimination and violence based on their sexual orientation and gender identity, effectively allowing school officials to ignore violations of these students' rights. Gay youth spend an inordinate amount of energy plotting how to get safely to and from school, how to avoid the hallways when other students are present so they can avoid slurs and shoves, how to cut gym class to escape being beaten up—in short, how to

¹ More information on GSAs can be found on the GLSEN website, www.glsen.org.

become invisible so they will not be verbally and physically attacked. Too often, students have little energy left to learn. [The] vast majority of lesbian, gay, bisexual, and transgender youth trying to escape the hostile hallways of their schools confront school officials who refuse to recognize the serious harm inflicted by the attacks and to provide redress for them. In fact, there is not even a token consensus among public school officials that gay youth deserve to be treated with dignity and respect” (Human Rights Watch, 2001, 2–3).

Thirty-eight states administer the Centers for Disease Control and Prevention (CDC) Youth Risk Behavior Survey (YRBS), a biannual survey administered to students in grades 9 to 12. It provides a random sampling of students in a particular state, with information that can be generalized to the school population at large. Since 1995, Massachusetts has included two questions on its YRBS to identify issues relating to gay, lesbian, and bisexual (GLB) youth. The Massachusetts YRBS demonstrates that:

- GLB students were more than twice as likely to report being in a physical fight at school in the prior year (31.5% of GLB students vs. 12.9% of others).
- GLB students were three times likelier to report having been threatened or injured with a weapon at school in the past year (23.5% of GLB students vs. 7.8% of others).
- GLB students more often reported that they had missed school in the past month because they felt unsafe (19.1% of GLB vs. 5.6% of others) (Goodenow, 2003).

In 2003, GLSEN issued findings from its *National School Climate Survey*, which mirrored those of the Massachusetts YRBS. Key findings of this survey include:

- Harassment continues at unacceptable levels and is too often ignored: 84% of LGBT students report being verbally harassed because of their sexual orientation and gender identity; 82.9% of students report that faculty never or rarely intervene when present.
- Unchecked harassment correlates with poor performance and diminished aspirations: LGBT youth who report significant verbal harassment are twice as likely to report they do not intend to go to college and lower GPAs (2.9 vs. 3.3).

- Supportive teachers can make a difference: 24.1% of LGBT students who cannot identify supportive faculty report they have no intention of going to college. That figure drops to just 10.1% when LGBT students can identify supportive staff at their school.
- Policymakers have an opportunity to improve school climates: LGBT students who did not have (or did not know of) a policy protecting them from violence and harassment were nearly 40% more likely to skip school because they were simply too afraid to go (Kosciw, 2004).

What Are the Needs of LGBTQ Foster Youth in Schools?

Safety in their Schools

I had two security guards follow me around school every day because almost every day I got jumped.

—Youth participant

Some LGBTQ students refuse even to go to school at all and eventually drop out because they do not feel safe there.

—Adult participant, Philadelphia

School administrators often deny or minimize anti-LGBTQ bullying and harassment.

—Adult participant, Bloomington

LGBTQ youth face harassment, violence, and lack of safety in their schools, which leads to poor attendance and academic performance, and an increased risk of suicide.

—Adult participant, Sacramento

Caseworkers need to know which schools are safest for their LGBTQ clients.

—Adult participant, Philadelphia

Foremost among the needs of LGBTQ youth who attend school is the need to be safe in their classrooms, hallways, and other school environments. Participants in the Listening Forums expressed many concerns that are underscored by the Massachusetts YRBS and the reports from the Human Rights Watch and GLSEN. If LGBTQ youth are forced to focus their energies on getting safely through the school day without being harassed or beaten up, they are not able to concentrate on their schoolwork. And when LGBTQ youth in foster care do not find support in their placements, the harassment and violence they experience at school leaves them no place in which they can feel safe. High truancy rates among LGBTQ youth due to the high levels of violence they experience at school often result in poor academic achievement, and therefore poor prospects for their future success. Simply put, if schools are not safe for LGBTQ youth, they will not attend. Therefore, there was consensus among participants of the Listening Forums that much more must be done to ensure the safety of LGBTQ foster youth in their schools to further their chances for future success.

Safety Throughout Educational Systems

Moving constantly and changing schools can be especially stressful for LGBTQ foster youth, who may find it hard to make new friends and trust that a new school will be safe.

—Adult participant, Augusta

There is a need for continuity and stability at school, and whenever possible, avoiding multiple moves.

—Adult participant, Minneapolis

LGBTQ youth in care, like many foster youth, may experience multiple placements within the system. This often means that they move frequently from one school district to another. This situation proves to be untenable for many foster youth, but the issues are compounded for those who are LGBTQ, who must also contend with uncertainty whether their new school will be more or less safe than their previous one. Many youth who attended Forums expressed deep frustration because they had found a degree of safety and support at one school, only to be forced to attend a different school as a result of a disrupted placement where they were not offered the same levels of support and safety. Support for LGBTQ youth in school can be very subjective, and can change dramatically from district

to district. One may offer a thriving network of services such as GSAs, while a neighboring school district does not. Support for GSAs can vary within school districts as well. Many youth participants in the Forums talked about how safe and supported they felt at schools where they had an opportunity to join their school's GSA, and about how sad and frustrated they were when they were moved to a new school that offered no such support. Many said that this situation was very distressing and made them much less likely to trust that anyone cared about their safety at school.

Attention to the Particular Issues Faced by Transgender Youth at School

Special attention should be paid to the unique needs of transgender students. They are often at the greatest risk of harassment and violence in school.

—Adult participant, Ft. Lauderdale

Restrooms and changing rooms in schools can be especially unsafe, particularly for transgender students.

—Adult participant, Minneapolis

Zero-tolerance dress-code policies make it more difficult for youth to dress so as to express their gender identities in nonconforming ways.

—Adult participant, Denver

As these statements illustrate, transgender students face challenges in school that are particular to them (see Chapter 7). Many gay, lesbian, and bisexual youth deal with harassment by hiding their identities. But for many transgender youth, their gender identity is expressed through their outward, visible appearance: the clothing they wear, their hairstyles, and so forth. This outward expression of their gender identity makes them more visible, and, therefore, more vulnerable to harassment and violence at school. The Human Rights Watch's 2001 Report, *Hatred in the Hallways*, observes that the treatment transgender youth receive in school settings is just as bad as, and often worse than, the treatment received by GLB students.

Transgender youth may find challenges in finding employment opportunities once they leave care. Therefore, it is doubly important for schools to support transgender students' academic achievement so that they are better suited to find safe and legal employment as adults.

Training to Increase the Capacity of School Staff to Understand the Challenges Facing LGBTQ Youth in Schools

Educators are uneducated on the issues.

—Adult participant, Tucson

Teachers and students need sensitivity training so that they can understand what's going on with these young people.

—Adult participant, Jacksonville

What people need is education. They don't know there's an option. Really what it's about is stepping outside of a culture, and of the assumptions that every student has a mom and a dad and wants to grow up to have that lifestyle, and that every student fits into the gender binaries that we set up. Working outside of that assumption is where a lot of headway could be made.

—Youth participant

Foster youth face isolation and discrimination in school for being both LGBTQ and in foster care.

—Adult participant, San Diego

Across the board and without exception, when Forum participants were asked what should be done to improve services for LGBTQ youth in care, they most often called for comprehensive training on issues facing LGBTQ youth in care. This need extends to issues faced by these youth in their schools so that teachers, administrators, other school staff, and students can have a better understanding of the experiences of LGBTQ foster youth in schools.

While offering comprehensive training on LGBTQ issues to students and school staff would seem like a constructive way to build their capacity and

increase their understanding of the issues that LGBTQ youth face in their schools, this strategy is often met with powerful resistance. Some school districts have chosen to forgo federal health education dollars in an effort to provide comprehensive sexuality education, rather than the “Abstinence-Only Until Marriage” curricula promulgated under federal health education guidelines. But these efforts can be met with opposition, leaving LGBTQ youth to remain invisible and their issues unaddressed within their school settings.

Participants in all of the Forums expressed a strong belief that comprehensive training on LGBTQ issues in schools would have a great impact on the high rates of harassment and violence aimed at LGBTQ students. In fact, results from the Massachusetts YRBS support this belief. Data from that study demonstrates that rates of harassment and violence aimed at LGBTQ students are significantly lower in schools where basic LGBTQ issues are discussed than those where they remain unaddressed. LGBTQ students at schools that supported clubs like GSAs and offered training to staff and students on LGBTQ issues were less likely to be threatened with weapons at school, skip school because they felt unsafe, or attempt suicide.

Access to Supportive Information, Resources, and Peer Support

LGBTQ students face many of the same developmental issues as non-LGBTQ youth, including the need for peer acceptance, support, and validation.

—Adult participant, Hartford

Schools need to have a resource directory of community services for LGBTQ youth.

—Youth participant

In some schools, there is aggressive opposition from the administration to even allowing a GSA to be formed.

—Adult participant, Bloomington

LGBTQ youth need access to supportive resources. They need to be able to learn about who they are with regard to their emerging sexual identities and about where to go to find support. Afterschool clubs such as GSAs offer supportive services and information to LGBTQ youth. They also offer these students an opportunity to find much-needed peer support from other LGBTQ youth as well

as from supportive non-LGBTQ peers. School administrators may establish significant barriers that prevent the development of GSAs in their schools, however. Some Forum participants expressed frustration that efforts to form these groups are often thwarted by school administrations.

Access to resources is particularly important for youth who live in rural areas, where there are typically few supportive organizations for LGBTQ youth (see Chapter 8). The Internet can be a valuable source of information and resources for these youth. Language associated with sexual orientation is often blocked from school computers under the rubric of pornography, however. Even websites that offer nothing more than supportive resources designed to assist young people in understanding their identity may be blocked. If LGBTQ youth do not have access to information designed to help them, they remain isolated, misinformed, and without the supports they need to handle and understand the feelings they are having.

Participants in several of the Forums articulated the need for “LGBT Safe Zone” stickers and other images that serve as indicators to LGBTQ youth that they are not alone and that there are adults who will protect them from the pervasive violence and harassment they often experience at school.

Adult Advocates

LGBTQ foster youth need someone to stand up for them and protect them from violence and harassment, especially at school.

—Adult participant, New York City

LGBTQ youth need people to share the burden with if they do not feel safe at school. Unlike foster youth, most students have families they can go home to and talk about school-related concerns.

—Adult participant, Augusta

If caseworkers do not advocate for LGBTQ students in schools, there may not be anyone else with the legal right to do so.

—Adult participant, Bloomington

Teachers and administrators who support LGBTQ youth need to be protected from harassment.

—Adult participant, Hartford

LGBTQ youth need adults who are willing to advocate on their behalf. For most youth, if there are problems at school either with peers or with school staff, they can find support among parents or other caregivers. For youth in foster care, the role of advocate (if it exists at all) is usually played by child welfare professionals who will meet with school administrators to address issues a student might encounter, such as bullying or academic challenges. But many LGBTQ youth in foster care find themselves without anyone who is willing to support them or to advocate for their safety.

If a youth cannot discuss his or her experiences in school with a child welfare caseworker, the caseworker remains unaware of the challenges the youth is facing at school and is left only to witness the low test scores and other academic benchmarks, or in many circumstances, the truancy of an LGBTQ youth who does not feel safe at school. These challenges often prove to be overwhelming for many LGBTQ foster youth, and so their only alternative is to drop out of school entirely, thereby severely limiting their chances of success once they leave the child welfare system.

For LGBTQ youth to have strong advocates, the school and child welfare systems must be made safe for the adults, LGBT or not, who wish to advocate on their behalf (see Chapter 10). In places where teachers fear that they will be fired if they identify as LGBT, they might refrain from showing support for LGBTQ students. In other cases, adults are not aware of existing resources for LGBTQ youth. School systems will become safer learning environments for LGBTQ students, and safer environments for adults to advocate for LGBTQ students' safety and academic achievement, if steps are taken to increase the capacity to understand and address their issues throughout the entire system. Rather than relying on individual schools, teachers, or administrators, positive change needs to occur at the institutional level.

Next Steps for Child Welfare Policymakers

Adopt Policies and Protocols that Ensure the Safety of LGBTQ Foster Youth in Schools

School and child welfare policymakers should work together to ensure that school environments are safe for LGBTQ students. They should develop policies that seek to support safe learning environments in which anti-LGBTQ harassment and violence is not tolerated so that students can focus their energies on their academic achievement rather than on their personal safety.

Mandate Training and Competency on LGBTQ Issues for Child Welfare and School Staff

School and child welfare policymakers should examine existing research in order to better understand challenges facing LGBTQ youth in school settings. They should develop an understanding of the correlations between LGBTQ student safety and their abilities to achieve academically. They should work together to take the steps necessary to create safer and more supportive learning environments for LGBTQ youth by initiating staff and student training on LGBTQ issues and school policies against bullying. They should adopt policies supporting the display of posters and “LGBT Safe Zone” stickers and other symbols that signal to LGBTQ students they are safe and supported.

Adopt Policies and Protocols that Support Access to Information and Resources for LGBTQ Foster Youth in Schools

School and child welfare policymakers should ensure access to appropriate, supportive resources for LGBTQ students, particularly those in rural areas where services may be scarce. Policymakers should understand the distinction between pornography and resources that offer support and information to LGBTQ youth. For many LGBTQ youth, particularly those without caring adults who are willing to support them in the development of their sexual identity, online and printed resources may be the only reliable information to which they have access.

Adopt Policies and Protocols that Support Adult Advocates

School and child welfare policymakers should work together to create safe and supportive environments for adults to serve as advocates for LGBTQ foster youth. If these adults do not fear their jobs may be in jeopardy by supporting LGBTQ youth, they will be more likely to come forward to offer guidance and to assist the youth in accessing information and resources. And as the research shows, LGBTQ students who have access to supportive adults willing to advocate on their behalf demonstrate higher academic achievement than those without.

Next Steps for School Staff and Child Welfare Practitioners

Adopt Practices that Ensure the Safety of LGBTQ Foster Youth in Schools

School staff and child welfare practitioners should work together to ensure that school environments are safe for LGBTQ students. School staff should intervene any time they hear an anti-LGBTQ epithet or learn of anti-LGBTQ violence or harassment in school, sending a clear message to the harasser that their behavior will not be tolerated. Child welfare practitioners should be prepared to intervene on behalf of an LGBTQ client who is not safe at school.

Gain Competency to Work with LGBTQ Youth

School staff and child welfare practitioners should develop the understanding and competence needed to support LGBTQ students. They should participate in training that will allow them to develop an understanding of adolescent sexuality encompassing issues relating to LGBTQ youth. They should be willing to display posters and “LGBT Safe Zone” stickers in their classrooms and offices, signaling to LGBTQ students that they will find safety and support there.

Adopt Practices that Support Access to Information and Resources for LGBTQ Foster Youth in Schools

School staff and child welfare practitioners should assist LGBTQ students to locate age-appropriate resources that support their development.

Advocate for LGBTQ Foster Youth in Schools

School staff and child welfare practitioners should be advocates for LGBTQ students when they encounter verbal or physical harassment. Child welfare practitioners should determine whether youth in their charge are safe and supported in school. If not, they should work with school staff to improve conditions for LGBTQ students.

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CHAPTER 6

PERMANENCY PLANNING



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PERMANENCY PLANNING

LGBTQ youth need permanency—lasting connections and success in life after aging out.

—Adult participant, Bloomington

LGBTQ teens are often in group homes or runaway shelters, and not in the permanency-bound population of foster youth.

—Adult participant, Ft. Lauderdale

The transition to independence can be precarious for any youth; without family support, too many LGBTQ youth in care end up institutionalized or incarcerated.

—Adult participant, Salt Lake City

Young people in care experience so many placement changes that they are left with little hope for permanency.

—Youth participant

Permanency is not just about adoption and guardianship; it is also about having lifelong relationships with caring adults and belonging to a community.

—Adult participant, Sacramento

The system needs a better understanding and respect for the ways in which LGBTQ people build and maintain community and family as part of permanency planning for LGBTQ young people.

—Adult participant, New York City



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ermanency planning is perhaps the most important child welfare service provided to young people in care. Typical permanency goals include: preservation of or reunification with the family of origin, adoption into another family, and independent living. In recent years, there has been a concerted effort to speed up the process by which young people in care are either reunified with their families of origin or provided with permanent families through adoption and guardianship. Only after all diligent efforts to reunify the family have failed, and when another permanent family cannot be found, may the permanency plan shift to independent living. There was a clear consensus among Listening Forum participants that the child welfare system needs to increase its capacity to support LGBTQ youth in securing permanent, safe, and stable living environments for the duration of their time in care and beyond, and in better preparing them for adult independence.

What Are the Permanency Needs of LGBTQ Youth?

Sensitive Preservation and Reunification Services

Reunification is much more difficult and complex in families where there is no acceptance of the LGBTQ youth.

—Adult participant, Salt Lake City

It is vital to offer support and sensitivity when working toward the goal of reunification with the family; some homes of origin are not safe and should not be treated as viable placement options.

—Adult participant, Sacramento

Green Chimneys Gramercy House [a group home for gay, bisexual, and transgender youth], is effective in permanency planning because it starts with a reunification plan for all youth without assuming that a birth family will never accept an LGBTQ youth. They deal head-on with the issues of sexual orientation and gender identity, and work toward a goal of independent living only after ruling out all potential family placements.

—Adult participant, New York City

For many children in the child welfare system, achieving permanence means staying or being reunified with their family of origin. This may not be a viable option for many young people with parents unable to care for them, and even more difficult in cases involving LGBTQ youth when the family environment has proven to be hostile and unsafe, or when the family has expressed a complete and total rejection of their LGBTQ child. More should be done to assist biological families to create safe and supportive home environments that would allow for the successful preservation and reunification of LGBTQ young people with their families of origin. Alternatively, LGBTQ young people should be encouraged to develop healthy connections with those members of their biological family who are supportive of their identities.

Typically, upon entrance into the child welfare system, social workers and service providers trained in addressing family dynamics engage the birthfamily in intensive preservation and reunification services. Few caseworkers and service providers have received any training on working with families to better understand and support a young person's emerging sexual orientation or gender identity, however. As a result, little, if any, support is offered to the family to adopt new and more productive approaches to parenting their LGBTQ child. The family dynamics that caused the LGBTQ youth to come into care in the first place are not resolved, and the home environment is not made safer for the LGBTQ youth. In such a scenario, it may be in the best interest of the LGBTQ young person to remain in care and not be reunified.

Sensitive Adoptive Families

LGBTQ youth are not seen as bound for permanency; the assumption is that no family would want to adopt them.

—Adult participant, Sacramento

There's a lot of stigma and confusion around whether LGBT people can adopt, so not a lot of people are coming forward.

—Youth participant

In my opinion, gay people should be allowed to adopt gay youth because gay parents can relate to us better than straight parents.

—Youth participant

For some youth, it takes the state a very long time to make determinations about the competency of their parents, during which the youth may be harmed and mistreated, leaving the impression that all adults want to hurt them.

—Adult participant, San Diego

Like all young people, LGBTQ youth need stable, loving, and supportive families. The challenge of finding permanent living situations for all youth in care is a significant one. Children in foster care over the age of five who are eligible for adoption are often deemed “special needs” children simply because many prospective families seek an infant to adopt. Self-identified LGBTQ youth are typically adolescents and therefore well above the age when most children are adopted out of foster care. The challenge to find a permanent home for these youth is weighted with additional burdens specifically linked to bias about sexual orientation and gender identity issues.

Florida is the only state in the country that explicitly bans the adoption of children by gay and lesbian people through state statute. This ban figured prominently into the discussions on permanency during the Forums in Jacksonville and Ft. Lauderdale. It was noted that gay and lesbian foster parents are often not considered for placement of younger children in Florida since they are barred from adopting, and the permanency goal for younger foster children is often adoption. In Utah, single individuals and married couples—but not unmarried couples—may foster and adopt children. Since gay and lesbian people cannot legally marry in Utah, they are effectively barred from fostering and adopting children as a couple. In Mississippi, state law explicitly prohibits same-sex couples from adopting children. Only single gay, lesbian, and bisexual individuals can adopt children, although fostering by same-sex couples is allowed.

More often it is the anti-LGBTQ bias of an individual child welfare professional, not a state statute, that impedes the process of achieving permanency for LGBTQ youth. For example, Listening Forum participants from states other than Florida or Utah, where there are no statutory bans on gay and lesbian adults serving as foster and adoptive parents, noted that the professionals responsible for recruiting adoptive families for young people may prevent LGBTQ youth from being “out” during the recruitment process, thereby limiting the chances of finding an LGBTQ-affirming family. Listening Forum participants from these states also noted that prospective foster and adoptive parents

are afraid to come out as supportive of LGBTQ people because they do not want to risk being denied a foster care license by an anti-LGBTQ licensing case-worker. There is little to no discussion of this issue during the screening and placement processes, and no mechanisms in place to facilitate matching based on compatibility on LGBTQ issues. Consequently, some prospective families may fear being viewed by anti-LGBTQ child welfare professionals as “recruiting” youth to be gay if they appear too open, affirming, and embracing of LGBTQ youth issues.

More effort is needed to recruit families from LGBT and non-LGBT communities willing to adopt LGBTQ young people. Outreach programs to recruit prospective adoptive families should acknowledge that there are LGBTQ young people in the system available for adoption and encourage more families to consider adopting older children. Once recruited, training on sexual orientation and gender identity is needed for all prospective adoptive families to prepare them for the possibility that although a child may not be out as LGBTQ at the time of the adoption, he or she may come out afterward or at a later point in the developmental process. It is important to note that the sexual orientation or gender identity of the prospective parents is less important to most young people than the parents’ ability to provide a permanent, stable, and loving home.

Address LGBTQ Issues in Independent Living Services

There is a need for appropriate independent living education and support that address the unique issues faced by LGBTQ people.

—Adult participant, Minneapolis

LGBTQ young people need to learn real-life skills to survive after aging out and transitioning to independence.

—Adult participant, San Diego

Having secure connections to the community helps keep youth off the streets and makes it possible to find permanent living situations.

—Adult participant, San Diego

Under ordinary circumstances, the family unit, however it is configured, provides support, nurturing, protection, guidance, and love to its members. But for many LGBTQ youth, it is within the family that they encounter the most hostility, rejection, humiliation, abuse, and violence. This can be true of biological, foster, and adoptive families alike. Many LGBTQ youth have no choice but to try to live independently after leaving the child welfare system.

Depending on the state, a young person ages out of the child welfare system between the ages of 18 and 21. For LGBTQ youth in care, the system's inability or unwillingness to provide supportive care often serves as a powerful motivation for leaving the system as soon as possible, frequently before they receive adequate independent living support and training. The need for a safe and stable independent living environment and the skills necessary to maintain it are crucial for young people who cannot return to a family environment.

LGBTQ youth face several barriers in finding and maintaining stable independent living situations. First, they are not usually provided with meaningful life skills training, education, and support focused on the real-life issues they may face. LGBTQ youth should be provided with adult mentors and information about existing community resources to help if they are faced with employment or housing discrimination based on their sexual orientation or gender identity. They should be knowledgeable about their legal rights in their state and community, equipped with the skills to advocate for themselves, and able to identify additional mentors and advocates if necessary.

The rejection, harassment, and violence LGBTQ young people experience in care and at school is often another barrier. Such experiences may compel them to be on constant guard for their personal, mental, and emotional safety. Many harbor a constant siege mentality that affects their ability to focus on their education and independent living training and support, leaving them ill-prepared to find employment and housing after aging out of the system.

Next Steps for Child Welfare Policymakers

Adopt Policies and Protocols that Make Permanence for LGBTQ Youth a Priority

More should be done to connect LGBTQ young people to appropriate placements from day one in care.

—Youth participant

Child welfare policymakers should make permanency planning for adolescents in foster care a top priority. Before families of origin enter the child welfare system, they should be offered family preservation services to assist them if they are struggling to come to terms with an LGBTQ young person's identity. All family preservation service providers should be trained to assess a family's acceptance level, give support where needed, and refer families to existing community supports and services.

For LGBTQ young people removed from their families of origin, child welfare policymakers should encourage more diligent efforts to provide reunification services that meaningfully address conflicts and provide support. Reunification service providers should be trained to assess the risk of harm prior to reunifying an LGBTQ young person with a family of origin.

Child welfare policymakers should develop the system's capacity to identify and support families wishing to adopt LGBTQ young people, as well as procedures that make it possible to match LGBTQ young people with appropriate families as soon as possible. There are countless factors contributing to the success or failure of any given placement. By matching LGBTQ youth with affirming families, placement disruptions are less likely to occur and the young person stands a better chance of achieving permanency, even if the family is not a prospective adoptive resource.

Recruit and Support Families for LGBTQ Youth

Child welfare policymakers should implement programs designed to recruit, train, and support families willing to care for LGBTQ youth. As a first step, child welfare policymakers should support recruitment staff in incorporating explicit questions of prospective families regarding their willingness to support an LGBTQ youth, should one be placed in their care. That information could be used in the matching process, which in turn would be useful as a recruitment tool to identify prospective families hoping to care for an LGBTQ young person.

Mandate Training and Competency on LGBTQ Issues for Child Welfare Staff and Caregivers

Child welfare policymakers should require training on LGBTQ issues for all members of the recruitment and licensing staff. Caseworkers and placement

staff should be expected to appropriately address LGBTQ issues and concerns as they arise and have knowledge of existing community resources for LGBTQ young people and their families.

In addition, all caregivers should receive training on sexual orientation and gender identity. Such training should be infused into all preservice training curricula for foster and adoptive parents, and also offered during service as a separate in-depth training.

Develop Life Skills Curricula that Explicitly Address Issues Faced by LGBTQ Youth

Child welfare policymakers should ensure the inclusion of information and support in all independent living skills programs to address the real-life issues faced by LGBTQ youth as they transition to adulthood. For example, the system must offer young people training on handling workplace and housing discrimination, remaining safe in the community, and identifying affirming medical and mental health service providers. Child welfare policymakers should support efforts to assist LGBTQ youth to advocate for themselves and to connect to others within the LGBTQ community. For example, child welfare policymakers are encouraged to promote the use of the LGBTQ Supplement to the Ansell-Casey Life Skills Assessment.¹

Support the Development of Mentoring Services for LGBTQ Youth

Child welfare policymakers should develop mentoring services for LGBTQ youth. All young people need adult connections to foster a smooth transition from childhood to adulthood. LGBTQ youth should be encouraged to come in regular and sustained contact with adult mentors who affirm their identities and support them in making this transition. Child welfare policymakers should support the inclusion of training on sexual orientation and gender identity for all mentors. They should also develop mechanisms for matching LGBTQ youth with LGBTQ-affirming mentors.

¹ See www.caseylifeskills.org.

Next Steps for Child Welfare Practitioners

Gain Competency to Work with LGBTQ Youth

Child welfare practitioners should avail themselves of training on LGBTQ issues and develop the skills necessary to engage a young person in a respectful and supportive discussion regarding sexuality and gender. The goal of such discussions is not to encourage the young person to come out, but rather to express support and a willingness to talk candidly with a young person about these issues. If a young person discloses to the practitioner that he or she identifies as LGBTQ, the practitioner should be prepared to identify existing community resources and supports. The practitioner should keep this information confidential, and only seek prospective adoptive families willing to support an LGBTQ young person.

Safely Preserve or Reunify an LGBTQ Youth With a Family of Origin

Child welfare practitioners should assist families of origin struggling to come to terms with an LGBTQ young person's identity. All family preservation service providers should develop the skills to assess a family's acceptance level, give support where needed, and refer families to existing community supports and services.

Child welfare practitioners should make diligent efforts to provide reunification services that meaningfully address conflicts and provide support. Reunification service providers should assess the risk of harm prior to reunifying an LGBTQ young person with a family of origin.

Assess Whether Prospective Adoptive Families Can Support an LGBTQ Youth

Child welfare practitioners should ask questions of prospective adoptive families that explicitly address LGBTQ issues and concerns. Practitioners should have the skills to engage families in in-depth discussions on their willingness and ability to love and support an LGBTQ young person should one be placed in their care. Families routinely decline caring for certain types of children, such as children of certain ages, or children with certain types of disabilities. LGBTQ youth should only be placed with families willing and able to care for and love them.

Advocate for Fair Treatment of LGBTQ Youth in Their Housing and Places of Employment

Child welfare practitioners should be prepared to advocate for LGBTQ youth in their schools, housing, and places of employment, especially when they experience discrimination and harassment. They should also help LGBTQ youth develop strategies for resolving these conflicts and advocating for themselves in productive ways before problems occur. Too often, LGBTQ youth feel unsupported and as though they have no other choice but to quit their schools or jobs or leave their housing when faced with anti-LGBTQ treatment, leaving them vulnerable to poverty, homelessness, and instability.

Recruit and Support Mentors for LGBTQ Young People

Child welfare practitioners should recruit and train adult mentors for LGBTQ youth who affirm their identities and support them in making connections within the community. LGBTQ youth need adults in their lives who can assist them to access resources, identify support in the community, and transition safely to adulthood. This is especially true for LGBTQ young people who are not returned home or adopted into another family. Mentors often provide the missing link, connecting young people to supportive adults who commit to being in a young person's life for as long as possible.

CHAPTER 7

TRANSGENDER YOUTH



CHAPTER 7

TRANSGENDER YOUTH

My main concern with the social service system is the lack of understanding of transgender issues. As a transgender woman, my experiences and needs are different from gay and lesbian youth in care.

—Youth participant

Agencies often address sexual orientation but not gender identity in programs, policies, training, and services.

—Adult participant, San Diego

The practice of placing transgender youth in group homes according to their biological sex places them at greater risk of violence, including rape.

—Youth participant

Though many common issues relate both to gender identity and sexual orientation within child welfare settings, transgender youth in care face added burdens distinct from those facing lesbian, gay, and bisexual youth. A consensus emerged at the Listening Forums that child welfare systems lag even more dramatically in their understanding and care of transgender young people. These youth are at especially high risk of being targeted for harassment and violence and of finding child welfare systems so inhospitable that they feel safer living on the streets. There is an acute need to educate child welfare practitioners about transgender issues and to treat transgender young people in care with respect, empathy, and competence.

“Transgender” is an umbrella term used to describe those whose self-image of their gender differs from gender norms traditionally associated with the sex assigned to them at birth. The term “sex” generally refers to a person’s physiological characteristics, including genitalia, chromosomes, and hormones. The

term “gender” generally refers to a person’s internal sense and outward expression of self as a man or woman or combination thereof. Conventional thinking supported the belief in a binary system in which only two genders exist, male and female. Many have come to understand, however, with support from medical and social science that gender occurs on a wider continuum that encompasses a broader range of possible gender identities and expressions.

Transgender individuals experience a dissonance between their gender identity—their deeply held, internal sense of themselves as a man or a woman—and their birth sex. For many transgender individuals, this conflict begins at a very early age. Moreover, there is not necessarily any correlation between sexual orientation and gender identity. A transgender person may identify as heterosexual, gay, lesbian, or bisexual. A “male-to-female” transgender person, also known as a transgender woman, was determined at birth to be male but self-identifies as female. A “female-to-male” transgender person, also known as a transgender man, was determined at birth to be female but self-identifies as male. Additional terms used by people whose gender expression falls under the umbrella term of transgender include transvestite, transsexual, transgenderist, gender variant, drag queen or drag king, and genderqueer, among many others.

Transgender young people are often forced to live and act according to traditional gender roles associated with their birth sex. This often feels deeply unnatural and uncomfortable for them. Transgender young people may instead choose to express their gender identities in a variety of ways, including by changing their names and the pronouns to which they answer, dressing in clothing associated with the gender with which they identify, and altering their physical appearance to conform with their gender identity. Such forms of gender expression often provoke resistance from the adults in their lives, who see them as forms of rebellion or pathology, rather than as healthy expressions of a deeply-felt sense of self. In fact, professional standards of care call for recognizing the profound need of transgender people—children and youth included—to express their gender and supporting them to do so (HBIQDA, 2001).

Transgender young people may experience great distress during the tumultuous period of adolescence when secondary sex characteristics begin to develop and become more evident. During this time of bodily growth and change, physical gender differences become more defined, which may cause transgender youth to experience an intense sense of alienation from their own bodies.

The developmental processes through which one develops one's sense of gender and one's sense of sexual orientation and attraction are distinct and may occur at different stages. Yet tremendous ignorance remains among child welfare professionals about these developmental processes, and this ignorance often leads to misunderstanding and mistreatment of youth whose sense of themselves as male or female may not coincide with their birth sex.

As child welfare experts Gerald Mallon and Teresa DeCrescenzo (2002) wrote,

Part of the way our society maintains stereotypes and negative attitudes about transgender people is by refusing to view them as a legitimate topic for discussion in our homes, our child welfare systems, or our educational institutions. Such silence promotes the maintenance of stereotypes, because positive images that reflect the reality of transgender people are extremely limited both in the media, which influences popular opinion, and in the professional literature, which informs the practice of youth [-serving professionals] in child welfare. Many transgender youth cannot comfortably or safely disclose their orientation in such an atmosphere. As a result, students and practitioners are not exposed to the realities or diversities of this population. Given the increasing number of transgender children and adolescents who are now presenting in child welfare and other agencies serving youth, a need clearly exists to provide accurate, relevant, nonpathologizing, and affirming information about these youth (p. vii).

What Are the Needs of Transgender Youth in Care?

Respect for a Transgender Youth's Gender Identity and Expression

Transgender youth need to be treated with care and respect, and not as though they are deviant or pathological.

—Adult participant, San Diego

The child welfare system needs to respect the maturity of transgender young people and the decisions they make.

—Youth participant

Transgender youth must be permitted to honestly and authentically express themselves.

—Adult participant, Jacksonville

The most basic need of transgender young people is for the child welfare system to respect their gender identity and support them in their expression of it. In the words of one Forum participant, the starting point must be “a system of care based on identity and consent, not on pathology and diagnosis.”

Children often form a sense of their gender at a young age, and their expression of that gender through self-identification and presentation should not be viewed as “acting out” behavior, but rather as an outward expression of an inner truth. Yet there remains a great dissonance between those who believe a transgender identity is but a variation on a spectrum of possible gender identities, and those who believe it to be a disorder, albeit one that should be treated by supporting a transgender person’s gender expression. Gender Identity Disorder (GID) is listed as a diagnosable condition in the Diagnostic and Statistical Manual (DSM) IV. Some child welfare and mental health professionals are of the opinion that a transgender identity will one day not be seen as a disorder or diagnosable condition, much the same way that homosexuality once was but is no longer seen as a disorder by any reputable professional medical or mental health association. Others, however, believe there are advantages to having GID codified in the DSM because the diagnosis makes some health care providers more inclined to provide certain forms of care and some service providers more inclined to voluntarily make reasonable accommodations allowing transgender young people to more freely express their gender identities.

Irrespective of ideological discrepancies as to whether children who present with gender identity issues should or should not be diagnosed as having a disorder, the professional consensus remains that transgender youth need to be treated with respect for their identities and the expression of those identities. The foundation for care of transgender young people is to acknowledge and support their gender identity. All programmatic and treatment decisions should be made based on this premise. In other words, a youth who is biologically male but who identifies as female, dresses as female, and wishes to be referred to as female should be considered to *be* female. Likewise, a youth who is biologically female but who identifies as male, dresses as male, and wishes to be referred to as male should be considered to *be* male. Youth who are in the process of questioning and

exploring their gender identity, or who do not express a clearly male or female gender, should be provided support to allow them to do so.

Respect for Choice of Names and Pronouns

Transgender youth deserve basic respect as evidenced through language; refer to a youth using the gender pronouns he or she prefers.

—Adult participant, Augusta

You can't deal sensitively with transgender people if you're not willing to use a young person's preferred name.

—Youth participant

Names are a fundamental defining characteristic for all people. For many transgender youth, their given (or legal) name corresponds with their birth sex but not with their gender identity. For this reason transgender people commonly choose to use a name more reflective of their sense of themselves as male or female. Transgender youth also often prefer to be referred to by the pronoun that best reflects their gender identity, rather than the pronoun that matches their birth sex. In other words, a male-to-female transgender youth often prefers to be referred to as “she,” while a female-to-male transgender youth often prefers to be referred to as “he.” (Using a term like “he-she” is disrespectful of a transgender youth’s identity and is not conducive to forming a productive relationship with the youth.) It is respectful and appropriate to refer to transgender people by their preferred name and pronoun. Yet very few child welfare professionals are willing to even ask a transgender youth whether he or she uses another name or pronouns or acknowledge their chosen gender.

Those who interact with transgender young people must understand the importance of respect for a youth’s name and pronoun preferences. Imagine if everyone around you insisted on referring to you as though you were of a different gender than your own, calling you by a name and pronouns associated with another sex. The importance of being recognized as the gender with which they identify is no different for transgender people than for anyone else.

Respect for Choice of Attire

Some caseworkers refuse to submit purchase orders for clothing that does not conform with gender stereotypes.

—Adult participant, Augusta

Transgender young people need the freedom to dress in ways that express their gender identities.

—Adult participant, San Diego

Allow transgender youth to dress in the manner they feel most comfortable.

—Adult participant, New York City

The clothing an individual chooses to wear is another essential element of self-expression. It is as uncomfortable for a female-to-male transgender youth to be forced to dress in “girls” clothing as it would be for a nontransgender boy. Yet transgender youth commonly meet with severe resistance within child welfare settings when they dress in accordance with their gender identities. While some agencies and staff support young people in their clothing choices, others forbid transgender youth to dress in attire appropriate for the gender with which they identify.

Safe and Supportive Placements

The most important issue is safety, especially in “straight” group homes where the staff can be unfriendly and rape and other forms of abuse are often tolerated.

—Youth participant

Transgender youth should be housed according to the gender with which they identify and not segregated according to their biological sex.

—Adult participant, New York City

Transgender young people may be even more vulnerable to abuse in their placements than lesbian, gay, and bisexual young people, since gender expression is more visible and not as easily hidden as sexual orientation.

—Adult participant, Sacramento

Transgender youth have a pressing need for safe bathrooms and changing facilities in settings such as group homes, residential treatment centers, shelters, and agencies.

—Adult participant, Denver

Transgender youth in care need safety in their placements. Around the country, youth and adult Forum participants alike prioritized this issue. Transgender youth are typically placed in residential care according to their birth sex rather than according to their gender identity, often with serious consequences for their safety and well-being. Consider the example of a young person who is biologically male but who considers herself to be female, who dresses as female, and who wishes to be referred to as female. She is placed on a boys' floor in a residential facility because her birth sex supercedes her gender identity in the eyes of child welfare practitioners, thereby setting up numerous potential conflicts, as well as the potential for great harm to the youth. This signals to the youth that her identity, a core component of who she is, is disregarded by those charged with her care. She will then likely feel disrespected and will tend to be less cooperative and less participatory within the therapeutic milieu. Most significantly, if she is placed on a boys' floor or with a boy as a roommate, her safety may be imperiled. She may be left open to harassment and other forms of abuse.

As is the case with lesbian, gay, bisexual, and questioning youth who do not feel safe in their living and educational environments, transgender youth who are unsafe in their placements are likely to run from those environments and turn to living on the streets.

Transgender youth thus need placements in congregate care facilities that accord with their gender identity and ensure their safety. Child welfare agencies responsible for the safety of these young people must also ensure that bathrooms, locker rooms, and dressing areas within these facilities are appropriate and safe for transgender youth. This is not only a question of common privacy, no different for transgender youth than for anyone else, but may also be a matter of basic safety, the minimum owed to any youth in care.

My dream is to live in a family that will accept me and where I can just be a kid.

—Youth participant

Since gender identity often emerges at a very young age, many transgender youth find themselves from childhood at odds with families and child welfare systems that do not understand and support them. From early on they may have few acceptable placement options. Many Forum participants cited the dearth of appropriate foster and adoptive parents available for these young people. Child welfare systems need to recruit transgender and other supportive foster and adoptive parents for transgender young people and offer them resources, like transgender parenting groups. Transgender youth should not be placed in foster homes where their gender expression will not be understood, supported, and respected. They should have the love and nurturing that all children need.

Sensitive Child Welfare Staff and Foster Parents

Training on sexuality and gender issues should be incorporated into existing foster care staff and parent training.

—Youth participant

Child welfare staff are generally better informed about sexual orientation than gender identity.

—Adult participant, Jacksonville

Sensitivity training on transgender issues is needed for all child welfare staff, across the board.

—Youth participant

Many of the challenges faced by transgender youth stem from the endemic lack of basic understanding and competence about transgender issues on the part of child welfare systems and professionals. As with issues relating to lesbian, gay, and bisexual youth, time and again Listening Forum participants identified training on transgender issues as the principal route toward a more competent and compassionate system of care. Indeed, the “sensitivity gap” in the child welfare system is, if anything, even more pronounced when it comes to transgender issues, given the relatively recent emergence of social science and understanding on gender identity issues. The common theme resonating throughout all the Forums is that “training is key.”

Access to Competent and Informed Medical Care

Transgender youth need better medical services, including adequate and safe distribution of hormones and clinical counseling.

—Youth participant

We need to make sure these young people have transgender-friendly health care providers available.

—Adult participant, Bloomington

Transgender youth need access to safe, supportive, and competent medical care. Medical concerns are paramount for transgender young people, yet it is often difficult or impossible for them to find health care that is safe and supportive or providers who understand their medical needs.

The child welfare system should pay better attention to the medical needs of transgender youth, including access to transgender-specific medical care and access to safe hormones and proper hormone therapy.

—Adult participant, New York City

We need to dispel the perception that if you take hormones, you have mental problems and are unstable.

—Youth participant

We shouldn't have to get the hormones we need from the streets. We should have access to hormones from primary care physicians or friendly doctors who understand our needs.

—Youth participant

Hormone therapy is understood by transgender people and experienced providers to be a major component of physical transition. According to leading experts on transgender health issues, young people age 16 years and older may begin to use cross-sex hormones to initiate physiological changes that bring their bodies more in line with their gender identities. “Cross-sex hormonal treatments play an important role in the anatomical and psychological gender transition

process. [W]hen physicians administer androgens to biologic females and estrogens, progesterone, and testosterone-blocking agents to males, patients feel and appear more like members of their preferred gender” (HBIQDA, 2001, p. 13). Hormone treatment allows transgender people to develop some of the secondary sex characteristics of their target gender, including the growth of facial and body hair for transgender men, or an increase in breast tissue size and shape for transgender women. Some transgender people also undergo one or several forms of sex reassignment surgery, sometimes referred to as sex confirmation surgery, to bring their bodies further into alignment with their gender identities.

Transgender youth need access to safe and monitored hormone therapy under the care of a trained and understanding physician. If not afforded the supportive care they seek, transgender young people will often turn to the streets and the black market for the hormones they need. In so doing, they run the risk of taking hormones in inappropriate doses or that are of poor or unknown quality, with potentially dangerous consequences. Since hormones are commonly taken through injection, they also run the risk of contracting diseases like HIV and hepatitis from needles shared on the street.

Transgender youth need health, medical, and wellness services that are welcoming and appropriate.

—Adult participant, Philadelphia

These young people need safe and appropriate medical care, especially providers that accept Medicaid.

—Adult participant, Jacksonville

Transgender young people often lack information about themselves, and have limited access to resources and information.

—Youth participant

Beyond safe and monitored access to health care, transgender youth also need support to navigate the physical and emotional changes they are experiencing. They need access to medical providers with training in gender identity development and sensitivity in working with transgender young people. Their medical care providers should treat them with respect and competence.

Role Models and Mentors

Foster care agencies should identify and recruit more positive role models and mentors for transgender youth.

—Youth participant

The system needs more openly transgender caregivers and staff members.

—Youth participant

Transgender youth really benefit from having positive role models who offer understanding and nonjudgmental support, whether they are transgender or not.

—Adult participant, New York City

Transgender youth need to feel that child welfare caseworkers can and will be helpful to them.

—Adult participant, Philadelphia

Transgender youth, like all youth, need connections to adult role models and mentors. For transgender young people in child welfare systems, these positive connections can be harder to find but are crucial for their healthy development. This was made dramatically clear by the experience of a transgender teenager in foster care, who, through an innovative program, was matched with a transgender mentor. Only with her mentor was this young teen able to ask the question that had been troubling her—whether transgender females like herself could grow up to find jobs other than the stereotype she feared might be her sole option in life, prostitution. Her mentor, living proof that transgender people can find happiness and professional success as adults, was able to put her fears to rest. Transgender youth in care, commonly cut off from their families of origin and part of a misunderstood minority, can find a sense of family and belonging from mentors and role models in the community.

Community Resources

Transgender youth need help from adults in locating appropriate resources.

—Adult participant, San Diego

Adults in the child welfare system should be able to equip transgender youth with information so that they can better advocate for themselves.

—Adult participant, New York City

Young people need help getting identity documents like driver's licenses and birth certificates that reflect the gender with which they identify.

—Adult participant, Augusta

We need more transgender organizations and services for youth, especially for young transgender men, since many of the existing services are targeted at older people and transgender women.

—Youth participant

There should be day programs for transgender youth.

—Adult participant, Bloomington

There should be a list of existing community resources distributed throughout the state.

—Adult participant, Minneapolis

Transgender youth need special support to navigate the unique issues they face. For example, they may need assistance and advocacy to obtain proper legal identity documents that reflect the gender with which they identify. They may also need help to obtain a legal name change. They need access to safe resources in their communities where they can go for support and to learn more about themselves and the services that are available to them. Transgender young people need social centers where they can gather with others who will accept and support them and share their interests. Child welfare systems have the responsibility to locate and help develop these resources for transgender young people in their care.

Safe and Supportive Schools

There is a need for safe and understanding school settings in order to break the cycle of school failure for many transgender young people.

—Adult participant, New York City

School administrators and teachers need sensitivity training on transgender issues.

—Youth participant

Transgender students are usually referred to by their legal name at school and not their name of choice, which often creates conflict.

—Adult participant, Philadelphia

Special attention should be paid to the unique needs of transgender students because they are often at the greatest risk of harassment and violence in school.

—Adult participant, Ft. Lauderdale

Transgender youth commonly face especially difficult problems in school settings. Although it may not be the direct responsibility of child welfare systems to create safe learning environments for students in school, it is their responsibility to advocate and stand *in loco parentis* for the youth in their care. It is therefore the duty of child welfare professionals to work with schools to ensure the transgender youth in their care have the opportunity to learn in a safe school environment.

Many Forum participants noted the common dilemmas faced by transgender youth at school that mirror the challenges they face in their placements, particularly with regard to their safety, use of their chosen names, dress, and access to appropriate bathroom and locker facilities. All too often, school settings are so intolerable that transgender teenagers feel little choice but to drop out. These youth then lack the skills to find jobs when they age out of child welfare systems.

Be Proactive. It Pays Off!

Participants at one Listening Forum offered this powerful example of how child welfare professionals can and should advocate for the safety of transgender students at school:

We opened a group home for LGBTQ youth a few years ago. We knew that it wasn't enough just to register the transgender youth in our care at a new school and wave goodbye at the door. If those young people were going to be able to succeed in school, we were going to have to advocate for them. Prior to the start of the school year our staff met with school administrators to work out a plan to ensure the safety of the transgender youth who would be attending the school. We brought information about transgender issues and answered questions the administration had. We explained the kinds of school-based problems these young people often confront and discussed strategies for keeping them safe.

The school administration really paid attention to what we had to say. The administration decided to publicly announce a zero-tolerance policy for harassment of any student, including transgender students, either by adults who work at the school or by students. This set a tone of acceptance from the top. The school administration identified a separate changing room and bathroom for the transgender students so that they would feel safe and comfortable. Students were also allowed to attend physical education classes according to their gender identity and not according to their biological sex.

In addition, our group home staff met with members of the school's GSA to let them know that a group home for LGBTQ youth had recently opened in their community and that many of the residents from this program might want to attend the GSA. Students in the GSA took it upon themselves to escort the transgender students from class to class for the first few weeks of school to ensure their comfort and safety.

We were so gratified and proud when the first transgender youth to graduate from our group home was accepted at five universities, and went on to college. There is no question that our advocacy at the school really paid off.

Support in Finding Employment

We need help in identifying employment and career opportunities for transgender youth in order to avoid prostitution.

—Youth participant

Transgender young people need more support from the child welfare system to access educational options, like high school, GED, college, and vocational training, so they can have marketable employment skills.

—Adult participant, Philadelphia

Transgender youth face especially steep barriers to employment. Prospective employers may be uncomfortable with a transgender young person who does not seem to conform to traditional gender norms, and thus may be reluctant to hire or promote transgender youth or may subject them to increased scrutiny on the job. Employment is even more complicated for those transgender youth whose identity documents do not match their chosen names and gender expression. Without adequate educational and job training opportunities, they are at a further disadvantage. The ability of transgender youth to work is often squandered as a result. Transgender young people aging out of child welfare systems can be left with few options other than to engage in illegal and harmful activities in order to survive.

A clear consensus arose among Forum participants that without meaningful opportunities for education, job training, and legal employment, transgender youth in child welfare systems are denied the resources necessary to successfully transition to independent adulthood.

Better Informed Juvenile Justice and Law Enforcement Systems

The juvenile court system needs to be more understanding of transgender issues.

—Youth participant

The system does a bad job addressing hate crimes targeted at transgender people.

—Youth participant

There was follow-up after I after I came out as queer within the court system. The follow-up was the judge sentencing me to “gender therapy,” which sends a really negative message. And without even consulting with me at all! Even the word “therapy” makes me shiver, when it comes to LGBT issues. It’s really important that the court system is supportive both in language and in action.

—Youth participant

It is a sad reality that many transgender youth in the child welfare system frequently come in contact with law enforcement services and juvenile delinquency and detention systems. The cycle of experiencing unsafe placements, fleeing to the streets, and resorting to illegal activities in order to survive exponentially increases the likelihood that these young people will enter the juvenile justice system.

Transgender young people who are accused of crimes and arrested are often put in special cells for people with HIV and other illnesses.

—Youth participant

The system needs services for family court judges and personnel to help them better serve transgender young people.

—Adult participant, Philadelphia

We need more judges to be involved in the system reform effort to ensure that the court system is also improved.

—Adult participant, San Diego

Once in the juvenile justice system, transgender youth confront the same misunderstanding, disrespect for their gender identity, and unsafe conditions that plague the child welfare system. Child welfare and other professionals need to advocate for safe and sensitive treatment of these youth within the juvenile justice system. For example, as is frequently the case with transgender youth placed in residential programs according to their birth sex rather than their gender identity, transgender youth are generally assigned to juvenile detention facilities based on their birth sex. Particularly for transgender girls placed in male facilities, such placements involve great risk of violence and abuse.

Because they are at high risk of being targets of hate crimes, transgender youth may need police and victims' services to help protect them. Unfortunately, juvenile justice and law enforcement systems commonly treat these young people with insensitivity and ignorance. As one youth explained, "transgender people, especially the homeless, need more legal services and protections. Police are insensitive to transgender victims of crime, and so we are often reluctant to report crimes." Many antiviolence projects do not specifically address violence against transgender people or offer them appropriate support. Child welfare professionals need to be advocates for transgender youth who have been victimized by crime and then by the services meant to protect them.

Next Steps for Child Welfare Policymakers

The system, not transgender youth, must change. We should not put pressure on transgender youth to change their identities in order to be protected and to receive help.

—Adult participant, Hartford

Agency directors need to take a visible stand, implement real change, ban discrimination, and hold staff accountable for discriminatory treatment.

—Youth participant

Mandate Training and Competency on Gender Identity Issues

Child welfare policymakers should require comprehensive staff training on adolescent sexuality, and, specifically, on gender identity and gender expression. They should also make basic competency on gender identity issues a required professional qualification for staff. Gender identity competence should be added to all staff performance evaluation mechanisms. Foster parents should also be required to have training on gender identity issues. Those fostering transgender youth should receive advanced training and support.

Child welfare policymakers should also seek out training and review existing research in order to educate themselves on gender identity issues. Given that children often form a sense of themselves as male or female very early in life, policymakers must acknowledge that no child in care is too young to present issues

regarding gender identity and expression. Child welfare systems must be equipped to respond to transgender children of all ages with sensitivity and competence.

Adopt Policies and Protocols Specifically Addressing Transgender Issues

Child welfare policymakers should adopt policies specific to transgender issues that comprehend the distinctions between gender identity and sexual orientation. Many transgender youth identify as heterosexual. For example, a male-to-female transgender youth may feel sexual and emotional attraction toward males. Therefore, since she sees herself as female and she is attracted to males, she may identify as heterosexual. The same holds true for female-to-male transgender youth who are attracted to women. Policies that articulate support for lesbian, gay, and bisexual youth without expressly including transgender youth in their scope may leave these young people without the protection they need to remain safe in care. Child welfare policymakers should explicitly add gender identity to all policy statements, including nondiscrimination policies.

Adopt Policies and Protocols that Support a Transgender Youth's Gender Identity and Expression Through Name, Pronoun, and Attire Choices

Child welfare policymakers should adjust their policies to support a youth's gender identity and expression, including requiring respect for a transgender youth's name and pronoun choices.

Child welfare policymakers should likewise adopt protocols permitting transgender young people to express their gender identities through the clothing they choose. This does not mean allowing a young person to wear clothing that would be inappropriate for someone whose birth sex matches his or her gender identity. Clothing that is not permitted for any youth would not be permitted for a transgender young person either. But transgender youth should be supported in choosing clothing expressive of their gender and acceptable within a child welfare milieu.

Adopt Policies and Protocols Against Antitransgender Practices and Abuse

Child welfare policymakers should establish a safe, professional milieu in which antitransgender attitudes and practices expressed by their employees or residents

are not tolerated. They should develop written policies and protocols that outline expectations for the positive support required for transgender youth. These policies and protocols should include clearly articulated consequences for staff should they exhibit antitransgender attitudes and practices on the job. Similar protocols and consequences should be outlined for residents of child welfare programs as well.

Develop Resources for Safe Placements

Child welfare policymakers should develop policies that support safe placements for transgender youth in accordance with their gender identity rather than their birth sex. For example, policymakers should develop congregate care settings that can be safe havens for transgender young people, with specially trained staff and access to supportive services. They should require designation of safe changing and bathing facilities for transgender youth within their organizations.

They should develop programs to identify, recruit, and train foster and adoptive families for transgender young people. Policymakers should establish clear protocols for families fostering transgender youth to ensure that these young people are treated sensitively and without discrimination.

Adopt Policies and Protocols that Ensure Sensitive and Competent Medical Care of Transgender Youth

Child welfare policymakers should establish policies that allow transgender youth to receive competent specialized medical services, including access to monitored use of hormones, and should facilitate access to those services.

Encourage Staff to Serve as Role Models and Advocates for Transgender Youth

Child welfare policymakers should encourage staff to serve as advocates and role models for transgender youth. Protocols should be established for staff to advocate for the needs and best interests of transgender youth in schools; in juvenile justice and law enforcement systems; and with employers, health care providers, families, and other community resources.

Develop Mentoring Programs and Connections to Community Resources

Child welfare policymakers should encourage staff to develop connections to supportive community resources for transgender youth, including school-based resources, supportive social and educational services, medical and mental health providers, job-training programs, family-centered services, and caring adults who are willing to serve as mentors.

Next Steps for Child Welfare Practitioners

Gain Competency in Working with Transgender Youth

Child welfare practitioners should avail themselves of existing research and training opportunities in order to become better educated on gender identity issues and on the distinctions between gender identity and sexual orientation. They should ensure that they have the information and skills to serve transgender youth in their care with competence and professionalism.

Adopt Practices that Respect a Transgender Youth's Gender Identity and Expression

Child welfare practitioners should acknowledge that transgender youth usually prefer to be called by their chosen name and should honor that preference. Practitioners should develop the skills to engage youth in discussions about their gender identities and pronoun preferences and become accustomed to referring to transgender youth by using the name and pronoun that reflects the youth's gender identity. This can go far towards establishing the trust and mutual respect crucial to a productive relationship with a young person.

Identify and Ensure Safe Placements

Child welfare practitioners should seek out and monitor safe, supportive placements for transgender young people. They should ensure that transgender youth in congregate care settings are placed appropriately to respect their gender identity and safeguard against harassment. Practitioners should educate others involved in the youth's placement, including residential staff, residents, and foster families. Practitioners should seek out supportive foster and adoptive parents for transgender young people.

Develop Connections with Medical and Community Resources

Child welfare practitioners should develop connections to existing community resources for transgender young people and should encourage transgender youth to access those resources. These can include competent medical and mental health care providers, local youth centers, afterschool programs, job and vocational training programs, supportive faith-based services, and legal services. Child welfare practitioners should also understand and help transgender young people overcome barriers to finding employment.

Locate Mentors and Positive Role Models

Child welfare practitioners should identify local adults in their communities who are willing to serve as mentors or in other supportive capacities for transgender youth. As do all youth, transgender young people need adults who will care for, support, and advocate for them.

Adopt Practices that Ensure the Safety of Transgender Youth in Schools and Juvenile Justice Settings

Child welfare practitioners should consider it their responsibility to advocate for transgender youth in their schools. Transgender youth experience high levels of harassment, ridicule, and violence at school, and they are often left without caring adults who to work with the school administration to ensure their safety.

Child welfare practitioners should likewise advocate for safe and fair treatment of transgender young people who come in contact with the juvenile justice system.

They should foster a milieu in which harassment of transgender youth is not tolerated, whether that harassment comes from other youth or from professional peers. Practitioners who provide supportive, competent services can mean all the difference between young people who feel they have no choice but to take their chances living on the streets and those who are secure in the knowledge that they are respected and safe and can rely on the adults charged with their care.

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CHAPTER 8

BRIDGING THE RURAL-URBAN DIVIDE



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BRIDGING THE RURAL-URBAN DIVIDE

Supportive resources tend to be in the big cities, and LGBTQ youth in rural areas have difficulty accessing them.

—Adult participant, Bloomington

Young people are often too scared to come out in small towns.

—Adult participant, Augusta

Rural LGBTQ youth may feel especially isolated and alone, which could lead to depression, substance abuse, and other mental health issues.

—Adult participant, Hartford

LGBTQ people have historically flocked to big cities for a number of reasons. Some move after experiencing outright rejection by their families and communities of origin, seeking acceptance and a sense of community in larger cities. Others seek refuge in big cities where there are more resources and supportive services for LGBTQ people, as well as a degree of anonymity that may be especially attractive to young people privately exploring the contours of their sexual orientation or gender identity.

Large urban areas tend to have a wide range of programs, services, and social outlets available for LGBTQ people. The amenities one might typically find in a big city include bookstores, community centers, support groups, mental and physical health-service providers, newspapers, annual festivals, bars, and restaurants—all catering to the LGBTQ community.

LGBTQ people living in rural areas, on the other hand, usually have far fewer resources and community outlets available to them. Rural LGBTQ young people may be completely cut off from any supportive resources, and those that do exist may be impossible to reach without transportation or access to the

Internet. Participants at several Listening Forums explored the unique needs of LGBTQ youth in care in rural areas of our country.

What Are the Needs of LGBTQ Youth in Rural Areas?

Access to Information About Available Resources

Public libraries usually install blocks and filters on their computers that prevent rural youth from being able to use the Internet to access LGBTQ resources and services.

—Adult participant, Bloomington

The Internet presents a quick and easy way for rural LGBTQ youth to connect with one another. It can also be a source of information and a connection to online support services. Not all LGBTQ youth have access to computers in their homes or placements, however, and they often encounter significant barriers to accessing supportive information and resources on the Internet when using computers in the public library or in their schools. Public schools block students' access to websites that contain content deemed "pornographic." Public libraries also usually install software on their computers to prevent users from accessing such material on Internet websites. Unfortunately, websites that even mention words like "gay" or "lesbian" are also blocked, even those that offer age-appropriate professional support and services that could be a lifeline for isolated LGBTQ young people. As a result, LGBTQ youth may be unable to access any supportive resources at all or find any help for themselves.

Transportation Assistance to Access Resources

LGBTQ youth in rural areas need transportation assistance to get to the places where there are resources.

—Adult participant, Augusta

More needs to be done to bridge the geographic distance that often exists between quality services and good placements.

—Adult participant, San Diego

Particularly in rural areas, LGBTQ youth face the challenge of finding transportation and actually getting to the place where resources may exist. Without transportation assistance, rural LGBTQ youth may never have access to the in-person support available to young people in urban areas. Caseworkers and foster parents may need to pitch in and help drive LGBTQ young people to places where they can participate in peer support groups, social events, and other activities that often help ameliorate feelings of isolation.

In some parts of the country, the geographic distance is a serious obstacle that cannot be overcome even with adults willing to transport a young person to attend events and activities. This is particularly problematic for hard-to-place young people who may have a supportive foster family that lives far from any LGBTQ youth services. Young people should not feel torn between a loving family and having access to LGBTQ community supports. Unfortunately, until resources are spread more evenly throughout the country, that dilemma is all too real for many LGBTQ young people in the child welfare system.

Next Steps for Child Welfare Policymakers

Adopt Policies and Protocols to Ensure that Resources Are Developed and Disseminated Throughout the State

The disparity between resource-rich urban areas and resource-deficient rural ones causes many LGBTQ youth to seek refuge in larger cities. Ill-equipped to handle the demands of city life, rural LGBTQ youth may find themselves homeless and on the streets with nowhere to go for basic support. In order to ease the pressure to abandon life in rural areas of the state, child welfare policymakers should take this dynamic into account and try to spread LGBTQ resource more evenly throughout the state. Child welfare policymakers should ensure that services are available to LGBTQ youth no matter where they live.

Remove Obstacles Preventing LGBTQ Youth from Accessing Support

Create a more efficient mechanism for moving LGBTQ young people to other counties within the state to facilitate a match with a permanent, loving, LGBTQ-affirming family. Currently, there are huge obstacles to moving hard-

to-place foster youth across county lines in order to place them in the best homes available in the state.

—Adult participant, Ft. Lauderdale

Child welfare policymakers should remove obstacles preventing LGBTQ youth from being moved to other parts of the state if necessary for placement with the most appropriate, LGBTQ-affirming families. During several Listening Forums, the great hardship involved in moving a young person across county lines within the same state was identified as a key obstacle to providing the best possible care for LGBTQ youth.

Accessing supportive services in other parts of the state is also difficult, if not impossible. In order to facilitate the provision of appropriate services, child welfare policymakers should eliminate this barrier, and caseworkers should be encouraged to place LGBTQ youth where the most appropriate resources, placements, and supportive services are located.

Child welfare policymakers should ensure that group homes and child welfare facilities provide access to potentially life-saving information and supportive services on the Internet without blocking information for LGBTQ people.

Provide Transportation Assistance to Access Resources

Not all young people need to be moved to access supportive resources. Some simply need transportation assistance to avail themselves of these resources. Some LGBTQ youth-serving agencies actually offer transportation assistance, while others may have a telephone hotline or website that rural youth may use for support, especially in an emergency. Child welfare policymakers should ensure that all young people have access to available supportive services and transportation assistance when necessary.

Create and Distribute a Statewide Directory of Resources for LGBTQ Youth

The Department of Children and Families (DCF) should create, maintain, and distribute to all youth and youth-serving professionals a statewide resource directory of all existing community services for LGBTQ youth.

—Adult participant, Jacksonville

DCF should identify and distribute a list of all LGBT-friendly placements throughout the state.

—Adult participant, Ft. Lauderdale

Child welfare policymakers should ensure that all practitioners are familiar with existing resources for LGBTQ youth in each community. In addition to spreading resources more evenly throughout the state, child welfare policymakers should ensure that information about existing supportive resources is collected and disseminated throughout the state. Each child welfare division in the state should have on hand a statewide resource directory of LGBTQ youth-serving resources. This type of information would fill the gaps in knowledge that currently exist, especially in rural areas, about where resources and supports are located.

Child welfare policymakers should develop a formal mechanism for matching LGBTQ young people with the most appropriate placements. To do so, child welfare policymakers should develop a directory of LGBTQ-affirming placements throughout the system. This would minimize reliance on an individual caseworker's personal knowledge of available placements. This directory should include both family foster placements known to be supportive of LGBTQ people, as well as group home facilities that have the capacity to affirm and protect them.

Adopt Policies and Protocols that Support Statewide Coalitions Between Rural and Urban LGBTQ Youth-Serving Agencies

Build coalitions between rural and urban agencies and organizations.

—Adult participant, Bloomington

Statewide collaborations are needed to fill geographic gaps in supportive services. Establish a statewide task force, network, or committee that addresses LGBTQ issues. Create opportunities for people to gather, network, and develop appropriate services.

—Adult participant, Sacramento

Child welfare policymakers should support the formation of statewide LGBTQ coalitions that include representatives from youth-serving agencies in both rural and urban areas. Statewide LGBTQ task forces provide an effective mechanism for sharing resources, identifying gaps in services, and working as a group to find solutions. By bringing together a range of service providers, administrators, caregivers, and LGBTQ youth in care, existing LGBTQ task forces have been effective in recommending changes to policy and training, developing strategies and specific goals, and implementing change. Every state is encouraged to develop and support a statewide LGBTQ task force to ensure that all young people in care have the same access to supportive services, regardless of where they live.

Next Steps for Child Welfare Practitioners

Adopt Practices that Support LGBTQ Youth in Accessing Support

Child welfare practitioners should commit to ensuring that LGBTQ young people are able to fully participate in any and all services and supports. Those who work with LGBTQ youth in rural areas should be familiar with existing resources in or near their communities, and they should devise transportation plans so youth can access these resources. They should assist young people to locate information about LGBTQ issues on the Internet, acknowledging that these websites are often not accessible on school or library computers. Finally, they should work with their fellow practitioners to identify other LGBTQ youth in the region and to assist these young people to establish peer support networks.

Build a Statewide Coalition of LGBTQ Youth-Serving Agencies

Child welfare practitioners should build a statewide coalition of LGBTQ youth-serving agencies so that information about supportive placements and services can be shared and a network of supportive individuals can be tapped into additional consultation and support. Where such coalitions already exist, as in Colorado, Wisconsin, and Connecticut, child welfare practitioners report a greater sense of connection across county lines and an increased capacity of the system to address gaps in services for LGBTQ youth in rural areas.

For LGBTQ young people in rural places, feelings of isolation and alienation may be even more pronounced than for those in urban areas. These feelings may contribute to a higher risk of negative outcomes. By spreading resources throughout the state and sharing information about existing resources, LGBTQ youth in rural areas are more likely to feel supported and connected to the larger community.

CHAPTER 9

FAITH-BASED CHILD WELFARE SERVICES



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FAITH-BASED CHILD WELFARE SERVICES

The faith-based initiative is bringing more religious and church-affiliated social service providers into the child welfare system, some of which are not at all affirming of LGBTQ people.

—Adult participant, Jacksonville

Religion is an important issue in family foster care. LGBTQ youth placed with fundamentalist foster families often feel they must chose between silence and condemnation.

—Adult participant, Augusta

Support for LGBTQ people is case-by-case; there are supportive caseworkers even at Latter-Day Saints [Mormon] agencies.

—Adult participant, Salt Lake City

The American social service system has historical roots in religious charitable services. The role played by faith-based organizations in providing public social services, including child welfare services, has been greatly expanded in recent years. The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193), a federal welfare reform law, paved the way for giving states more discretion to decide how to use federal funding to administer and provide necessary services, including contracting with charitable, religious, or private organizations to do so. Since then, the “charitable choice” option has been expanded to include additional federal programs, including child welfare services, in what has been called the “Faith-Based Initiative.” Faith-based child welfare agencies now provide services to children and families through contracts with every state in the country. Faith-based service providers play an integral role in all aspects of the child

welfare service system, including foster home recruitment and licensing, the provision of necessary services, and direct case management responsibility.

Not all religions reject LGBTQ people, and not all faith-based agencies are even tied to the religious tenets of the founding or administering church. In fact, many people are motivated by their faith to help LGBTQ young people, and LGBTQ people report feeling welcomed and affirmed within some religious communities. However, religious beliefs may create ideological barriers that undermine the professional obligation to create a supportive system of care for all young people and families. This may also be true for individuals with strong religious convictions who work for public nondenominational child welfare agencies. Because religious beliefs and LGBTQ acceptance can be at odds with one another, LGBTQ youth in very conservative faith-based placements or agencies may feel conflicted and unwelcome.

At worst, religious caregivers refuse to welcome LGBTQ youth into their homes or subject them to harassment and abuse. LGBTQ youth report being pressured by their foster parents or caseworkers to join religious support groups that claim success in altering a person's sexual orientation or gender identity. More often, LGBTQ foster youth are subjected to subtle cues and signals that let them know they are not respected or understood. In order to fit in and avoid any harm, some LGBTQ youth hide their identities from their caseworkers and caregivers or go along with harmful efforts to “convert” them.

What Are the Needs of LGBTQ Youth Within Faith-Based Agencies and Services?

Nonjudgmental Support

In my first group home, the staff sat me down with a big family Bible and described to me why it was wrong to be gay.

—Youth participant

Like all young people in the child welfare system, LGBTQ youth need nonjudgmental support and acceptance from the professionals and caregivers in their lives. Unfortunately, that is not always the case, and may be especially true when faith-based beliefs come into direct conflict with professional or caregiver obligations. During various Listening Forums, LGBTQ young people in both family

foster care and congregate care identified religion and religious beliefs as potential obstacles toward fair and nondiscriminatory treatment.

Some child welfare professionals and foster parents believe that their religion mandates opposition to civil rights protections for LGBTQ people. While a great deal of controversy surrounds this issue, religious belief should never be used as justification for denying supportive services for LGBTQ youth in care, or failing adequately to monitor and protect them. In order to meet the ethical and legal obligations of child welfare professionals and caregivers, there must be a willingness to put religious ideology and judgment in its proper context and do what is necessary to help a child in need.

Freedom from Religious Indoctrination

After coming out to one of my foster families, I was told I was going to hell and forced to go to church with them. I became very closeted after that and didn't tell any other foster families I was a lesbian. I was in 22 different homes; many of them were very religious.

—Youth participant

Young people in foster care want support to express and explore their spiritual development, but often the adults in their lives attempt to force them into a particular belief system that impedes their personal spiritual growth. LGBTQ young people report feeling forced to hide their identities from their foster parents and caregivers and to join religious organizations that condemn homosexuality. Young people in foster care should never feel as though they must choose between being open and supported in their sexual orientation or gender identity, and feeling welcome in a particular placement.

The First Amendment to the U.S. Constitution guarantees the right to religious freedom, which includes the right to be free from religious indoctrination. The right of young people in state custody to religious freedom is violated if they are subjected to indoctrination into a particular religion without their consent or denied free expression of their religious beliefs. Professional practice standards, such as CWLA's *Standards of Excellence* should guide child welfare practitioners, not religious ideology or a desire to indoctrinate a young person into a particular religious belief system.

Next Steps for Child Welfare Policymakers

Issue Statewide Nondiscrimination Policies and Practice Standards

Given the increasing number of faith-based child welfare service providers, there is a dire need for mandatory education and training for everyone in the system, statewide policies protecting LGBTQ people from discrimination and harassment, and support for resolving conflicts between religious beliefs and professional standards of care.

—Adult participant, Jacksonville

Make acceptance of diversity a licensing standard, and do not license foster homes that are not supportive of all youth, including LGBTQ youth.

—Adult participant, Bloomington

The state Department of Human Services and the counties need to issue clear statements against the use of conversion or reparative therapy intended to change a person's sexual orientation or gender identity.

—Adult participant, Denver

Child welfare policymakers should acknowledge that there may be conflicts between religious beliefs and professional expectations, particularly at faith-based child welfare agencies, and issue explicitly clear written policies and guidelines that mandate nondiscrimination and equal and fair treatment for all young people in care, regardless of sexual orientation and gender identity. LGBTQ youth need systems of care in which professional standards are developed based on the needs of children, and not necessarily on religious beliefs.

Uniformity of policy, practice, training, and education would also address the great disparity that currently exists between accepting and non-accepting child welfare practices depending on the particular agency or caseworker. It should be made explicitly clear that statewide directives and practice standards apply to all agencies, including private faith-based agencies providing child welfare services through contracts with the state. These standards should also be

incorporated into the licensing requirements for all foster and group homes operating in the state and enforced by all public and private licensing agents.

There are a host of specific practice areas that should be addressed to ensure that LGBTQ youth are provided with appropriate services and not subjected to indoctrination into a particular religious belief system. For example, there should be a policy in every state prohibiting the use of any so-called “conversion” or “reparative” therapies or strategies intended to change a young person’s sexual orientation or gender identity. LGBTQ young people in the child welfare system should never be subjected to any form of this unethical and damaging practice, or told that they are “going to hell” for being LGBTQ.

Adopt Policies and Protocols that Facilitate Dialogue and Understanding

Bring faith-based agencies together for dialogue on LGBTQ issues, identify model supportive agencies, and examine the harm caused by failing to support LGBTQ youth.

—Adult participant, Salt Lake City

Resources are needed for addressing conflicts between religious beliefs and professional and legal obligations to provide nondiscriminatory and affirming child welfare services; work with affirming churches such as the Metropolitan Community Church and Dignity, the Roman Catholic LGBT organization.

—Adult participant, San Diego

Child welfare policymakers should facilitate dialogue among faith-based service providers on LGBTQ issues. By encouraging networking and other opportunities to share experiences and resources, faith-based agencies can better support one another to engage on LGBTQ issues and create more accepting and affirming systems of care. A number of churches and faith-based organizations were identified at Listening Forums as supportive of LGBTQ people. These organizations can serve as role models and mentors for agencies struggling with bridging the gap between religious ideologies and professional standards.

Mandate Training and Competency on LGBTQ Issues for Child Welfare Staff and Foster Parents

Training and education is needed for everyone in the system that LGBTQ issues are not moral issues.

—Adult participant, Salt Lake City

Training and education on sexual orientation and gender identity are also critically important. Child welfare policymakers should be sure that it is offered to everyone involved with the child welfare system. In order to dispel ignorance and misunderstanding, and to encourage adherence to existing professional practice standards, information and guidance should be provided throughout the system. Training and support geared specifically for faith-based child welfare service providers should also be made available.

Encourage an Examination of Personal Beliefs

Child welfare policymakers should support practitioners to examine their own anti-LGBTQ biases and religious beliefs, encourage reflection on attitudes and behaviors, and, when necessary, support practitioners to seek outside support and consultation if such biases and beliefs prevent the practitioner from providing equal treatment and protection from harm.

Next Steps for Child Welfare Practitioners

Examine Personal Beliefs

Child welfare practitioners should examine their own anti-LGBTQ biases and religious beliefs and, when necessary, seek outside support and consultation if such biases and beliefs prevent them from providing professional care and protection from harm. Child welfare practitioners should be aware that unexamined anti-LGBTQ beliefs may create barriers to meeting the professional and ethical obligations to young people in the child welfare system. They should affirm that all youth in care deserve safe living environments and that harassment, humiliation, and abuse of any child, even if based upon religious beliefs, are not acceptable practice.

Child welfare professionals should place the needs of their clients above their own spiritual or religious beliefs. By understanding the professional

obligation to provide safe and nondiscriminatory care and what that entails in working with LGBTQ young people, practitioners can put in proper context the role of religious belief.

Adopt Practices that Take Religious Attitudes into Account in Placement Decisions

Child welfare practitioners should consider the religious beliefs of a prospective caregiver prior to placing an LGBTQ youth. Where there are strong religious beliefs against LGBTQ people, practitioners should assess whether conflicts may arise as a result, and the physical or emotional safety of an LGBTQ young person may be jeopardized.

Reach Out to Affirming Religious Communities

Religious communities are often a source of support for young people in the child welfare system. Some actively encourage their members to become foster parents and mentors for young people. Child welfare practitioners should reach out to religious communities that promote acceptance of LGBTQ people to recruit prospective caregivers for LGBTQ young people. Practitioners should also keep in mind that LGBTQ young people themselves may be members of religious communities that may provide a source of support and placement. They should assist LGBTQ youth to access religious and spiritual supports and services in their communities, even if they are different from their own.

Assist Foster Families to Understand the Line Between Their Obligations as Caregivers and Their Personal Religious Beliefs

Child welfare practitioners should offer guidance to foster families in meeting their obligations as caregivers while respecting their religious beliefs. Where there are conflicts, child welfare practitioners should be prepared to assist foster families to navigate this challenge. Practitioners should advocate for LGBTQ youth in their foster placements and ensure that they are safe and welcome.

The Faith-Based Initiative has increased the role religious organizations play in the provision of child welfare services in the United States. The religious

beliefs and tenets of some faith-based organizations regarding sexual orientation and gender identity may be in direct conflict with the professional obligation to provide appropriate, safe, and affirming care to all young people. These conflicts are not insurmountable, however. By adhering to state policy and professional standards, encouraging open dialogue, and participating in training and education, faith-based social services can be effective resources for LGBTQ youth in care.

References

The Personal Responsibility and Work Opportunity Reconciliation Act. (1996) H.R 3734, 104th Congress, 2nd Session, P.L. 104-193.

CHAPTER 10

ADULTS INVOLVED WITH THE CHILD WELFARE SYSTEM



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ADULTS INVOLVED WITH THE CHILD WELFARE SYSTEM

Prospective LGBT foster parents are often afraid to come out because they do not want to risk being denied a foster care license. They fear that they will be seen as “recruiting” youth to be gay if they are open, affirming, and embracing of LGBTQ youth issues.

—Adult participant, Tucson

The first person assigned to do independent living programs in my county was gay, and he really led the way to forming an LGBT association and specific services for LGBT youth. That spoke highly of the administration, because they were quite aware of this situation, and it has helped us work on this issue.

—Adult participant, Denver

The child welfare system is built on the strengths and talents of the adults who work within it. But like LGBTQ youth in care, the adults who identify as lesbian, gay, bisexual, or transgender often encounter discrimination and obstacles to supporting LGBTQ youth. Likewise, there are many non-LGBTQ adult allies who want to provide supportive care for LGBTQ youth but who face similar obstacles. These include a dearth of policies to support their efforts; opposition from employers, policy-makers, community members, or parents of LGBTQ youth; legal restrictions; and a lack of resources.

While constitutional guarantees prohibit discrimination against LGBT people in public employment, currently there is no federal law protecting individuals from job discrimination in private employment. In many states, qualified,

hardworking Americans can be denied job opportunities, fired, or otherwise discriminated against because of their actual or perceived sexual orientation or gender identity. A few examples:

- A married, heterosexual Kansas man was refused a teaching job because a school employee suggested that he might be gay (Human Rights Campaign, 2002).
- A highly regarded child welfare youth counselor in Georgia was fired when the agency she worked for discovered she is a lesbian (Lambda Legal, 2002).
- A lesbian counselor working for a publicly funded child welfare provider in Kentucky was fired because her homosexuality violated the “Christian” values on which the agency was based (American Civil Liberties Union, 2000).

A growing number of states and municipalities have passed legislation prohibiting discrimination in the private workplace against LGBT people. Child welfare systems must acknowledge that one’s sexual orientation or gender identity should never be the basis for discriminating against qualified adults seeking to serve young people.

What Are the Needs of Adults Involved with the Child Welfare System Towards Providing Supportive Care for LGBTQ Youth?

Nondiscrimination in the Workplace

Many individuals and agencies are afraid to call attention to LGBTQ foster care issues because it may cause personal and professional backlash.

—Adult participant, Salt Lake City

There’s a feeling as though it is not safe to be openly gay in foster care. There are fears of being fired or losing a foster care license.

—Adult participant, Ft. Lauderdale

Social workers' attitudes can be terrible. Some make fun of other social workers who support gay youth, saying, "Oh, you must be gay too. Do you have a lot of gay kids on your caseload?"

—Youth participant

The child welfare field is blessed with many caring and competent adults who have a strong desire to support LGBTQ youth in care. But this can be a daunting task if there exists the threat of losing one's job or incurring other forms of harassment or retribution for supporting LGBTQ youth. Many of the responses from adults who participated in the Listening Forums centered on societal anti-LGBTQ attitudes and how they infiltrate child welfare practice. Words such as "fear" and "bias" were spoken with great frequency when participants were asked what prevents more adults from acting as role models or even offering visible support for LGBTQ youth. As a participant in Hartford reported, "Homophobia, and fear on the part of adults of being perceived as LGBTQ simply because you offer sensitivity and support to LGBTQ youth" are significant obstacles to adult involvement on behalf of LGBTQ youth.

Adults who work in the child welfare system need to feel safe from harassment and discrimination from employers and colleagues so that they can be visible advocates for LGBTQ youth. Having adult role models who show support is critical for every youth in care. Yet the fear of retribution or ostracism that many child welfare professionals experience keeps them from serving as the role models and advocates LGBTQ youth in care need. This holds true for those who self-identify as LGBT as well as for non-LGBTQ allies who wish to show support for LGBTQ youth.

Since 2003, California's Foster Care Nondiscrimination Act (2003) specifically protects both youth and adults involved in the child welfare system from discrimination based on sexual orientation and gender identity. While this is a very important law, it is only the beginning of efforts to shape the attitudes of those involved in the child welfare system toward being more supportive of LGBTQ youth. As an adult in Sacramento stated, "Individual biases are more pervasive than the overall bias of the system as a whole." This statement underscores the perception that anti-LGBTQ attitudes are sometimes impervious to legal protections and that these attitudes continue to impede adults' abilities to provide supportive care for LGBTQ youth.

In states without specific nondiscrimination policies or legislation, this perception is magnified. For example, not feeling safe was identified as a serious impediment in Tucson, where a participant noted a “fear of exclusion by colleagues, supervisors, and agency directors.” A “lack of empathy from colleagues” makes it very difficult for those who wish to support LGBTQ youth to do so.

Freedom from False Stereotypes

There is a stereotype that LGBT adults are a risk to kids, and this results in fears of false allegations of abuse against LGBT staff and foster parents.

—Adult participant, Denver

Gay male foster parents and childcare workers may feel especially vulnerable to the risk of false accusations of sexual abuse.

—Adult participant, Jacksonville

I got really close with a staff member who was sensitive about the fact that I was queer, and then her supervisor made it so that I could no longer talk to her because he thought that the relationship was getting inappropriate. There was nothing inappropriate; it's just that I found someone who would support me.

—Youth participant

A lot of people think that offering kids information is going to make them gay or transgender, or whatever. But that's not the way it is. It's about giving them information.

—Youth participant

Another impediment to the support many child welfare professionals would like to offer LGBTQ youth is based on the mythology that LGBT adults are more likely to sexually abuse children than non-LGBTQ adults. While empirical evidence refutes this assertion, the perception that it is true is enough to prevent many adults from offering support to LGBTQ youth. Beyond such false stereotypes, Forum participants expressed concerns that they are seen as trying to

influence a young person's sexual orientation or gender identity if they show support for them. Adults who care for LGBTQ youth need to be able to give these young people nonjudgmental support and age-appropriate information without fear of being accused of acting improperly.

There is a fear that by showing support, adults will be perceived by others as having influenced a young person to become LGBTQ.

—Adult participant, Minneapolis

Freedom from Restrictions on LGBT Foster and Adoptive Parents

Homophobia, ignorance, and misunderstanding are common, making it difficult for LGBT people to become and remain foster parents.

—Adult participant, Hartford

Some LGBT people fear that, even if they are legally allowed to foster and adopt, caseworkers will create obstacles for them based on bias against LGBT parents.

—Adult participant, New York City

There is a need for policies that protect LGBT child welfare employees and foster parents from discrimination and harassment so that they will feel safe showing support for LGBTQ youth.

—Adult participant, Jacksonville

We need to make the necessary regulatory changes to ensure equal and fair treatment of LGBTQ people by DHS and its contract agencies.

—Adult participant, Philadelphia

In order to dispel widespread misinformation, there is a need for an explicit policy statement from the state agency that says approved LGBT adults can serve as foster and adoptive parents. The state should distribute this policy

statement throughout the system and require that all private contract agencies abide by it.

—Adult participant, Tucson

Policymakers in all states recognize the significant challenges faced by child welfare professionals in their efforts to find safe and stable homes for youth in care. Yet many Forum participants reported significant barriers to the recruitment of supportive foster and adoptive families for LGBTQ youth. The result is that an already small pool of prospective foster and adoptive families, not just for LGBTQ youth but for all youth in care, is made even smaller. For example, Florida is the only state that outright bans gay and lesbian adults from adopting children. Utah limits foster and adoptive parenting only to single people and married couples, and since LGBT people cannot marry, same-sex couples cannot serve as foster or adoptive parents. Nebraska’s restriction on foster parenting by LGBT adults was put in place via a memorandum written by its former child welfare commissioner, but never formally promulgated in policy or regulation.

Most states, however, have been moving in the opposite direction and have opposed or struck down such bans. For example, in 2006, a trial court judge in Missouri ruled in favor of a Missouri lesbian couple that had been denied a foster care license based on that state’s “unwritten rule” excluding LGBT adults from serving as foster parents. The state of Texas tried and failed in its 2003 and 2005 legislative sessions to pass bills that would exclude LGBT adults from becoming foster and adoptive parents. In 2004, a trial court judge in Arkansas struck down a state regulation that banned gay people and anyone living in a household with a gay adult from being foster parents in that state. The state appealed the decision to the state Supreme Court, where CWLA and Lambda submitted amicus briefs, joined by other national and Arkansas-based organizations, in support of permanently overturning the ban. At the time of publication of this report, that case has not been decided.

Statements attesting to the frustration many adults feel about these restrictions were made repeatedly throughout the Forums in Florida. These Forums were attended by gay men and lesbians who are currently serving as foster parents and who would love nothing more than to offer their foster children a permanent home through adoption. Forum participants also mentioned the “perception in the state that gay and lesbian people are not allowed to foster

[due to the adoption ban], and that not enough is being done to dispel that myth.” These policies are seen as primary barriers to bringing more caring adults into the child welfare system. The ban on gay and lesbian adoption in Florida, as well as the desire to make sure child welfare policy is premised on facts and not bias, prompted CWLA to issue a formal policy statement expressing its unequivocal support for gay and lesbian adults who seek to offer homes to children in the custody of the child welfare system (CWLA, 2005). There is a strong need for clearly stated policies that support LGBT adults’ efforts to form families through foster and adoptive parenting. Some states and cities where Forums were held, including California, Connecticut, Arizona, Philadelphia and New York City, have already adopted or are in the process of adopting such policies that clarify the important role that LGBT adults can play in the child welfare system, a role that includes their ability to serve as parents to children in care.

Best Practice Standards and Guidelines

There is a lack of professional standards and supports for navigating professional boundaries while acting as a role model and mentor.

—Adult participant, New York City

We need to develop and distribute national standards, best practice guidelines, and model nondiscrimination policies throughout the system.

—Adult participant, Sacramento

Adults who work in the child welfare system need to have practice standards on which they can rely to guide their care of LGBTQ youth. Child welfare has long been built on the foundation of sound practice standards. Best practice models and standards such as CWLA’s *Standards of Excellence in Child Welfare* have been important guides in the field. The need for sound best practice models and accountability standards specific to working with LGBTQ young people was expressed at nearly every Forum. (See the Conclusion of this report for information on the Model Standards Project’s *Best Practice Guidelines for Serving LGBTQ Youth*, to be published by CWLA in 2006.)

Next Steps for Child Welfare Policymakers

Adopt Nondiscrimination Policies and Protocols to Protect Adults who Wish to Support LGBTQ Youth

Child welfare policymakers should develop new, or adapt existing, nondiscrimination policies to include protection for employees based on their actual or perceived sexual orientation and gender identification. Only when employees feel secure that their desire to support LGBTQ youth will not lead to negative action against them will they feel safe enough to be the role models and mentors LGBTQ youth in care need. Child welfare policymakers should develop policies that expressly support and encourage all staff to provide competent care for LGBTQ youth.

Adopt Accountability Standards

There needs to be someone or someplace to go in order to ensure accountability and that professional standards of care are being followed at private agencies receiving DCF funding.

—Adult participant, Ft. Lauderdale

Child welfare policymakers should adopt accountability standards and zero-tolerance policies prohibiting staff from harassing or abusing other staff members or agency clientele based on their actual or perceived sexual orientation or gender identity. They should establish grievance procedures for when such harassment or abuse occurs, and take corrective action against any staff member who violates these policies.

Advocate for Legal Protections for Child Welfare Professionals

Child welfare policymakers should participate in public policy advocacy to establish legal protections for workers and foster parents based on their actual or perceived sexual orientation and gender identity.

Adopt Policies and Protocols that Support Qualified LGBT Adults who Wish to Become Foster or Adoptive Parents

The system needs to address the institutional ways in which LGBTQ youth and adults are made to feel excluded, such as through foster care license applications that presume heterosexuality. Unlike for other populations, there is a complete absence of formal policies and procedures on this issue, and no accreditation standards that address LGBTQ competency.

—Adult participant, Tucson

Child welfare policymakers should publicly support LGBT foster and adoptive parent applicants and outreach efforts to recruit them. They should take a public stand against restrictive policies or legislation that seek to limit the ability of LGBT adults from becoming foster and adoptive parents.

Child welfare policymakers should review and become familiar with the ample social science research, conducted over the last 30 years, demonstrating the fitness of gay and lesbian parents to raise children, whose outcomes are the same as those of children raised by heterosexual parents. They should base their policies on this substantial body of social science research and not on unproven assumptions.

Child welfare policymakers should review all existing foster and adoptive parent application forms to ensure inclusion of LGBT applicants through the use of gender-neutral language. For example, rather than identifying prospective applicants as “mother” and “father,” application forms should use terms like “parent #1” and “parent #2.”

Follow Best Practice Standards and Models

Child welfare policymakers should adopt existing best practice standards to guide their staffs’ efforts to support LGBTQ youth in care. They should disseminate these best practice standards throughout their programmatic networks and train their staffs to implement them when working with LGBTQ youth. Child welfare policymakers should ensure that nondiscrimination policies and best practice standards are consistently applied throughout their entire network of care.

Next Steps for Child Welfare Practitioners

Adopt Practices that Support Adult Mentors and Role Models for LGBTQ Youth

Child welfare practitioners, whether LGBT or not, should express open willingness to support LGBTQ youth in care and LGBT colleagues and foster and adoptive parents. They should act as role models and mentors for LGBTQ youth in care. Child welfare practitioners should report any harassment or abuse targeted at themselves, other staff, or agency clientele to the agency's administration and encourage the administration to initiate corrective action against the perpetrators.

Adopt Practices that Support Prospective Foster and Adoptive Parents for LGBTQ Youth

Child welfare practitioners should work closely with prospective foster and adoptive families to assess their willingness and competence to care for LGBTQ youth. They should encourage and assist those families willing and qualified to provide care for an LGBTQ youth. They should refuse to place an LGBTQ youth with any family who would seek to try to change the youth's sexual orientation or gender identity. Child welfare practitioners should assure LGBTQ youth that they will work to find a family that is supportive of their sexual orientation or gender identity and will not tolerate mistreatment or attempts by a prospective foster or adoptive family to change their sexual orientation or gender identity.

Adopt Practices that Support Prospective Foster and Adoptive Parents who Are LGBT

Child welfare practitioners should treat LGBT applicants to be foster care or adoptive parents with the same respect and competence they treat non-LGBT applicants. They should make the best possible match between youth and adult, based solely on the prospective parent's ability to provide love and care for a specific child and not on any particular ideology or viewpoint.

Adhere to Best Practices Standards and Models

Child welfare practitioners should adhere to best practice standards for working with LGBTQ youth in care. They should encourage their supervisors and policy-makers to offer the training and technical supports they will need to implement

best practice standards when working with LGBTQ youth. Child welfare practitioners should develop competency to address issues of sexuality and gender identity with their clients and to serve as supportive role models and mentors for youth who are struggling with issues related to their sexual orientation or gender identity.

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CHAPTER 11

THE UTILITY OF THE REGIONAL LISTENING FORUMS FOR POLICY, PRACTICE, AND RESEARCH: A TRIPOD




CHAPTER 11

THE UTILITY OF THE REGIONAL LISTENING FORUMS FOR POLICY, PRACTICE, AND RESEARCH: A TRIPOD

By A. Chris Downs, Ph.D.

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Child welfare research, policy, and practice regularly exist in isolation from each other (Nollan and Downs, 2001). Researchers often develop testable theories and hypotheses about child welfare phenomena, conduct their research, and then publish their findings in academic journals. Unfortunately, results rarely reach audiences most likely to benefit from them, including practitioners or policymakers.

Policymakers are responsible for setting standards of practice and models of excellence. Such standards can be set at local, county, state, and federal levels and impact children throughout the child welfare system. But these standards are often based on speculation, not evidence, and rarely include the voices of youth or practitioners in their development (Nollan and Downs, 2001).

Practitioners deliver child welfare services, and many, such as Child Protective Services (CPS) and direct care workers, often have high caseloads and difficult work circumstances. Yet practitioners, caregivers, and youth best understand the “on-the-ground” experiences of child welfare phenomena. They live the experiences on a daily basis.

The experiences of particular subpopulations of foster youth, such as LGBTQ youth in care, have been documented in a variety of sources ranging from books, articles, and academic papers, to reports of CPS and direct care workers, to testimonials from LGBTQ youth themselves. These experiences rarely become the grist for: (a) researchers’ testable hypotheses about the causes, effects, or commonality of these experiences; or (b) policymakers’ revisions to or creation of models of practice.

Practice, policy, and research are three legs of a tripod. In isolation they serve and inform only their own constituents: researchers inform other researchers and academics; policymakers inform other policymakers, politicians, and public officials; and practitioners inform each other about best practices. Taken together, these three aspects of child welfare form a tripod of knowledge. When practice, research, and policy inform themselves and each other, they jointly create momentum unattainable by any one or two of the three (Nollan and Downs, 2001).

What sets the CWLA/Lambda Regional Listening Forums apart from the other sources of information about the experiences of LGBTQ youth in care is the project's scope. More than a dozen of these Forums were held in every region of the country and were attended by several hundred people, including LGBTQ youth and the child welfare professionals who work most closely with them. Casey Family Programs was instrumental in the planning of two of these Forums, one of which was presented as a preconference institute prior to the 2004 Casey Family Programs "It's My Life" conference in Sacramento, California. It is essential that this report be read, and applied, by researchers (and consequently academics) and by policymakers, as well as by those who provide care to children, youth, and families. This project's findings are compelling and will have obvious practice value because they come from practitioners, youth, and caregivers directly involved with the delivery of services for LGBTQ youth.

Whether your contributions to the child welfare system are as a policymaker, a practitioner, or a researcher, the information contained in this comprehensive report will increase your understanding of the issues facing LGBTQ foster youth. As a research psychologist with a long history in child welfare policy and practice, I can attest that the experiences of LGBTQ youth in care as highlighted in this report will motivate your desire to improve the lives of these historically underserved children.

The authors believe, as do we at Casey Family Programs, that it is the responsibility of all concerned with child welfare to link practice with research and policy so that we can all work together toward a system of care this is more competent in its support of LGBTQ youth. The child welfare community should include researchers, academicians, policymakers, and practitioners, as well as those involved with education, health, and the law.

In my experience as a research psychologist, the fastest way to attract researchers' attention to practice findings is to generate a series of testable

hypotheses. Both students and research professionals appreciate concrete statements emanating from reports from practitioners that can be subjected to empirical, scientific scrutiny. In that spirit, I have generated a series of such statements or hypotheses. They should be seen as statements, derived from some of the commentaries and data, which researchers can use to conduct future empirical investigation.

Examples of Testable Hypotheses

- LGBTQ youth living in environments that are not accepting of their sexual orientation and/or gender identity will have lower self-esteem compared with non-LGBTQ youth or LGBTQ youth living in more accepting environments.
- LGBTQ foster youth reared in conservative faith communities will have lower self-esteem compared with non-LGBTQ youth or youth reared in liberal faith communities.
- Adults with the highest rates of homophobia are more likely to be in:
 - states without any legal protections for LGBTQ people,
 - homes where sexuality information and education are relatively absent.
- LGBTQ foster youth who feel as though they “matter” are less likely to attempt suicide than those who think they do not matter.
- LGBTQ foster youth who have a sense of hope for the future are more likely, than peers who have less hope for the future, to:
 - thrive in school,
 - have stronger friendships,
 - have more developed identities, and
 - achieve independence earlier.
- Foster youth who connect with an LGBTQ school or community organization, such as a GSA, will be better able to combat homophobia and transphobia than those who do not have such connections.

- LGBTQ foster youth do better on functional outcomes when they live with LGBT foster parents compared with LGBTQ youth who live with non-LGBT foster parents.
- LGBTQ youth in foster care do better when they remain in a stable foster care placement compared with youth who are returned to their families of origin, especially if those families are not LGBTQ-affirming.
- LGBTQ foster youth are more likely to engage in “survival sex” than non-LGBTQ foster youth.
- LGBTQ foster youth are less likely than non-LGBTQ foster youth to graduate from high school.
- LGBTQ foster youth are more likely to report incidents of verbal and physical violence and harassment as compared to their non-LGBTQ peers.
- LGBTQ foster youth are stereotyped by their caseworkers.
- Caseworkers who take LGBTQ-sensitivity training will engage in less LGBTQ stereotyping as compared with caseworkers who do not receive this training. This difference will be found both at the conclusion of the training and at a later point post-training.
- LGBTQ youth are less welcome in overnight and temporary shelters than non-LGBTQ peers.
- Foster care placement rates for LGBTQ youth are higher (that is, less stable) than placement rates for non-LGBTQ youth.
- LGBTQ foster youth have fewer opportunities to learn life skills and independent living from child welfare systems than non-LGBTQ youth.
- Stereotypes about LGBTQ people are as prevalent in child welfare systems as they are in general society.
- LGBTQ foster youth have less optimal sex education compared with non-LGBTQ foster youth.

Clearly, there are many more testable research hypotheses than could be listed here. The essential point is that practitioners, policymakers, and researchers must attend to one another’s work. When they do, everyone benefits—especially the youth we hope to jointly serve.

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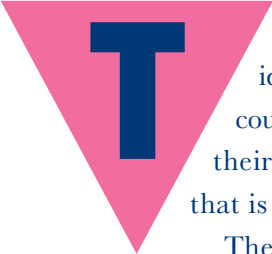
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CONCLUSION



CONCLUSION



The ideas and strategies profiled in this report are those that were identified by the hundreds of individuals from every region of the country who came together at the Regional Listening Forums to offer their experiences, insights, and hopes for creating a child welfare system that is more compassionate and competent in its care of LGBTQ youth.

The Forum participants offered compelling firsthand accounts and practical information about the child welfare system and its treatment of LGBTQ youth. Much has improved over the last several years, but clearly much remains to be done before LGBTQ youth are made to feel safe, affirmed, and respected by the system charged with their care.

More resources that are designed to assist child welfare professionals to meet the needs of LGBTQ youth exist than ever before; some of these have been mentioned in this report. These resources include those developed by the Gay, Lesbian, and Straight Education Network (www.glsen.org) and the Safe Schools Coalition (www.safeschoolscoalition.org), as well as the studies contained in the special LGBTQ edition of the *Child Welfare Journal* (March/April 2006) and the LGBTQ Toolkit that is currently in development by the CWLA/Lambda Joint Initiative. Casey Family Programs has developed an LGBTQ Supplement to its Ansell-Casey Life Skills Assessment, designed to support foster youth as they prepare for independent living (www.caseylifeskills.org).

Policy statements that support LGBTQ youth and families have been issued by such leading national organizations as CWLA, the National Association of Social Workers (www.naswdc.org), the North American Council on Adoptable Children (www.nacac.org), the American Psychological Association (www.apa.org), and the American Academy of Pediatrics (www.aap.org). States and localities have also issued public policy statements and practice guides, including those developed by Connecticut, Illinois, Philadelphia, and New York City. True Colors, Inc. (www.ourtruecolors.org), in Connecticut, and Life Works, Inc. (www.lifeworksmentoring.org), in Los Angeles, have developed mentoring programs for LGBTQ youth. True Colors has also developed comprehensive

training tools on LGBTQ issues, as has the GLBT Youth Support Project in Massachusetts (www.hcsm.org/glys/glys.htm) and Lifespan Education in Washington State (www.lifespaneducation.com).

Residential group homes designed for LGBTQ youth currently operate in Los Angeles through Gay and Lesbian Adolescent Social Services (www.glassla.org), New York City through Green Chimneys (www.greenchimneys.org), Boston through The Home for Little Wanderers (www.thehome.org), Philadelphia through Lutheran Children and Family Services (www.lcfsinpa.org), and Detroit through the Ruth Ellis Center (www.ruthelliscenter.com).

Two projects were developed in 2006 that seek to provide resources and support for those working in the dependency court and juvenile justice systems. The American Bar Association's Center on Children and the Law (<http://www.abanet.org/child/home2.html>) has developed the "Opening Doors Project" to increase awareness and understanding of LGBTQ youth issues among those working within the dependency court system. Legal Services for Children, the National Center for Lesbian Rights and the National Juvenile Defender Center have joined forces to develop "The Equity Project" (www.equityproject.org) in order to assist the juvenile justice system in better attending to the needs of LGBTQ youth.

In 2006, CWLA will publish *Best Practice Guidelines for Working with LGBTQ Youth in Care* to assist child welfare professionals in their efforts to support these young people. The *Best Practice Guidelines* have been developed through a collaboration known as the Model Standards Project (MSP) coordinated by Legal Services for Children and the National Center for Lesbian Rights, both based in San Francisco, California, in consultation with youth, juvenile court advocates, child welfare and juvenile justice professionals, researchers, and providers of health, mental health, and educational services.

The *Best Practice Guidelines* cover a wide range of topics, including creating an inclusive and respectful culture; developing prevention, reunification, permanency, and transition services sensitive to the needs of LGBTQ youth; recruiting and retaining competent caregivers; training and supervision of workers, staff, and caregivers; confidentiality and privacy issues; supporting healthy adolescent development; providing appropriate individualized placements; ensuring the safety and well-being of LGBTQ youth in group care settings; and providing inclusive health, mental health, and educational services. An online version of the *Best Practice Guidelines* will be available through the websites of Legal Services

for Children (www.lsc-sf.org) and the National Center for Lesbian Rights (www.nclr.org). A print version will be available through CWLA. Child welfare professionals are strongly encouraged to avail themselves of this resource to put into practice the sentiments expressed by participants in the Regional Listening Forums and the recommendations contained in this report.

No public or private child welfare agency should feel a need to “reinvent the wheel” with regard to the development of policies, training initiatives, and the provision of competent services for LGBTQ youth. Model policies supporting LGBTQ youth and the adults who serve them already exist in numerous child welfare agencies around the country. Comprehensive training models for increasing understanding of LGBTQ issues are readily available and services designed with the specific needs of LGBTQ youth in mind are now in operation in many states. Child welfare policymakers and practitioners who want to implement the recommendations in this report will find ongoing support from CWLA and Lambda, and from any number of the organizations mentioned in this report.

For more information about the CWLA/Lambda Joint Initiative, or to learn more about existing supportive resources for LGBTQ youth and families, please visit the LGBTQ link within the CWLA website at www.cwla.org/programs/culture/glbqtq.htm or Lambda’s website at www.lambdalegal.org/cgi-bin/iowa/issues/record?record=25.

APPENDIX A-1

ADULT INVITATION, AUGUSTA, ME



September 30, 2004

Re: Invitation to participate in December 2, 2004 Listening Forum in Augusta, Maine addressing the needs of LGBTQ young people and adults involved in the child welfare system

Dear Colleague:

On behalf of the Child Welfare League of America (CWLA) and Lambda Legal Defense and Education Fund we invite you to participate in a Listening Forum on Thursday, December 2, 2004, from 3:00 – 7:00 p.m., addressing the needs of lesbian, gay, bisexual, transgender, and questioning (“LGBTQ”) young people and adults involved in the child welfare system. This event will be hosted at the Unitarian Universalist Community Church, 69 Winthrop Street, Augusta, Maine 04330. The Listening Forum will give you and other professionals and foster and adoptive parents who work with LGBTQ young people in the child welfare system an opportunity to share your experiences, concerns and suggestions for improving care for our underserved LGBTQ youth.

Overview of the CWLA/Lambda Joint Initiative:

CWLA and Lambda have joined together in a project to help child welfare and foster care systems change the way they serve LGBTQ people. For too long, LGBTQ young people have been ignored, misunderstood, or worse yet, victimized

by the systems intended to protect them. Our Joint Initiative assists child welfare agencies to better serve LGBTQ young people as they transition from foster care to adulthood, and to better support LGBTQ adults who care for these young people. CWLA and Lambda are each national leaders in their fields. CWLA is the country's oldest and largest advocate for children and youth, and has a membership of nearly 1,200 public and private agencies, including every state child welfare system. Lambda is the country's oldest and largest civil rights organization for people who are LGBT or living with HIV and AIDS, and has done groundbreaking work on foster care, including in its 2001 publication *YOUTH IN THE MARGINS: A Report on the Unmet Needs of Lesbian, Gay, Bisexual, and Transgender Adolescents in Foster Care* (can be downloaded free-of-charge at www.lambdalegal.org/cgi-bin/iowa/documents/record?record=899). Through our Joint Initiative, CWLA and Lambda have joined forces to improve the situations of LGBTQ young people, family members, and staff involved in child welfare systems.

Our national project engages the range of people involved in the child welfare system, from LGBTQ young people themselves, to child welfare experts, foster and adoptive parents, faith-based providers, caseworkers, and administrators. CWLA and Lambda draw on real life experiences and insights through a National Advisory Network and through Regional Listening Forums that are being held around the country. We are responding to the concerns, gaps and solutions that are identified with resources for child welfare systems to serve LGBTQ youth, including training materials, model programs, practice guidelines, and advocacy tools.

For more information on CWLA and our CWLA/Lambda joint initiative, please visit the website: www.cwla.org/programs/culture/glbqtq.htm.

The Augusta, Maine Listening Forum:

The Listening Forums are designed to provide an opportunity for groups of approximately 20 to 40 LGBTQ youth in care, and the adults who work with them, to share their experiences, concerns and suggestions. The stories we hear and the suggestions we collect at the Listening Forums will be published in a report that will be a resource for understanding, supporting, and advocating for

LGBTQ youth in care. We hope that a blueprint for creating a more LGBTQ-friendly youth service environment in each community will emerge from each Listening Forum. Listening Forums have been held across the country in places like Denver, Minneapolis, Jacksonville, Philadelphia, Salt Lake City and Tucson.

The session will include youth and adults with a range of experiences and perspectives, including foster and adoptive parents, direct congregate care staff, caseworkers, trainers, health care professionals, agency administrators, and those who represent both private and government agencies. We have attached an agenda-in-progress to give you a clearer picture of the issues we ask you to join in addressing. We would be delighted if you would participate and share your experiences and ideas for how to improve services to our young people. We are eager to learn from your work, and to share what we learn with the larger community. We want your voice to be heard. We very much hope you will be able to attend.

If you are able to attend, please RSVP to Peter Karys at Lambda by calling toll-free 866-LGBTeen (866-542-8336), ext. 272 (350 after-hours), or by email at pkarys@lambdalegal.org.

Please help us by distributing the enclosed letter and flyer to LGBT young people that you know, and the adults who work with them.

Please bring your valuable perspective on how our foster care systems can better serve LGBTQ youth. Add your voice to those concerned with addressing the needs of LGBTQ youth and adults involved in the child welfare system.

Very truly yours,

Rudy Estrada
Foster Care Project Attorney
Lambda Legal Defense and Education Fund

Rob Woronoff, MS
LGBTQ Program Director
Child Welfare League of America

APPENDIX A-2

YOUTH INVITATION, SALT LAKE CITY, UT



September 23, 2004

Dear Young Person:

Are you lesbian, gay, bisexual, transgender, or questioning (“LGBTQ”), and involved in the child welfare system? Have you felt ignored, misunderstood, or discriminated against by the adults who were supposed to help you? Have you found allies in the child welfare system who were able to support you for who you are? Do you have ideas how to make life better for LGBTQ youth and adults in the system? We want to hear what you have to say!

On behalf of the Child Welfare League of America (CWLA) and Lambda Legal Defense and Education Fund (Lambda) we invite you to participate in a Salt Lake City-area Listening Forum on the needs of LGBTQ young people and adults involved in the child welfare system. The Listening Forum will give you and other LGBTQ young people and their allies an opportunity to share your experiences, concerns and suggestions for improving foster care and child welfare services for LGBTQ youth. This event is free-of-charge.

Friday, October 22, 2004

3:00 p.m. – 6:00 p.m.

At the Department of Human Services (DHS)

Administrative Building

120 North 200 West, Room 304

Salt Lake City, Utah

If you are able to attend, please RSVP to Melissa Larsen at the Gay and Lesbian Community Center of Utah at 801-706-9168, or by email at melissalarsen2003@yahoo.com.

Overview of the CWLA/Lambda Joint Initiative:

CWLA and Lambda have joined together in a project to help child welfare and foster care systems change the way they serve LGBTQ people. For too long, LGBTQ young people have been ignored, misunderstood, or worse yet, victimized by the systems intended to protect them. Our Joint Initiative assists child welfare agencies to better serve LGBTQ young people as they transition from foster care to adulthood, and to better support LGBTQ adults who care for these young people. CWLA and Lambda are each national leaders in their fields. CWLA is the country's oldest and largest advocate for children and youth, and has a membership of nearly 1,200 public and private agencies, including every state child welfare system. Lambda is the country's oldest and largest civil rights organization for people who are LGBT or living with HIV and AIDS, and has done groundbreaking work on foster care, including in its 2001 publication *YOUTH IN THE MARGINS: A Report on the Unmet Needs of Lesbian, Gay, Bisexual, and Transgender Adolescents in Foster Care*. Through our Joint Initiative, CWLA and Lambda have joined forces to improve the lives of LGBTQ young people, family members, and staff involved in child welfare systems.

The Salt Lake City Listening Forum:

We are holding Listening Forums for groups around the nation of approximately 20 to 40 LGBTQ youth and the adults who work with them to share their experiences, concerns and suggestions. The stories we hear from you and the suggestions you make will be published in a report that will be a resource for understanding, supporting, and advocating for LGBTQ youth in care. We hope that a blueprint for creating a more LGBTQ-friendly youth service environment in each community will emerge from each Listening Forum.

We would like to hear from you what has helped you most, where the system has let you down, and what you would like to see changed. We have attached an agenda-in-progress to give you a clearer picture of the issues we ask you to

join in addressing. We would be delighted if you would participate in the youth session and share your experiences and ideas for how to improve services to our young people. We want your voice to be heard.

We very much hope you will be able to attend. The Listening Forum will include with a free meal and an opportunity to get to know other LGBTQ young people and their allies, followed by group discussions. We would be happy to give you more information about our Joint Initiative and the Listening Forum if you would like to call Lambda's toll-free line at 1-866-LGBTTeen (1-866-542-8336), extension 272. You can read Lambda's foster care report at the website, www.lambdalegal.org. For more information about CWLA and to learn more about our work, please visit the website, www.cwla.org.

Your perspective matters most. Please add your voice to those concerned with making sure that LGBTQ young people involved in the child welfare system receive the respect and the support you deserve.

Very truly yours,

Rudy Estrada
Foster Care Project Attorney
Lambda Legal Defense and Education Fund

Rob Woronoff, MS
LGBTQ Program Director
Child Welfare League of America

APPENDIX A-3

YOUTH FLYER, MINNEAPOLIS, MN

Twin Cities Listening Forum on LGBTQ Youth in the Child Welfare System

Are you lesbian, gay, bisexual, transgender, or questioning (“LGBTQ”), and IN FOSTER CARE?

Have you felt ignored, misunderstood, or discriminated against by the adults who were supposed to help you?

Have you found allies in the Child welfare system who supported you for who you are?

Do you have ideas about how to make life better for LGBTQ youth in the system?

We want to hear what you have to say!



CWLA and Lambda invite you to a
Twin Cities Listening Forum

Monday, May 17, 2004
2:00 PM - 5:00 PM

Hosted at **St. Mark's Episcopal Cathedral**,
519 Oak Grove Street
Minneapolis, 55403

(south side of Loring Park across from the Walker Art Center)

Call **Michelle Chalmers** at **Minnesota Adoption Resource Network (MARN)**, **612-746-5121**,
to RSVP or for more information

MEET OTHER LGBTQ YOUTH WHO HAVE BEEN IN THE SYSTEM

ST. MARK'S FREE SUPPER WILL BE SERVED AFTERWARD



APPENDIX B

Sample Adult Consent Form

**FOSTERING TRANSITIONS:
CWLA/Lambda Joint Initiative to Support
LGBTQ Youth and Adults Involved with the Child Welfare System**

A Study Conducted by the Child Welfare League of America in collaboration with Lambda Legal Defense and Education Fund

Adult Consent Form

I, _____, agree to participate in this study on lesbian, gay, bisexual, transgendered and questioning (LGBTQ) youth and adults in the foster care system conducted by the Child Welfare League of America in collaboration with Lambda Legal Defense and Education Fund.

The purpose of the study is to provide an opportunity for LGBTQ youth in care, as well as the adults who work with them, to share their real life experiences.

I understand that this focus group will last three hours or less. I understand that my participation is voluntary and that if I wish to leave I may do so at any time without giving a reason or explanation. If I withdraw from the group I understand that this will have no effect on my relationship with the sponsor. I promise not to repeat anything heard during this group outside of the group.

I understand that the group will be tape-recorded and the facilitators may take notes. These materials will be kept confidential and the names of the people in the focus group will be kept confidential.

I understand that a report summarizing the results of this and other focus groups will be written and that no participant names will be used in the report.

I understand that I might be contacted at a later date for my input concerning the effectiveness of the LGBTQ program. My responses will be confidential and no identifying information will be used in this assessment.

If at any time I have questions about the project or want to talk with someone about my experiences, I may contact: Rob Woronoff, MS
LGBTQ Program Manager, Child Welfare League of America
50 F St. NW, Sixth Floor Washington, DC 20001
Phone: (202) 662-4292 Fax: (202) 737-3687 email: rworonoff@cwla.org

Date

Signature of Participant

I certify that I have explained the statements written above to the adult participant. I believe that he or she fully understands its contents and that he or she has signed this agreement freely and without duress.

Date

Signature of Research Staff

Sample Young Adult Assent Form

**FOSTERING TRANSITIONS:
CWLA/Lambda Joint Initiative to Support
LGBTQ Youth and Adults Involved with the Child Welfare System**

A Study Conducted by the Child Welfare League of America in collaboration with Lambda
Legal Defense and Education Fund

Young Adult Assent Form

I, _____, agree to participate in a study on lesbian, gay, bisexual, transgendered and questioning (LGBTQ) youth and adults in the foster care system conducted by the Child Welfare League of America in collaboration with Lambda Legal Defense and Education Fund. The purpose of the study is to provide an opportunity for LGBTQ youth in care, as well as the adults who work with them, to share their real life experiences.

I understand that taking part in this study is voluntary. I may choose not to participate at any time. If I choose not to participate, it will not affect any services I may be receiving from any organization. I understand that I might be contacted at a later date for my input concerning the effectiveness of the LGBTQ program. My responses will be confidential and no identifying information will be used in this assessment.

As a participant in this study, my identity will be protected. My answers will be grouped with the responses from other participants in order to ensure confidentiality of my personal information. I understand that this study is designed to protect my privacy and that any information I give, such as information about drug use, alcohol use, or violence not involving a child, will be kept confidential. The only information that will not be kept confidential is any information I give about a child or adolescent who is being abused or harmed or is in serious danger of being abused or harmed. This includes me. I understand that somebody will try to contact me when anyone connected with this project share any information I give regarding serious harm to a child.

If at any time I have questions about the project or want to talk with someone about my experiences, I may contact: Rob Woronoff, MS
LGBTQ Program Manager, Child Welfare League of America
50 F St. NW, Sixth Floor Washington, DC 20001
Phone: (202) 662-4292 Fax: (202) 737-3687 email: rworonoff@cwla.org

Date

Signature of Youth

Date

Signature of Parent/Guardian

I certify that I have explained the statements written above to the participant. I believe that he or she fully understands its contents and that he or she has signed this agreement freely and without duress.

Date

Signature of Project Staff

Sample Youth Assent Form

**FOSTERING TRANSITIONS:
CWLA/Lambda Joint Initiative to Support
LGBTQ Youth and Adults Involved with the Child Welfare System**

A Study Conducted by the Child Welfare League of America in collaboration with Lambda
Legal Defense and Education Fund

Youth Assent Form

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Phone: (202) 662-4292 Fax: (202) 737-3687 email: rworonoff@cwla.org

Date

Signature of Youth

Date

Signature of Parent/Guardian

I certify that I have explained the statements written above to the participant. I believe that he or she fully understands its contents and that he or she has signed this agreement freely and without duress.

Date

Signature of Project Staff

APPENDIX C

FOSTERING TRANSITIONS: CWLA/Lambda Joint Initiative to Support LGBTQ Youth and Adults Involved with the Child Welfare System

Joint Initiative Overview and Description of Regional Listening Forums

Joint Initiative Overview

The Child Welfare League of America (CWLA) and Lambda Legal Defense and Education Fund (Lambda) have joined together to help child welfare and foster care systems change the way they serve lesbian, gay, bisexual, transgender, and questioning (LGBTQ) people. For too long, LGBTQ young people in care have been invisible, misunderstood, or worse yet, victimized by the systems intended to protect them. Our Joint Initiative will support child welfare agencies to better serve LGBTQ young people as they transition from foster care to adulthood.

CWLA and Lambda are each national leaders in their fields. CWLA is the country's oldest and largest advocate for children and youth, and has a membership of nearly 1,200 public and private agencies, including every state child welfare system. Lambda is the country's oldest and largest civil rights organization for LGBT people and people with HIV and AIDS. Lambda is known for landmark cases such as the 2003 U.S. Supreme Court decision in *Lawrence v. Texas*, striking down the Texas same-sex sodomy law, and its groundbreaking work on foster care, including its 2001 publication *YOUTH IN THE MARGINS: A Report on the Unmet Needs of Lesbian, Gay, Bisexual, and Transgender Adolescents in Foster Care*. Through our Joint Initiative, CWLA and Lambda will work to make life better for the LGBTQ young people, family members, and staff involved in child welfare systems.

This national project will engage the range of people involved in the child welfare system, from LGBTQ young people themselves, to child welfare experts, foster and adoptive parents, faith-based providers, caseworkers, and administrators. CWLA and Lambda will draw on real life experiences and insights through a National Advisory Network and through Regional Listening Forums that will be held around the country. We will respond to the concerns, gaps and solutions that are identified with resources for child welfare systems to serve LGBTQ youth, including training materials, model programs, practice guidelines, and advocacy tools.

Regional Listening Forums

The purpose of the Regional Listening Forums is to provide an opportunity for LGBTQ youth in care, as well as the adults who work with them, to share their real life experiences. We intend to create a picture of what life is *really* like for these young people in their communities. We hope that a blueprint for creating a more LGBTQ-friendly youth service environment in each community will emerge at each Listening Forum. CWLA and Lambda will hold these Listening Forums in a variety of settings, urban and rural, within each region of the country. Most will focus on the overall issues facing LGBTQ youth in care, while some will focus on a specific population—such as LGBTQ youth of color—or a specific issue—such as working with faith-based child welfare organizations. The stories we hear and the data we collect at the Listening Forums will be published in a report that will be a resource for understanding, supporting, and advocating for LGBTQ youth in care.

Regional Listening Forums

Meeting Length: 3 hours

Agenda

- I. Welcome, Introductions and Initiative Overview (30 Minutes)
- II. Break-out panels (90 Minutes)
- III. Break (15 Minutes)
- IV. Report Back, Next Steps and Wrap Up (45 Minutes)

Breakout Groups

GROUP A — Identify existing services and supports for LGBTQ young people

1. What programs, services and resources are currently available in your community for LGBTQ young people?
2. What individuals, agencies or organizations do you know that are supportive of LGBTQ young people in foster care?

3. What school programs do you know that are supportive of LGBTQ young people in foster care?
4. What is being done and what could be done in your community to locate and train foster families for LGBTQ youth?
5. What is being done for LGBTQ youth in foster care about finding permanent situations, including family reunification, adoption, or, for those preparing for independent living, permanent connections, in your community?
6. What has been most effective in helping LGBTQ young people in foster care?
7. What individuals, agencies or organizations do you know that are supportive of LGBTQ young people who are homeless or runaway?
8. What has been most effective in helping LGBTQ young people who are homeless or runaway?
9. What has been the experience of LGBTQ adults involved with the foster care system?
10. Estimate how many LGBTQ young people are in foster care, based on your experience.
11. Estimate the percentage of homeless or runaway young people who are LGBTQ, based on your experience.
12. What are the three most important items to report back to the entire group?

GROUP B — Identify needs of LGBTQ young people and barriers they face

1. What are the most pressing needs of LGBTQ young people in foster care?

2. What are the most pressing needs of LGBTQ young people who are homeless or runaway?
3. What issues at school are faced by LGBTQ young people who are in foster care, runaway or homeless?
4. How effective are efforts to find permanent situations for LGBTQ young people in foster care, including family reunification, adoption, or, for those preparing for independent living, permanent connections in your community?
5. What are the main barriers to supportive services for LGBTQ young people?
6. What can be done to overcome these barriers?
7. What are the main issues faced by LGBTQ adults involved in foster care?
8. Estimate how many LGBTQ young people are in foster care, based on your experience.
9. Estimate the percentage of homeless or runaway young people who are LGBTQ based on your experience.
10. What are the three most important items to report back to the entire group?

GROUP C — Identify steps for the future to improve services for LGBTQ young people

1. What do you see as areas of expansion for programs and services for LGBTQ youth?
2. What are the most important steps to improve foster care for LGBTQ young people?

3. What could be done to improve finding permanent situations for LGBTQ young people, including family reunification, adoption, or, for those preparing for independent living, permanent connections in your community?
4. What individuals and/or organizations need to become more involved to help LGBTQ young people in foster care?
5. How do you think they could become more involved?
6. What could be done to improve school settings for LGBTQ young people in foster care?
7. What are the most important steps to address the needs of homeless and runaway LGBTQ young people?
8. What do you see as areas of expansion for programs and services for homeless and runaway LGBTQ young people?
9. What are the most important steps to support LGBTQ adults involved in foster care?
10. Estimate how many LGBTQ young people are in foster care, based on your experience.
11. Estimate the percentage of homeless or runaway young people who are LGBTQ, based on your experience?
12. What are the three most important items to report back to the entire group?

